Introduction to Annie Hopper and the Summit

Hello everyone. My name is Doctor Richard Horowitz and I'm the co-host of the Doctor Talk Healing Lyme Summit 2.0. It is my great pleasure today to introduce you, Annie Hopper.

I met Annie several years ago in California at the ISI conference, when we were discussing neuroplasticity and the dynamic neural retraining program. So we are going to discuss today the healing power of DNA and those who suffer from chronic Lyme disease and chronic fatiguing illnesses.

So, Annie, thank you for joining us today. Oh, thank you so much, Richard. It's a pleasure to be here speaking with you. And so nice to see you again. Yeah, good to see you.

Yeah, it was interesting, you know, when I was at my darkest place and my own illness journey, I made a promise to myself and God that if I found the answer to out of suffering, that I would spend the rest of my life sharing that with people.

So thank you for providing this. The opportunity to do just that. Oh, absolutely. It's my pleasure. And and honestly, the whole the great point about these doctor talks is I get expert like you who come on because it's very difficult to get 40 to 50 of the world's experts in one place, right, to discuss how you heal from this, you know, really horrible chronic disease.

So I'm really happy you can join us because my wife, as I've told you earlier, my wife has done your program. I recommended your program to a lot of patients.

So I'm really happy to have you here. So why don't you tell people a little bit about yourself and kind of how you got into this and how you developed the DNA?

Yeah, sure. Well, like a lot of other people, I came to the gracious position of helping other people recover because of my own experience in suffering and recovering from disabling illnesses like severe chemical sensitivities, fibromyalgia, electric hypersensitivity syndrome, and ensuing depression and anxiety.

And, you know, I really get the extreme challenges that come with living with these chronic conditions. And the isolation and sometimes the desperation that comes with that, for sure.

But I think before I really start with my story, I think I'd like to take just a second to talk about the limbic system and what it does and what happens when it's not working functionally, and how it how it affects your nervous system.

So, the limbic system is involved with the learning and memory and emotion and the brain's stress response and also sense of smell. And it's constantly, constantly surveilling our environment, our internal environment and our external environment.

And it's constantly, constantly evaluating our levels of safety. But when it's impaired, it affects the accuracy of messages being sent by the brain regarding threat evaluation, sensory perception.

And of course, this affects our overall sense of well-being and health.

Limbic System Dysfunction and Chronic Illness

But the impairment itself actually causes an upgrade in the HPA axis, which, you know, which is, related to our stress response. The endocrine system, the autonomic nervous system and the immune system.

And it's not uncommon for patients. And I know that you probably see this all the time, that they might become sensitive to medications or supplements or foods and the nutrients that we actually need to recover.

So it's kind of when you have a limbic system impairment or it's also called central sensitization. It's kind of like having a home security system that's gone and gotten a little bit too sensitive.

So, you know, first it's triggered by, the person delivering something at your front door, and the next time it's triggered by maybe the cat walking by your driveway, and then perhaps it's triggered by a branch that's blowing up against your window during a storm.

So that's kind of what happened to me. I had like various numbers of events or stressors that took place and that that culminated in the limbic system impairment affecting this part of my brain.

And there's a lot of different onramps to developing this maladaptive stress response and, and limbic system impairment. And for some, as you know, it's viral or bacterial or for others, it could be mold or chemical injury or a physical injury.

And for some it might be psychological or emotional trauma. And oftentimes, as you know, people have more than one onramp. Right? It's very, very rarely that they have just one event happening.

And for me, I really hit the tipping point in 2004 when over about a two year period, I had a number of events happened. One was I was in a car accident, I had a neck injury.

I was exposed to wildfire fire smoke, which is not uncommon for a lot of people right now. I was working in an office that had mold. I was also exposed to high levels of velocities from industrial cleaning products and also off gassing of new furniture.

And, you know, even when I look back even further, when I look at, you know, emotional trauma that may have contributed to developing limbic system impairment.

I grew up in a home with a very strict and abusive alcoholic father. So you can imagine that the threat centers in my brain were already used to being on high alert even before all of that other stuff.

So the symptoms that I had, you know, it started off with insomnia and muscle twitching and brain fog and chronic pain and ensuing anxiety and depression and this ever expanding, weird kind of list of sensitivities.

So I became sensitive to everyday products like perfume or cleaning products or car exhaust or whatever. And it got to the point where the symptoms were so severe.

When I was exposed that I would go into almost what I would call like central nervous system convulsions. So if someone was doing their laundry and I have to walk by their laundry exhaust, that was it.

You know, I couldn't think, I couldn't move, I was going into convulsions. So it became really difficult to navigate the world, you know, like I couldn't go out of my house.

I couldn't socialize with people, I couldn't work anymore. And it was really isolating and debilitating. So for me, at the time, it seemed like avoidance was the only answer.

That was the only way to kind of survive. But, you know, as you can imagine, like a lot of people, I did a lot of treatments. I went to some of the best experts.

I saw very a lot of well-meaning health care practitioners who know a lot, and their treatments work for a lot of other people. But for some reason, it wasn't working for me, and I was stuck in an illness pattern.

And it wasn't until I addressed brain function that I actually started to recover. And, you know, my entryway into the

plasticity was actually through deductive reasoning, figuring out what it was and what it wasn't, and knowing that my brain was involved.

And I started to really study the limbic system, which was responsive, which is responsible for sense of smell, and also looking at the work of doctor Norman Doidge, who wrote who's a Canadian psychiatrist who wrote the book, the brain That Changes itself and the Brain's Way of Healing.

Anyway, it was the brain that changes itself, which was a big moment for me. And really looking at neuroplasticity of that time and how they were using the principles of neuroplasticity to treat and cure some incurable conditions or what people would think are incurable. So, you know, I think it's common knowledge now that we know that limbic system impairment or central sensitization has been recognized as a possible consequence of a stroke or spinal cord injury.

But I think it's becoming increasingly clear that it also plays a role in a lot of different chronic and complex illnesses like chronic Lyme disease, like long Covid, like PTSD and chronic pain.

And the list just goes on and on and on. So anyway, that's a little bit about my story, you. Know, and you know, your story is exactly the same story I hear from all of the patients in our practice.

You know, you know, Nathan and I recently, you know, chatted about this and we're all seeing basically the same things I affectionately call my patients, the walking wounded.

Simply because most of them have had some trauma when they're young and including myself. I'm kind of empathic myself, as is my wife, so we're very sensitive to the outside world.

Also had a difficult childhood. So I, you know, I think all of us, at some point we've had traumas and it just affects people differently. But in our world, at least in my world, almost every person who's coming in these days has chronic Lyme disease.

But PCOS, Bartonella, osis, mold exposure. Many now are showing up with long Covid. They've got leaky gut with food sensitivities and Marcel disorder.

The microbiome has been thrown off. They can fall asleep. They've got vitamin mineral deficiencies and all of these sources of inflammation, which I call like the the rivers of inflammation causing an ocean of inflammation.

It affects your limbic system and your autonomic nervous system. And these people come in with pots, this autonomia where, you know, they stand up, they get dizzy.

They say, I feel like I'm going to pass out or they are passing out. And, you know, it's not enough. Just give them salt and fluids or drugs like mid-ring or floor enough to raise their blood pressure.

We need to find ways to kind of reverse the entire process. So, so with neuroplasticity, you're alluding to this a bit. So in all of these different diseases, chronic Lyme disease, Bartonella mold, long Covid, the problem with neuroplasticity is we get the wiring kind of mixed up with these diseases after a while.

And, unless we can actually go in there and fix the wiring, the problem is, is you can sometimes clear the infections, you can pull out the mold, you can treat the leaky gut.

But if the wiring is still off, this is kind of a simplistic way of doing it. Basically, you're going to just stay highly sensitive to the world and have all this reactivity.

Is that kind of essence of what it is. Yeah, absolutely.

How the Dynamic Neural Retraining System Works

That's a really great way of describing it. I mean, your brain and your body gets stuck in this fight, right? Or free stress response, even if the initial injury is no longer present. So, you know, it alters our ability to accurately perceive, spread our immune system gets stuck in a pattern protective response that's being signaled by the brain.

Like you said, it causes like tons of inflammation and so many other things. And the brain and body, they just remain on high alert even if the initial threat is no longer present.

So you're right, you can treat everything else, but unless the brain is actually addressed, then the person still might be in that cycle of chronic illness.

So I guess the good news is, like you said, we can rewire the brain. And, through specific exercises that I've developed, I've taught thousands of people how to retrain their brain and, rewire the limbic system.

And they've recovered their health as as a result of that. So, yeah. So how did you come up with the DNA system? So DNA stands for dynamic neural retraining System.

How did you actually come up with. You're a psychologist, by the way. Yes. Yeah. So I was I was a previous counselor was a core belief counselor before I got into actually, it was before I got sick.

That's, that's what happened. I was, renting an office at a space that actually had mold. So, anyway, yeah, my counseling practice went a little bit downhill after that.

But, anyway, how I came up with this, it was through a series of influences. Like I said, Norman Doidge, looking at neuro linguistic programing, looking at the work that I did as a core belief counselor and, and how belief systems actually change the brain, how our thought patterns, change the brain, how emotions can change the brain, how our behaviors change the brain.

I mean, it's all it's all drug free and it's self-directed. So how I would describe the dynamic neuro retreating system is that it's a self-directed neuro rehab program, and it uses the principles of neuro plasticity to actually reverse limbic system impairment or central sensitization and really regulate that maladaptive stress response and decrease inflammation that's involved in many complex and chronic illnesses.

There are both. What I would say is there are five pillars of recovery to the program, and I think that it's important to know that I don't know that I can describe, like, you know, everything that we go through with the program.

But I will touch on the five pillars, which are really important to keep in mind when going through the program. So the first pillar is that you need to really understand the connection between your brain and your condition.

So meaning so we go through in the program, I extensively go through the science about how your brain may have been affected by various forms of injury or toxic injury, and I think it's this mindset that helps you understand how the brain is involved and really kind of wrapping your head around that.

Oh, okay. You know, maybe I've already treated everything else. Is the brain still the missing piece of healing? So that's pillar one. Pillar two is really is called interrupting and redirecting your pathways of the past or what we call pops.

And that's where you get to identify any kind of physical, emotional, psychological or behavioral patterns that are associated with the limbic system impairment and change those patterns.

So it's interesting because you could imagine that if the limbic system is is surveilling your environment all of the time for cues of safety, and it's not working, then you constantly feel like you're under attack and under threat all the time.

Now, if that's the case, you can imagine that's that's going to affect your thought patterns. And your thought patterns will be concerned, consumed with threat.

Your emotional patterns will be, you know, basically emotions that are related to fear and, feelings of anxiety and fear and hopelessness and, ensuing depression and also your behaviors or generally avoidance and protective behaviors.

So we know that those are symptoms of the actual impairment itself and the way that we can change the brain through self-directed neuroplasticity is really to change our thought patterns, to change our emotional, responses, and also to change our behaviors and understand how the brain is being affected and how we can act back on the brain in that very moment to actually rewire the circuits.

So that kind of leads up to pillar number three, which is actually doing, what you referred to earlier. It's the actual retraining steps. And they're called the retraining steps.

And they're they're little places, mats that you put on the floor and they're various different steps in that. And part of part of that is really to change, the association to really, dampen down that threat response and acknowledge that a lot of this is coming from, this threat response in the brain.

And then the last couple of steps are really about rewiring the circuits, right? So you're moving away from the circuits that your brain actually goes down.

So that involves a variety of, methods like speech movement, visualization and thought and emotional restructuring and the intent of this is to decrease threat centers in the brain by flooding the brain and body with neurotransmitters and hormones that are related to a state of growth and repair.

So we increase by increasing positive hormones. It helps to regulate the stress response and cool off those threat networks in the brain. So, it may seem a bit odd, but through visualization, we can we can rewire the brain.

And we know that that's true. We know that professional athletes do that all the time. They, they, they have, you know, that mental rehearsal as, as part of their training.

You know, it's funny, years ago and it wasn't specifically in med school, I learned that separately because I recognized that I had trauma myself when I was young.

I used to remember reading the books on this, where the brain can tell the difference between a real event and an imagined event, if you imagine it clearly and in detail and in some of the prior courses that I've taken, and this is many, many years ago when you did this, it was like saying to yourself, I'm so happy and grateful now that you're in the present moment.

But and some of it is with tapping techniques and, you know, this is a lot of different back techniques out there. But it was very interesting that the brain actually cannot tell the difference between an imagined event at a real event when you're doing it clearly right and in detail, there's a part of the brain that rewires itself, right, as, as if the actual thing happened.

And it's a way of getting through the threat response. Yes, absolutely. And part of the visualizations that we teach people, as I go to the happiest moment that you can think of, you know, go to a, a peak experience of joy or, or even if you don't go to joy, go to something that you appreciate, you know, something that really brings you a sense of peace and elevate your emotional state.

Because what we're trying to do here is to really send the brain cues of safety, and the way to unlock the brain from a stress response is to ensure that the brain actually thinks that it's safe.

And it's it's interesting because I always, I always say, Richard, that the brain is really not that smart. We're smart as human brain, human being. Sorry, but our brains aren't that smart.

It's a it's a pattern recognition organ. So we just want to feed a different pattern so that it gets used to, you know, a new pattern and it can unlock from survivor responses.

And part of that is definitely through guided visualization. And it's true the brain doesn't know the difference between what's real and what's imagined.

And that's also why we don't really talk about trauma that much either. We're like, hang on a second. You know, I don't we don't. From our perspective, I don't think it's really that important to, revisit trauma.

When you, you have limbic system impairment and perhaps the our energy could be used in really developing alternative neural pathways to get out of that stress response, because as we remember trauma, it's as if it's happening in the moment, too.

So we take that principle of neuroplasticity in the brain's kind of not knowing the difference between what's real and what's imagined, to actually we capitalize on that principle and move the brain in a different direction.

So you brought up and you brought up an interesting point. I have a friend of mine, a very close friend, and, she I think she's afraid sometimes to go to those areas of trauma because, like myself, she's had issues.

What you're saying is in this particular technique, people don't necessarily have to revisit all of these painful memories in the past as ways of creating new, positive pathways without necessarily having to go into that hell that you were in from years ago.

Absolutely, absolutely. In fact, that's what I think. That's probably what I love the most about the program. And, you know, the way that I came to that is I had done a lot of personal work.

My goodness. You know, for years and years and years, I did a lot of personal work. I had healed a lot of trauma and yet when I had limbic system impairment, it was as if it was happening again.

And I thought, you've got to be kidding. This is coming up again. This is something that I healed years ago. And so it was really interesting to be that curious observer and go, wow, past trauma is coming up as if it happened yesterday.

And really, do I need to go there again? And believe me, I tried, right? I was like, okay, I know how to address this. I'll do everything that I used to do before, but it didn't work.

The same tools that I would have used with a healthy brain all of a sudden were not working with limbic system impairment. And that's how I knew, okay, going to trauma actually wasn't the key to getting out of a limbic system impairment or limbic response.

So yeah, I've got. A quick question about safety. So a lot of our patients now and you were talking about wildfires.

Trauma, Safety, and Rewiring the Brain

Unfortunately in this day and age, wildfire smoke from Canada, flooding that's happening all the time. I was in Asheville, North Carolina, actually a couple of months before their flooding.

If you start to do these techniques and you start to clear this, but there's constantly triggers in the environment, I'm actually wondering, is this something because we're now living in a world that is is constantly changing because of the climate and everything happening?

Is this something that's an ongoing thing that people actually should be doing? Maybe because I mean, can people go backwards a little bit with some of these new traumas because, you know, you will smell wildfire smoke at certain times of the year, whether you're California or there.

And I know for certain people it will trigger things. Same thing with with the storms that coming with the hurricanes. Right. And all the trauma. So, is it something we need to be doing on a regular basis?

Can you clear this or is it actually just a healthy exercise that maybe in this day and age, because there are so many things kind of coming at us all the time that we should actually be thinking of doing?

I mean, for myself, I've been studying with Tibetan lamas for over 40 years, so I have meditation techniques. A lot of the things that I do regularly.

What do you think about this as far as like this, is this a one shot deal, like, you do this, or is it like it's something we need to be doing regularly just because of the way of what's happening in the world these days?

Well, it's an interesting, interesting question because there are two trains of thought that come up for me when you say that. First of all, yes, you're right.

We're living in a changed world. So how do we deal with all the crisis and the chaos that's happening around us there? Having a practice that brings you to a centered place of peace is always a good thing, no matter what is happening.

So, you know, having that grounded space to work from and to navigate the world from is a really good thing. So I think it's a tool for life. Absolutely.

You can use it as a tool, a tool for life. However, it's not going to prevent trauma, right? I mean, I think it can definitely make you more resilient.

Absolutely. Make your system more resilient. Absolutely. But you know, there are always two truths, right? So the two truths are, yes, they're real environmental exposures that we need to be aware of.

And we want to maintain a healthy life as much as we can and then understand that that second truth is, you know, your brain might be affected by that.

And if that's true, it can be resulting in a number of neurological and physiological changes that can be changed through rewiring your brain and changing that maladaptive stress response. So, yeah, I think I answered that.

Does that answer your question? Yes. No it does. So why don't you give us a couple of healing stories of, like, people who've gone through this that had, you know, issues before and kind of let us know what the process was and how they're doing now and could be people with, quote unquote, chronic fatigue syndrome myalgic encephalitis, fibromyalgia, or long Covid or chronic Lyme.

If you've got a couple of stories just to share on that. Yeah, sure. I do have a couple stories of chronic Lyme. But before I go there, I just wanted to go to the fourth pillar and the fifth pillar of the program, because I think I forgot to talk about those.

So the fourth pillar is to apply incremental training, and that pillar involves change changing trauma and fear associations, along with applying graduated systemic desensitization exercises.

And these are imaginary and real to desensitize the brain and to strengthen positive neural pathways that lead to optimal health. And the fifth pillar is to elevate your emotional state.

So this kind of goes back to what we were talking about. How do you create that kind of place of resilience no matter what's going on around you? You know, I think, there is always something to be grateful for, even in the worst of circumstances.

And that's a far stretch for sometimes, and we can't find it if we're looking for it. However, elevating our mood, what I would like to say is elevated.

Our mood helps to unlearn threat associations and provides acute safety to the brain, so that allows for the brain to move out of survival related emotions and paves the way for positive neuroplasticity changes to happen.

So, yeah, I can go to a couple of stories of people that have recovered from chronic Lyme. That's, because I knew that I was going to be on the Lyme Summit.

Then, of course, those are the stories that I've picked for you. So, I'll share this one. And really, these are words from people's own own mouths. These are stories that people have posted on our global community forum.

We have, I don't know, over 16,000 people on our global community forum that are or have recovered or are in the process of recovering, and the poster wins and you know how they're doing all the time.

So this is what Samantha had, shared with shared with us. And she had a long health story and a bit of suffering for over eight years. She had a previous history of Lyme disease in 2007, and in 2012, she was successfully treated with antibiotics both times.

But then she had an extremely stressful event and trauma, followed by a mold exposure in 2014. It's sounding familiar. She spends the next eight years searching for relief.

She's diagnosed again with Lyme in 2020, along with chronic inflammatory response syndrome. Mast cell activation system, syndrome, sorry and food sensitivities and PTSD.

So her health continues to decline and symptoms worsen. Despite treatment, she saw a dozen medical specialists, environmental doctors, top functional medicine doctors.

She spent over $100,000 trying to find various treatments. She had been taking over 40 supplements a day, and still she was stuck in a cycle of illness and losing hope.

So, one of her functional medicine medical practitioners actually mentioned to her that she might want to try dress. And, you know, as a lot of patients are Samantha, she was hesitant to try, you know, another treatment, but she figured she had nothing to lose at that point.

So, in just eight weeks after implementing the program, this is what she noticed that she was these are the changes that she was noticing. And she noticed a change in immune function sensitivities and our emotional set point.

So she she shared with our community. She said, I can eat whatever I want, but I'm still eating healthy. I can buy anything in the grocery store. I seem to be able to buy anything anywhere.

I wear makeup. I'm not living in a constant state of fear.

Recovery Stories from Lyme and Sensitivities

And then she also noticed that she could take less supplements, and she had decreased sensory distortions, and that she was able to add back foods into her diet and the PTSD symptoms were lessening.

So she said, I take way less supplements from over 40 pills a day to just a fraction of that. I use hair products, you know, that's a big thing for a woman.

I can eat cheese. I haven't been able to eat dairy in eight years, and the scary sleep symptoms I was having have stopped. So she was referring to PTSD there.

So prior to, actually starting the program, she was on a very restricted diet due to reactions from foods that cost. And her diet consisted of no dairy, no gluten, no sugar, no honey or natural sweeteners, only low histamine vegetables, limited fruit, no alcohol, no caffeine, nothing processed no soy, and allowed only organic meat in small amounts.

And after ten weeks of implementing the program, she started to report big changes in her dietary restrictions and a

new freedom to go to different places.

So then she reported, I have the ability to go places and do things and, and, and enjoy life again. I ate pizza, pizza, onion rings at a buffalo chicken sandwich.

I mean, I'm not saying that that would be healthy all the time, but she drank a glass of wine. She had ice cream. She could be an older buildings. So I think that, you know, one of the biggest challenges about having limbic system impairment or central sensitization is that feeling of being alone in your illness.

But, you know, you don't have to be alone in your recovery process, as you know. And, we offer a number of support services that Samantha actually took advantage of, like individual coaching, like our 12 week group classes called living DNR us and participated often on our global community forum.

And, you know, prior to starting the treatment or go back to where her starting point was, she was living in a little tiny trailer for two and a half years, totally isolated from the world, living in fear and really having an unknown future.

And now, she said, I feel like someone opened up a cage and said, go, little bird, you're free. At eight months. She's taking no supplements. She only had one symptom left and she said, I know that I will continue training and that will go away too.

So that's one story. I thought I'd provide a couple of stories of someone that took a shorter amount of time to recover, and then someone who took a longer amount of time to recover, because I think people get caught up in how long is it going to take me to recover?

Everybody wants to know that answer, and I think it's great. Can I just ask a quick question? Sure. So the people that still have mold in their body or have not completely recovered from Lyme, or have Bartonella, is this program going to be effective for them in the middle of their treatment, or is it more effective after they've cleared these other things, or it can be done at any point?

Do you find like there's a difference in the effort, Cassidy, of the treatment, depending on how many of those things have actually been treated along the way?

I think that it can be that you can do the program at any point along that process. Absolutely. I think it'll still be effective. I think if you do it before treatments, that would be actually optimal because in your setting, the limbic, you're setting your brain up for, to be in a balanced response where you can actually, receive the treatments without any kind of limbic response.

I'm sure you probably see that ritual with a lot of your patients. Oh, no, these would be the hypersensitive women who have had trauma. Yeah, you try and give them even low doses of these medications, and they're having the timer's from hell with inflammatory response.

No, no, it's it's it's interesting. Because, you know, by the way, the beauty of doing these doctor talks with people like yourself is even though I know your program and I do this, it always makes me rethink, like, okay, in the future, if I have somebody that's that hypersensitive early on, maybe I need to take a couple of steps back, have them do these training because I like, you know, getting them through the zone as early as I can to clear the infections because it makes it easier for me to get them better.

But in those hypersensitive patients, I think you're bringing up a good point. If they started from a place where the limbic system was not so hyper reactive, they'd actually get through this, you know, the, the whole program a bit easier.

So yeah, thank you for sharing that because I absolutely do have people like that. And I think, it's a good point that maybe even in some cases start with it before we even do a lot of these programs, if, you know, you've had a lot of trauma and you know that your emotional system is kind of on hyperdrive.

Yeah, absolutely, absolutely. And like you said to, you know, it will help at any point for sure. But if you if you do have those hypersensitive clients to begin with, those patients, then yes, getting there central nervous system regulated before they actually start treatments is always a good thing because you could they're just going to be able to, to, receive treatment, in a better way.

Right. So, here's another story about Erin. She's a, client that recovered from chronic Lyme as well. And she had, an interesting perfect storm of traumas prior to developing limbic system and parents, she had anxiety and sense of sensory sensitivities.

As a young child, she had migraine, had started at eight, and became increasingly worse over the years. In 2015, she started developing many more symptoms after a probable tick bite and a period of significant emotional trauma.

And then she was diagnosed with, like Lyme and, chronic inflammatory response syndrome in the spring of 2016. And although, you know, the antibiotic treatment seemed to be a bit helpful and the treatments that she was getting, it didn't address the underlying neurological aspect of her illness.

So unfortunately, the treatments didn't work because of that. So she said that, you know, some of the treatments seemed helpful in reducing pain and discomfort, but it didn't make a lasting impact until she actually addressed the nervous system in her brain.

So, so here are the various conditions that she was diagnosed with prior to starting to address. And it was interesting, and I'm glad that you brought that up, because not one of the practitioners that she went to said, I think you might have central sensitization, or I think you might have limbic system impairment, and it would be really good to address that as part of your treatment protocol.

So she was diagnosed with a lot of other conditions like chronic Lyme, chronic inflammatory response syndrome, multiple chemical sensitivities, food sensitivities, fibromyalgia, chronic fatigue, migraines, PTSD and depression.

So she started implementing the program in January of 2019. And she said within the first few weeks, she started to notice, notice a difference in her mood and in sensory distortions.

So she said, on the very first day, I had such a huge mood boost, and I finally felt like I had hope for recovery. And then within the first few weeks, my sound sense, my smell sensitivity decreased and my mood stayed elevated.

And I think that that's an important part, because for people to have that chemical sensitivity, your sense of smell is through the roof, right? You can smell everything from a mile away and it no longer smells normal smells everything smells like anything with chemicals in it.

Smells like toxic bug spray. Or it really feels it feels, toxic somehow. But when your limbic system is regulated and your central nervous system is regulated, again, your sensory perception normalizes, and you no longer pick up that quality anymore, which is kind of like turning the world on its head, like it's it feels so liberating when your sensory perception is actually working normally.

Again, it's it feels like a big freedom. So anyway, she said, at six months, she's now noticing an increase in food freedom, continued, decrease of sensory sensitivities and a change in overall mood.

And she goes on to say, I've added many foods back into my diet fruit starches, refined flours and processed foods. My cell, my smell sensitivities and noise sensitivities are reduced drastically and I feel so much joyful.

And one and a half years into the program, she, Erin, is completely living a different life. She's noticing dramatic changes in energy and the ability to go new places and try new things.

She goes on to say, within a year and a half I was going on five mile hikes, feeling confident and full of energy, and I was expanding my comfort zone, exploring new areas of the city, eating in new restaurants.

And about two and a half years into dinners, she felt like she was completely thriving and she was traveling all over the world with her friends. I went on a big hiking trip, and she considered herself fully recovered at that point.

So yeah, those are just a couple of stories to share with, you. Know, that's it's great. So so tell me, is the interest difficult for people to implement?

Like, how often do they have to participate? People have busy lives, right? It's not some people to what's the minimum amount of time or the maximum amount of time that people have to do this.

And I know you said there's coaching programs, right? So people are just not doing this alone. No, no, we have absolutely a whole bunch of support systems, available to people who are going through the program.

So first, the actual program itself is an online video program, online training. And it's a 12 hour educational video program that teaches them everything that they need to know to start retraining their limbic system.

And we provide them with, you know, how the brain is involved and how to recognize thought, emotional behavior patterns that are, involved, how to cool off the threat responses in the brain through specific guided visualization, visualization techniques and, you know, the the pillars of the program.

But we can teach you, teach you that. But they have to actually start to implement it and implement it consistently for, we say, at least a minimum of six months.

So it takes I would say, you know, it takes about an hour a day and maybe not that much. I mean, people can start where they're at and just work, work their way up from there.

But, you know, perhaps about an hour of the guided visualization, techniques, but also being mindful throughout the day of, you know, thought patterns, behavioral patterns, how to change those patterns to actually regulate the limbic system.

So I think, you know, like you said, it's an eight hour like I said, it's an inside job, but you don't have to be alone in the process. And we have lots of support systems available for people so they can, you know, after they go through the program or while they're going through the program, it's they need to have individual coaching, or they want to join one of our 12 week living classes.

Or we also have the Global Community Forum. We also have share life classes that will help to elevate their emotional state. We have all kinds of support systems in place to help people.

So I would say, you know, maximum an hour a day, but be mindful of everything throughout the day as well. So it's not necessarily easy, but I can guarantee you that it's the best work that you can do when you're, you know, when your life is, life is in the balance and your health is in the balance.

I think it's a lot easier than I think. It's a lot easier to implement than a lot of coping strategies.

Program Structure, Support, and Daily Practice

And it's been it's interesting you mentioned mindfulness because one of the key factors when I, in fact, I, I mentioned to you earlier before we came on here that I was in British Columbia, where you are many years ago doing a meditation course with a very famous, Tibetan Lama Rinpoche.

And one of the things that he taught, apart from the mudra meditation, was what you do in post meditation. And the basic instructions are mindfulness, awareness and watchfulness, meaning you have to be mindful, right, of kind of what's going on in your mind, awareness, right of, you know, the world around you, but also the internal state like of thoughts that are arising, where thoughts are coming from, where they go.

And this watchfulness kind of just making sure you don't get caught up too much, but staying aware of kind of

what's happening both in the inner in the outer world.

And that was his instruction for actually advancing in meditation, that if you just do 15 or 30 minutes of meditation a day, but don't implement mindfulness, awareness and watchfulness and the post meditation, you don't get the same benefits from it.

So it sounds like you're, kind of incorporating actually some of the same, some same advice for people there. Yes, absolutely. Because, you know, you're one hour a day of training, you know, what you're doing in the other 23 hours a day matter, too.

And so it's. So, you know, when I spoke to Neil, Neil has let me know, though, that people sometimes do it for a half hour a day or less. I mean, to start.

And they still seem to get some help, and I think it's necessary because I think it's daunting for people sometimes to find an hour out of their day. Even though I agree with you the kind of trauma that people had, it should happen.

But boy, we're we're all so busy people that, I think people should just know they can put their foot in the water, get started and right, they're still going to get the benefits from it. Absolutely.

And they can break that up into increments of 15 minutes at a time. Right. So it doesn't have to be this daunting. Oh my goodness. I have to have an hour to do this.

And you know, I think that that's where the, living DNA classes come in. Really handy too, because then you have this added accountability and this, you know, everything's always easier if you have accountability in a group to do it with. Right?

So, you know, not only do you have professional instruction about how you implement your interests in your daily life, but also you have a group of peers with you and you visually actually see these people improving too.

So you are, you know, now it's not just about you, it's about you showing up for other people too. And I think that that's a really important piece of, motivation and staying motivated to practice.

So I, I can't I can't speak highly enough about our living classes and, and our individual coaching to for people that might have, you know, challenges about I don't know how to apply the program for my specific situation or I feel so different.

I don't think that this relates to me. If they're having questions like that and, you know, booking a session with an individual coaching session will really help them.

You know, I think one of the other challenges that people have with the implementing the program is they expect the recovery process to be linear. You know, they expect recovery to just happen, like, oh, here I am starting the program and I'm just going to get better and better and better and better.

And actually, that's not what recovery looks like with limbic system impairment and recovering from, limbic rehabilitation in general. Really? You could get a little plateaus and then people will dip down a little bit, and then they'll get a little bit better.

And then it goes around in circles and, you know, and you keep trusting the process and you keep committing and eventually you end up out the other side.

But the journey there might seem a little bit like a tangled mess sometimes. And that's why, again, it's really good to have that accountability and to be in those group sessions where you recognize, oh, what I'm experienced is what I'm experienced.

Seeing is actually quite normal in, in regards to the rehabilitation process. So, yeah, that's that's what I, that's all I

wanted to say about that. Yeah. It's great.

So how do people get started with this? Yeah. Well, they can go directly to our website retraining the brain.com. They can buy the program right away.

Or if they'd like to know more about how I created the program, they could definitely purchase my book. It's, called wired for healing. How I forgot the title of my own book, wired for healing Remapping the brain to recover from chronic and mysterious illnesses.

And that can be bought on our website or through Amazon. Or if they'd like a little taste of the program. And they want to know, you know, I don't know if this resonates with me or not, they can try our seven day free trial and then go from there.

A lot of people find that once they see the once they understand how the brain is involved and like, oh, I get it. I totally see myself in this and I'm willing to take the next steps.

So, so again, the it's retraining the brain.com. That's how people can contact you with it. Yep. That's right. Great. Anything else you want to share with people that you think is important?

Obstacles, difficulties like or or are you finding as long as people really stick with this long enough? I mean, nobody's got a success rate of 100%. Obviously there's things that get in the way, but can you just give people a sense because obviously it's very hopeful.

I by the way, a couple of my patients have done it. I have a chemically sensitive patient who's definitely improving, on the program. So, there's not even a doubt it works.

And I think it's good that you mentioned for people that, you know, it's not a linear process. You have to be patient sometimes, right, with this. But but if people do stick with it, do you have a sense with it?

Because like, for example, with what I do with some combination therapy, it's excellent at lowering down the low to Borrelia and, you know, obviously seeing help with Bartonella and the rest, but it's not going to be 100% effective for everyone.

But honestly, when it's not, and this is the interesting part for me, I found it. When the combination therapy doesn't work, it's usually because the body is still active or they still have active Bartonella or they have chemical sensitivity that they've not dealt with with limbic, you know, system dysfunction, and traumas that still have to be addressed, or heavy metals or muscle toxins that still need to be removed or they've got mitochondrial dysfunction.

In other words, I work with the 16.6 map, which is six overlapping factors of inflammation and ten downstream effects. But it's interesting that the program that I'm doing generally does work well, but the limbic piece does seem like it's really like one of these key factors.

And I've discussed this with Neil also during this, that people really need to be doing this to be able to heal. I don't think most people recognize that, no matter where you are and for me, for example, I've, you know, my leaky gut is much better over time, but I still have some food sensitivities.

My wife, although she's definitely healed a lot from her trauma, I sometimes call her the crazy woman of Stansbury because she's so sound sensitive. She still has the sound sensitivity from the trauma.

You know, planes go overhead, and she's yelling at the planes, like waving at them, going, honey, they're going to think you're crazy, baby. It's like, come inside, come inside.

And that's like, well, she. And she knows that she needs to do more of this kind of limbic vagal retraining. I, I think in the world we're living in, I don't I think it's one of the most important healing processes that that people could do, but, but do you find, like, there are things that get in the way or that, that stop it from being effective?

Like, for me, it is still active mold or it's active Bartonella, that they're not getting the full effects of the program. Are you seeing those kind of things also still interfering?

Yeah, absolutely. I mean, I think I think it's really variable and it depends on the person. And, you know, I don't have access to their toxicology report.

So, you know, I don't know exactly what's going on for them or if they've addressed this or addressed, you know, you know, 10,000 other things. However, what I will say is that if you can get the brain to unlock from a survival response, your body in general will be able to clear things a lot better from that place, from a calm nervous system.

So, you know, how effective is it for different people? I think it's about how committed they are to actually implementing the program. And because it's self-directed, I mean, it's kind of, you know, Richard, you have a meditation practice, right?

If you don't do it, how effective is it? Right? I mean, you can always have that as a, a backdrop, but you need to actually apply what you're learning on a daily basis in order for that, for the program to be effective and to unlock the brain from survival responses.

Results, Long COVID, and Closing Thoughts

So I think it's really individual. We've had a lot of great results with a lot of, different conditions and, you know, I don't know, you know, I would I don't think I can say exactly what happens at what time.

Like, you have to do this first or you have to do that second, or you have to do that. Third, I think that when you actually address the brain and the central nervous system, that everything will have a better chance of working and resolving whatever.

And I think that's really the basic point is until the mold is out of your body or until Bartonella has been hit or stuff, you may still stay ill. But the point being, if you're in a stable place where you're in a calmer place, a place of safety, place where the wiring of your brain does not so hyper reactive, you're going to have an easier time getting through the protocols and ultimately better results from the protocols.

I mean, I think that's really one of the key points, you know, here with it. Anything else you think that's necessary to share with people? I mean, this has been a great talk today, by the way.

I think this talk is going to give people a lot of hope. I think, look, it it's applicable for me. It's applicable for my wife and for pretty much all of my practice.

And I know a lot of the functional medicine docs. It's the same thing. You find that even with long Covid we mentioned long Covid earlier. You know, the NIH has thrown billions of dollars at this disease trying to figure this out.

Do you have people who have had done, the Hopper DNA test and have found that some of the symptoms, the the chronic fatigue, the post exertional malaise, these things, are they getting better sometimes with the program?

Yes, absolutely. In fact, I had a researcher from, Sweden contacted me a few years ago. It's like how many years of how many years since I've been pandemic, right?

It's all a big blur. But anyway, she contacted me and she said, do you think it'll work for a long Covid? And I said, yes. And she said, no. I mean, the worst people.

They are still in the hospital. They have pots, they have long Covid, they can't get a bed, can't get out of bed. And I said, I have every reason to believe that the program will work.

So they took a group of 35 patients. They started them on the program. And yes, most of them were covered and

five of them were doctors themselves. You know, unfortunately, that study was not written up.

It's not in any publications that you'll be able to see. They didn't get funding to do a larger study, but I can tell you that it's working. And one of the patients, actually, she wasn't part of that study, but she was from Sweden.

She's a doctor and her name is Sandra. And, her testimonials on her website. That's the other thing I would say to people, go to our website and look at the testimonials.

Because if you're looking for people that have recovered from what you're you're suffering from, you'll find them. But anyway, Sandra's one of her video testimonials.

And she had had, you know, initially with long Covid, she had, she had a number of cognitive issues and she actually forgot she couldn't remember how to spell anymore.

And she couldn't she couldn't function at all. And then she started to develop a lot of sensitivities, a lot of sensitivities to food, to chemicals, to sounds, to a whole bunch of things.

And, she lost the ability to walk because she had pots so bad. And, she, she fully recovered within probably about 3 or 4 months, I would say. So, yeah, it's it's possible.

I'm not saying that recovery is going to be that quick for everyone. And again, if they could reset their nervous system at the beginning, then I think that they would have a much easier time of recovery.

But it doesn't matter how long they've been sick. And yes, we're seeing lots of people with long Covid recover. We're going to be having a, well, we'll be involved in a clinical trial coming up next year, and I'll be able to report more news of that once it actually starts.

But just to let you know, we will be involved in a clinical trial to look at, DNA s, how effective DNA is with, in patients with long Covid and with, chronic fatigue.

Yeah. And these and these are not, you know, because when I speak to my functional medicine colleagues, what I hear from everyone's kind of looking at different ways of healing long Covid.

Oh it's the nicotine receptors. It's all dysfunction. We've got pieces of the virus or active virus, you know, in the colon or in fibrin clots. And we have to use fiber analytics to open it up and work.

The the feeling of this function and the nicotine receptor, I mean, there's there's a lot of theories out there as to why, you know, people are staying sick, but the mast cell activation that's going on and, and I think all of those probably do have a role.

But I think again, the interesting part about that is your central nervous system still is dealing with all of this, right? I mean, all of the the signals are still coming in there from inflammation.

And if you can be in a calmer place, then it's possible that even some of these therapeutics that are being looked at right now may be more effective.

It's not like I think it's going to be the be all and end all just, you know, resetting it. But I think it's an important factor here. While we're trying to figure out the puzzle, right, of long Covid, just like years ago when I was dealing with chronic Lyme, I felt like, wow, I finally figured out a piece of getting rid of Borrelia.

If we're not completely curing it, at least knocking down the load so much on my wife, for example, is six years in full remission and she was sick for 25 years and she only needed one month of double dose.

So and at a certain level, it knocked down the load. And she's been great ever since. But she still has some plots. She still has some sensitivity. Right?

I mean, it's because the limbic system is not being completely healed. And I see that in a lot of the patients that this is a missing piece. So, I want to thank you, Andy.

This was this was actually a great talk. I think that many people are going to have hope. I'm sure many people are going to get the program again, tell them to website again so that they can, look at the program and take a look and see if it's right for them.

Sure. It's called Re Re Re Re training the brain.com, or they can just Google me. Any helper that'll go right to the website. Thank you. This was a fabulous talk.

Look I learned even myself a lot about it. Now I'm thinking, as Neil Nathan has told me, maybe I should be doing a little more limbic training at this point.

My my food. Because I can eat pizza, but I can only eat so much pizza before the itching started. So it's like, all right, I just got to find time in my in my busy day, maybe to do a little limbic retraining myself.

So, Andy, thank you. This is a real pleasure, doing this today. So, everyone, my name again. My name is Doctor Richard Horowitz. I'm the co-host for the Doctor Talk Healing Glam Summit 2.0.

We've been discussing limbic dysfunction and DNA rest with Annie Hopper. Annie, thank you again for doing this today and for everyone who's joined in.

We'll be seeing you again on an episode. So thank you so much for joining us. Thanks, Richard. For.