How Lyme Disease and Other Hidden Infections Can Affect Brain Function Transcript

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Introduction to Hidden Infections and Brain Health

In this segment, we talk about something super cool and interesting. With doctor Tom Moorcroft and this segment is dedicated to hidden toxicities and infections.

And I think it's one of the biggest risk factors. Huge is risk factors. And brain and mental health and memory loss and Alzheimer's and whatnot. So doctor Tom Moorcroft, he's kind of a mystery, solver.

He's a global leader in solving really complex medical mysteries. And his goal is to really find out what's going on with the patient and help them really get better.

And it involves combining the best of what medicine has to offer with the passion for the patients. And I love talking to this guy because he's like a brother of mine, and we just get along so well because our philosophies are very similar.

But we're going to talk about infections and something called co-infections, which basically multiple infections, such as like Lyme disease and other infectious agents as well.

And he's worked with countless amount of patients on this specifically and guided them through on journeys to allow them to achieve ultimate outcomes in their health.

So Doctor Moorcroft, is is part of the international Lyme and associated disease physician group and a medical neuroanatomy fellowship. He's a doctor of osteopathic medicine.

So when we actually talk about how osteopathy actually relates to brain health, what that means is that the structure and bodily function, our spine, our neck and our face and everything, how that relates to really a lot of brain and mental health.

So it's going to be such a great conversation. And so, allow me to bring on doctor Tom to the stage. Hey, brother. Welcome to the show. All right. Hey, thanks for having me. I'm pumped.

Can we come on and pump as well?

How Lyme Disease Is Transmitted and Missed

You know, now, for the audience listening to this, we've been talking offline forever. So, we're both smiling because we kind of know what our vibe is all about.

But let me kind of guide a conversation. And today I kind of want to start, with an area that's a huge mystery for a lot of folk, especially for, myself, even, because I'm in Texas.

And what, we don't see a lot here. Or what we don't think we see a lot here are infections that are from Texas and how that really affects the brain. So let's kind of start there and then we'll talk about some solutions.

Yeah. Yeah. I mean, you know I think the one of the biggest things that we see, out on the East Coast, and we're starting to see with global climate change really marching across the country, is, is Lyme disease and other infections from deer ticks, issue being these little mite ticks, a lot of people see like dog ticks and wood ticks and Lonestar ticks, but they're kind of big.

And these deer ticks are small. And we even get, the nymph, which is the kind of like the essentially the baby or or like kind of like a tween, if you will, is kind of is the one that gives about 90 to 95% of people Lyme and these are about the size of a poppy seed.

So when you're traveling to the East Coast or the upper Midwest, you may, you know, you got to be careful. These things and they're they're transmitting a bunch of different organisms.

And probably the most common one is, an infection called Borrelia burgdorferi, which is the bacterium. It's a spiral organism, that causes Lyme disease.

And one of the like you're alluding to. One of the things is, it leads to things like brain fog, brain inflammation, joint pain. And this is the overall sense of fatigue and malaise.

And so it's one of those things that now now it's differentiated itself from everything, right? Brain fog, joint pain and fatigue sounds like so many other things.

But yeah, that's true. Something to be aware of. Especially, if there's an acute onset, say, in the summer months or in the fall. Something to think about.

You know what what I learned about like broiler or fry and Lyme disease and that's cool is not what I recently learned about. Right. And so, what I learned in med school is that I can transmit these organisms, these, these spiral organisms called spark seeds, and these spark hits do a whole lot of damage on systemic areas in the body.

And in fact, we call Lyme disease the great mimic and mimics, a lot of other disorders. But the way that was taught and diagnosed it, is not necessarily the right way.

So I kind of want to get your take on what is the conventional way of diagnosing it. And, and what do you what do you do? Yeah. I mean, well, the first thing we're looking for is a known tick bite, right.

Everybody wants you to find the tick. Depending upon which research you read, anywhere from 40 to 60% of people truly remember a tick bite. What? Right.

So not that many. And clinically, when you start to see people who have been missed in the past, it gets closer to 20% of people actually remember the tick bite.

And part of it's because it's a no. See him, like I was saying, like a poppy seed. The other part is that in medicine we're always looking for something that's pathogen pneumonic, right.

It's it's it's this word that we use to describe. If you see this, it's a slam dunk of Lyme disease. And that's called an erythema migraines rash. Or most people know it as a bullseye rash.

The problem is, this only happens in about 50% of people. The CDC says about 70, but it's more when you actually read the medical research, it's right, again, around 50%.

The issue being with this erythema, migraines, bullseye rash is that only about 30% of all the erythema migraines, rashes are bull's eyes, meaning there's a central clearing and red rings with other lines of clearing in between that look like a bull's eye.

Most of them are like red purple pockmarks. It just looks like you bumped into something, and it's this weird streak in a different place. So most of the that's why a lot of the rashes are missed is people are looking for a bull's eye.

And it's actually just like, you know, somebody took a brush stroke and put some red purple on you. Okay. So you see that I didn't know. So, we're all looking for the bullseye, right?

Yeah. No, absolutely. And so, but, even on on blood work, there's, there's a lot more new things that are really out

there that didn't really know about.

So can we go over what that looks like? Yeah. I mean, you know, in the blood work, the problem is, if you were all looking for, like, this two tier testing, so-called, it's like we do an antibody screening that's positive, and then we confirm it with a Western blot.

So they're just two different types of blood tests where we're looking for our body making antibodies to Lyme disease. And the big issue is that if you order the test too soon or too late, it can be negative.

Okay. So you can get a false negative.

Testing Challenges and Clinical Diagnosis

And so a lot of times, right within the first 2 to 4 weeks after a bite, you're not even going to see anything in the blood. The other problem. So so essentially you get infected and you're already sick and but if you do the blood so many times what I hear is this looks and sounds like Lyme disease.

Let's start your treatment. We'll do the blood test if it's negative, like two days later they call them and stop the treatment. And so here's where I see a lot of people is that's their scenario.

That's when they were seen. And then they started to get better. They stopped the treatment because the blood test was negative. And now all those symptoms crept back in.

Oh, I and now I see them months or years later. And the problem is when you start the antibiotics prior to your body making the immune response, the, antibodies, we can actually blunt or stop the antibodies from being made.

So now that I've given you a half assed treatment and I've and now I can actually prevent one of the, our main diagnostic indicators. So really Lyme disease, and this is in like in Harrison's textbook of Internal Medicine.

And we say it all the time, but people forget it is Lyme is a clinical diagnosis and we support it with our laboratory data. Because the problem is if you now let's just take a different person.

Someone got bitten by a tick. They had the bullseye rash. We did nothing. You know, they were just like I had a rash. It went away. If you were to track their IgG response to Lyme disease.

And IgG is just one of those antibodies, it would go naturally. It would go up and then it would go down over time. Then it would go back up and it would go down.

So over time, an untreated individual will show a variety of responses on the bloodwork and depending upon which month you check them in, they may be positive or negative even though they truly have the infection.

Wow. Okay, so that's complicated. But in in the in your, in your words. And I think in talking about Lyme disease, it is a clinical diagnosis. And treating is not the necessarily easiest thing in the world.

And I feel like a lot of people with with Lyme, a lot of the neurocognitive symptoms of lying, they kind of get picked on by a lot of the people in the medical industry, doctors as well.

And it's not really until they find, you know, someone like yourself, that's able to diagnose them. But let's go back to Sparky's and Sparky, by the way.

It's just the spiral structure of the bacterium. And Lyme disease is one are really Labrador fry, which causes Lyme disease is one of them. There are other Sparky's as well.

And they behave very similarly. The strengthening the pallidum, which is syphilis, the, the, the Sparky that causes syphilis is very similar. In fact, if you look at the disease progression, it's actually quite similar as well.

And there's other Sparky ads that the dentists find in the plaque samples and the parrot, obviously, that's far more common as well. That's also having very similar effects, especially with the brain neurocognitive issues.

Why are all these organisms around and how do you think is is really the mechanism for it to cause, a lot of the brain issues and mental health issues?

Yeah. I mean, I think this is a really great question. And one is sort of that spiral nature, like for whatever reason, they kind of corkscrew into tissue.

But I think one of the big things about Sparky's is they're, they're tissue organisms. This and going back to your other question about lab did the biggest problem with looking for Lyme is we're looking for our antibody response.

We're not able to easily find the organism because it loves tissue. So the big tissues that we see in Lyme disease being affected are the gut sometimes the brain, muscles and the brain.

The brain is a great soft tissue for these things to migrate in. And when you ask like, you know, why it gets and these things, it's interesting. The when you look at syphilis, it's exquisitely sensitive to penicillins and other antibiotics.

Right? Lyme, on the other hand, is not there's actually video and also like still photography, evidence of taking a Sparky exposing it to, an antibiotic.

And these things will roll up like kind of essentially inside out, roll up into a ball. So it's like an armadillo. And now the normal antibiotics don't penetrate it.

And then they can sit in a test tube after they take the antibiotic out for anywhere from a couple of weeks, upwards of over ten months and still come back out and be an intact firing key.

And when you look at the data, we know that Borrelia spirit kits have been found in ticks that are over 13 million years old. Wow. Right. So I mean, how many people know this, right?

Why Spirochetes Affect the Brain

And rickettsia infections like Anaplasmosis and Rocky Mount spotted fever, their distant cousins have been found over 100 million years ago. So these organisms are well adapted to, being, persistent.

And this is one of the things that I think that I see a lot of and how it relates to the brain. It's a tissue organism. It likes to move in. But the other thing is they've been around a long time, and they've realized one of the best strategies is to reproduce slowly and to go under the radar.

So you see a lot of these organisms hiding in biofilm, like you said, within the plaques of the teeth. Also, Lyme can create biofilm. Many other organisms can.

And they have these round body forms that armadillo we talked about, but they all end up reproducing slowly and hiding in areas where the immune system can't get too easily, like in parts of the brain and parts of the heart.

And it's almost like a smoldering infection. So in the beginning, a lot of times you'll have an acute infection, but a lot of them will almost like get past that.

Then it goes into this chronic, low level smoldering. It's almost like you're trying to start a campfire with like wet pine needles and leaves. Right? All you do is create a lot of smoke.

And so these things are just they're they're not trying to overwhelm your body. Knock it out. They're just trying to have a long term food source. And so they get into the brain tissue and then they reproduce slowly.

And they're not trying to really piss your body off too much, but they're just trying to get what they need. And that leads to this ongoing sort of smoldering inflammatory response.

And then in cognitive stuff, which is really crazy. We look at things like, if you have a spark illness, meaning syphilis or Lyme Borrelia burgdorferi, you can have a five to a ten fold increase risk of Alzheimer's and if you have chlamydia, pneumonia, which a lot of people run into, just in our environment, that gets into your nose, that can also create a chronic infection there, which can lead to a 4 to 5%, fold increase risk of Alzheimer's.

So it's kind of like I think part of it's what they're doing with that smoldering infection. And then the other part is the physiologic statistical changes that kind of interfere with our detoxification pathways, which allow it to stick around, that then lead to us having this brain problems.

Yeah. So so just sticking around, it's like, hey, I don't want you to discover me. So I'm going to do my thing in the corner here, and I want to survive yours and like, whatever happens to you.

Sorry. And like, it really is. It's like they live in antibiotic privileged places, immune system, privileged places. And that privileged word just means your medicines and your immune system can't get there.

And they've just figured out how to go and hide. And they are. They're just chillin in the corner, creating just enough havoc to be a pain in the ass.

That's that sounds terrible. But in other ornot like, you know, there's other organisms that behavior similarly, you know, talking about Lyme is so similar, somewhat like mold and mycotoxins always locked in the way these biofilms on the airway.

And we have a lot of that down here in Houston. So you after Hurricane Harvey, and so, so, you know, it's, it's, it's behaving very similarly. What I find that is fascinating, interesting is that when I talk to guys like yourself and other people that you like in disease, the way that we treat like mold toxicity, almost identical.

And we actually start with structure. So let's kind of get into that for a second. So people are thinking what is structure? What does that mean. So the structure actually means that, a lot of times our body's detoxification or systems are dependent on the way that we hold ourselves.

So our symmetry of the spine or curvature of the spine, how tight our muscles are. The lymphatic system was trained and stuff and like lymphatic system and stuff like that.

Can you talk about, how that's implicated in the disaster case in a lot of these organisms? Yeah. I mean, I just think this is so critical because so much of all the conversations you and I have had really focus on going back to sort of the what are the root causes of, of health and healing and, and I love saying like, hey, all these people come.

What's the best brain detox supplement you can give me? I gotta, I gotta optimize brain detox by taking stuff. And I'm like, part of it is you want to open the drain.

And so if we look at the way the brain detoxifies, there's a system called the glom fat system, right? So if I step back one second and our arms and our legs and our in our chest, we have a lymphatic system which most people are familiar with, kind of the drainage system of the body.

And in our arms that our legs, we need to have movement and muscle contractions in our thorax, our abdomen and our pelvis to really move that low pressure lymphatic system and drain out all the dirty water, if you will.

We need to have pressure gradient changes, which is why so many of us focus on really good optimal breathing mechanics, as well as keeping the ribs open, you know, and getting the physical structure sort of more, your posture better.

And our brain, it's actually we have a system that has a fluid way that goes from our arterial side through the brain

to the venous side, and then it starts to drain through a variety of pathways.

One of the pathways that you and I talk a lot about, with more than just Alzheimer's and other things, is through the nasal lymphatics and upwards of 30% of the nasal lymphatic drainage or the brain detoxification comes through the nasal passageway.

So if we look at that and then we go to oh, where does it go from there? Well, once it comes out of the nose, it goes to the deep cervical, chain of lymphatics.

So now we've gone from this fluid wave in our brain back down to the structural mechanical. And when we look at, we talk about the head forward posture or muscle, shoulders up, neck tight.

Structure, Drainage, and Brain Detoxification

I know I hear you talk a lot about the sternocleidomastoid muscles out here in the scalings. Any of this muscle tightness in our neck can actually slow down and back up the drainage from the brain.

And if we go back one other step, our brain detoxification pathway, like I said, the arms and the legs and even the neck bit of gravity, lots of muscle contraction, the rest of it's breathing.

Our brain detoxification pathway primarily functions in deep, slow wave sleep. So one of the things where you see Lyme and mold interfering so much with and leading to so much brain fog, cognitive dysfunction is we they disrupt our autonomic nervous system, we get much more fight or flight, and then we're unable to sleep as deeply and we're not able to sleep is deeply.

We're not moving that fluid out of the brain as well. So it's kind of like but again, it's the whole system. It's not like, oh, I only need to sleep. It's like, I need to sleep. I want to move my body.

I want to nourish it, get a lot of water in there, get the neck and the muscle and the head, shoulders chilled out so that it can fully drain. And then you do that.

You don't have to worry as much about what's the best supplement. You can use that to supercharge it, maybe, but you really have to have it all open. And one other part I want to make sure I throw in here for you.

Chang, I think it's so important is when you look at what Lyme does to the brain. We talk a lot about fight or flight mechanism for sympathetics. Right?

So when I talk about the sympathetics and that fight or flight is I can win. So I always I love saber tooth tigers for some reason. So I'm sitting at the campfire hanging out with my friends, having dinner.

Saber tooth tiger shows up. So the so I went from chilling out, resting, digesting social engagement and joy. I went to oh my God. And in a split second I have to decide I can fight this saber tooth tiger and I have a high probability of winning, or I need to run away and I have a high probability of running away.

And that's typically the way we think of sympathetics and parasympathetic. However, there's another part of our parasympathetic nervous system that says, hey, what if the saber tooth tiger grabs me in its mouth and now I can no longer get away?

And that's that freeze state. So no longer can I fight or flight. And actually, when I had the only way I can win is to play dead right. And what's really interesting is when you look at the physiology of this, how do we get people out of it?

They need to understand gesture. They have to understand intonation of our voice and facial expression. Now going back to Lyme disease, if you look at a Spect scan, a type of brain scan of a person with Lyme, the centers of the brain that are responsible for us being able to understand those gestures, intonation and facial expression are

also the ones that Lyme likes to go to and adversely affect.

So now people are like, why is Lyme so hard to get rid of? Well, one of the reasons is it's been around forever and it's really slow growing and it knows how to hide.

The other one is the parts of the brain that it attacks essentially are the ones that we need to be working properly in order to get better from it. That's the here's here's the thing that bothers me the most, but I just it's referential to a type, an area of the brain.

And that freaks me out a little bit. It's just thinking about some monster eating the temporal lobe that I that I have my brain. Dude, it's true. It's like temporal lobe, anterior cingulate gyrus, parts of the parietal lobe.

I mean, all of these things that allow us to understand. So, so if I, if we complete the kind of this concept, and we're kind of talking about poly vagal theory and, and what we're saying is we need to be able to understand that we're safe in order to heal.

And the problem is, most of us are safe and we can heal. Yet Lyme, the way impacts our brain, makes us, makes it easier for us to believe that we're not safe.

So when we're not safe, we're not focused on healing. We're focused on being safe. We're focused on I'm not trying to heal when I'm trying to save myself from the saber toothed tiger.

And the problem is whether I'm stuck in fight or flight or I'm stuck in freeze. All of those are associated with lower immune system function, greater gastrointestinal disruption, because we don't want blood going to our gut when we're trying to live, we're trying to save our lives.

So it's a complex mechanism, you know, it is. And, you know, for people who are listening to this, I don't want you guys to lose hope was like, oh my gosh, I'm alive.

I'm going to die. And my temple let me in by this monster. But the point here is, there's so many things that we can actually do. So let's focus on the things that we can actually do. Right.

So we talked about. Yeah, we talked about, you know, increasing the lymphatic drainage, the lymphatics and movement. But let's talk about the role of like mindfulness and meditation.

And how big do you think that role is in combating these infections? Yeah. I mean, I just this is so incredibly important. This is a two way street that we're talking about.

So even if Lyme is affecting those parts of your brain, you have the power to even more greatly affect those parts of the brain. Right? And that's the beauty of the way the body functions.

The body knows how to heal that part of the brain better than you cognitively do. So, I would say, and when I had linemen, the bosses, I got treated for ten days, I was sick for the next eight years, took me about four and a half years to get better.

But the first 70 to 75% of my healing was all movement based yoga, meditation, mindfulness. It was like I was my back was against the wall. I didn't know any. I had gone to all the doctors.

They give me all the medicines. It didn't work and I was finally like, I give up, like I give up with this more medicine. I said, but I have a goal. Like I know what I want to do in my life.

I'm recently married. I want to have kid. I want to go outside. I can I can envision myself playing outside. So I had a really clear goal, skiing and mountain biking, playing with the dogs, playing with with my kids and my wife and everything.

Mindset, Meditation, and Nervous System Healing

So what I did was I focused on what I wanted, and I had this kind of where it's like, oh, if I spend more time focusing on what I wanted, then some of my mindset started to shift.

And then when I started to look and then I was like, you know, in a year, 70% better. And then I needed that last 30%. I needed help from doctors to get over the line because they're infections.

But it was you have so much healing potential. And from the mindset, perspective, I use yoga to move me to the point where my nervous system was able to calm down and I could sit for meditation and become familiar because for me, meditation has so many different definitions.

I love the one which is to become familiar with. So I would challenge you to become familiar with the state that you want to be in. Because so many of the people I see with Lyme or mold or even mast cell activation syndrome, they focus so much on the state that they're currently in, they're kind of like in a negative meditation.

I have chronic Lyme. I'm a limey or moldy, so they're focused on what they don't want. And so it's a self-fulfilling prophecy. You get more so I ask people to focus a little bit more every day on what they want and become familiar with that state.

This is a simple exercise because the problem is this is all well and good until you try to do it. And that's what I found out, right? It's so hard when you when you don't feel well to do it.

So it's not true. Right. It's it's crazy. It's like hey, listen to doctor Tom. He's been better for, you know, 12 years now. So, you know, but what I found was I needed to make it simpler.

And our body doesn't want us to complicate it. It wants us to breathe. It wants us to eat simple foods. And one of the neatest mindset pieces I found because I studied with all kinds of people, you know, Bob Proctor, Mary Morrissey, you know, looked at some Tony Robbins is like everybody, you name it.

I've just devoured this stuff to find out what I when I focused on what I wanted, I got more of that and I got less illness. And what it really boils down to me is start somewhere simple.

One of the most powerful exercises that I use now, and I use with all my patients, is at the end of your day, when you're all wound up and you know, or many people are wound up and saying, I can't fall asleep, let's practice going to sleep.

Right? And we start that with writing down three things that went well during the day. And it doesn't and it doesn't matter how big or small. And in fact, I don't even want it to be big.

The smaller is the better. Because when you start to look at the nuance loveliness in your life, you start to notice more and more of that. And it should take about three minutes.

You write down three things that went well from the day, and if it's a bad day, just write down a few lessons that you took from it. And now the key is write down three things that are going to go awesome tomorrow.

Because so many of us, when I ask you to write down something that went well or focus on what you want, you're like, automatically the conscious mind starts to think of all the reasons why that's not going to happen.

So I don't want you to limit yourself. So you write down three things for tomorrow that are being great and big, and then you go to bed and when you fall asleep, you kind of dissociate from the conscious mind and then your subconscious is open to God or the universe or life force, whatever words resonate with you, but that universal potential, and you start to come up with all these new ways to make your dreams come true.

And you wake up the next morning, you read the three things that went well from yesterday, the three things that

are going to be badass today. And then you just do that every day.

And the first day. It's a little weird. The second day you're like, wait a second, this is already happening. The third day you're like, oh, this is really happening in a week or two into it, you're like, now your evening practice becomes gratitude based.

And when you get gratitude into your life because you're just going, oh my God, there's so many good things. I'm so grateful for this. Now you start to have with that gratitude, your heart starts to open and your heart rate variability increases.

Whether you monitor with a ring or an ear clip or whatever, or a headband doesn't matter. It's still working. And heart rate variability going up means you're more in your heart, which gets you out of that state that Lyme disease may have put you in, and it gets you more into that parasympathetic state of social engagement.

Rest and digest. And now you're becoming more chill right before bed and you set yourself up for deeper and deeper sleep. And all you've done is notice three things that happened today.

And you plan three good things for tomorrow. That's amazing. The fact that we have the ability to to improve 70% of this and then for like 30% for doctors, that's not that's not common knowledge, you know, and and I'll tell you, you know, a lot of patients and especially when I first see them and I, you know, I sense a lot of negativity and stuff I've seen there.

And it's positive for all of us. Hey, you know what? What let's let's pause the negatives for a second. It just seems to be quite a bit. What are some three things that are awesome that happened to you this week?

Right. A lot of I don't know, you know, like there's the there are things, you know, you have your loved one next to you that's sitting there that's supporting you.

That's a great thing you have, you know, you have a house and stuff like that. So it's and and then whenever people start thinking about the positive, the not all the longer like this, the become more relaxed and sitting back in the chair.

And I was like, hey, congratulations. We just did the first level of detox, which is relaxation. So you lymphatics system influx and actually drain into your thoracic duct and eliminate so that was detox and like what I don't like.

Yeah. Thoughts are your first detox you know real and and and they're also it's like the opposite is true too. So none of this should be hard. We all know that like negative thoughts are normal.

Right. And and I have a lot of people are like challenged by the fact that like, oh well you're doing it better than me or I'm not like that. I'm like, no, no, no, no.

The here's the thing, right? The negative thought is a protective mechanism. When you initially have an a negative thought about a situation, it's a protective mechanism that's been developed over millennia where your body is doing its best.

Your body is not betraying you right now. Your body is actually doing its job for you. Now. The beauty of like my dog, my dog will be like, whoa, what's that?

Right? And he's on guard. And then he goes, oh, it's not a thing. So he's cool with it, right? And then he just shakes it off and does one of those things.

And he's great. But humans have this other higher part of our brain which allows us to make a choice. We have a choice to say, I'm going to stay focused on the negative, or I'm going to stay focused on the positive, or I'm going to just go back to neutral, right, like my dog.

And the thing is, in this day and age, there's so much of the negative around us. That's why we create a habit of just refocusing on the good stuff, too.

It's not. I just want people to understand your body is not betraying you and you're not doing it wrong. If you notice negative crap in your life because that's normal.

It's the amount that we we allow ourselves to focus on it that gets into the pathology. So yes, you did not develop the the habit of focusing on negative, probably all on your own.

Some of it's your family, some of it's your society. I mean, I look on the news the news. Why does why is negative sell so well? It's because it triggers our survival mechanism and it catches our attention and it spikes our cortisol being chill and hanging out does not spike your cortisol. It does the opposite.

So it's less addictive. It's not like an adrenaline rush. But when we calm it all down we go. Let's become more familiar with that state too, because the fight or flight should be momentary.

And then we should practice this other state of calm. And so your body's doing a great job for you. In fact, when you when you have the awareness that you're in a negative state, not only, you know, two main things here.

One is that your body is kicking ass for you. It is doing the best it can for you. And the other thing is, you have a choice of what to do next.

Belief Systems, Trauma, and Brain Change

And the first way in taking that healing detox process that you just talked about is to be aware of it. And the only difference between someone who sounds like they know how to do it really well, a meditation guru or master is they notice it a little quicker, and they go back to it a little faster than you did.

But a week ago, they did it right. It's just the practice. It allows you to become aware and go back to that state that you want your nervous system to be in.

I think we agree that the people listening to this and their loved ones have the ability to heal, that supersedes their expectations. They just haven't discovered it, right?

For real, man. Yeah. And I think a lot of us in in our, in our arena in integrative and functional health, especially, a lot of doctors have gone through very similar journeys.

And that's what a lot of a lot of us have really relied upon, is sort of the the mindfulness and the belief systems aspects of it. We talk about belief systems and cognitive impairment.

Other areas in, in the, in the summit. But everyone agrees. Is that that belief system, you know, it stemmed from somewhere I interviewed, Doctor Bruce Wexler.

He is, Yale and Harvard trained psychiatrist and researcher, and he's one of the first humans in the world that relate together the fact that psychiatry, neurology are not separate and that emotions are actually physical and back in the 80s.

Right. And he his goal was always to change psychiatry. Towards that route. I interviewed Doctor Daniel Inman, who's on the exact same mission as well on his latest book.

You Happier was actually all about that and the and so and and these these these these two phenomenal individuals that have been around for a while. They've been in psychiatry for a very long time.

We all agree that the experiences are the things that can heal the brain experiences. Yeah, that can be something that gets revisited and you spin it around from a negative to positive.

That starts the healing process. And from the brain physiologist as Doctor Wessler pointed out, he was doing like functional MRI on people's brains. You can see the physiologic changes whenever the experience changes.

And that's what's super powerful about all this, you know, and, and I'm so grateful for you to to mention that as well. And it's very hopeful. You know, it's very hopeful. People.

We can do so much for ourselves. We just don't know it, you know. Right. Well, you know, I, I love hearing everybody coming to the same conclusion because like, people are like, oh, but how do we how to when are you going to get to how you treat Lyme?

I'm like, we're talking about supercharging your immune system, supercharging your detoxification system, supercharging your brain and giving you control back.

It is not a system where you need another doctor and another pill. It's a system where you have a lot more control than you may realize. And what's really interesting about what you just saying about the other guys, you know, because we all know them, right?

We're no of them. I mean, they're just such pioneers. All right. I remember a couple studies, where they one study, Andrew Newberg from the I think the University of Pennsylvania is a neuro radiologist.

I'm sure you may have come across it, but it's like he took Buddhist meditators and Franciscan nuns and had them get into their highest levels of meditation or prayer.

And, you know, then they did scans of the brain. And what they found was they both had association cortex in the parietal lobe kind of calmed down. Right?

So they're kind of feel, you know, being associated with the desk and the chair or the whatever come down. And they got really right. Prefrontal cortex got really connected.

And what was really cool was they both had essentially the same exact biochemical experience. But the Franciscan nuns had the experience of God directly speaking to them.

And the Buddhist meditator had an experience of being connected with the universe, but biochemically and physiologically in your brain, they had the exact same thing.

So what we know is the mindset that we bring into the situation will color like the lens that we put on will color our experience. The other really interesting experience I've had and I, I don't know, I keep telling this anyway because I'm like, I got to find the paper.

I found it in a yoga mindfulness. You know, as a reference like 15 years ago. And I can't find the paper again. But they had three people playing a game remotely, right?

One of the first remote games, and they're throwing a ball back and forth, and they're throwing the ball, throwing the ball, throwing the ball. And at one point, the researchers asked two people to leave the other person out and only throw the ball back and forth between those two.

And so at the end of this, you know, whatever a minute session, they ran him down. They did functional MRI, and they found that the the person who was left out their anterior cingulate gyrus, you know, has a lot of things to do with emotion and anger, like lit up.

They felt dissed. They were completely left out. They felt horrible that they were left out from the other two people. And they were just like social losers.

Right. And the interesting thing though, was there were no two other people. It was just a video game that one person was playing. And the researchers said, so when we look at this, just people who are perceived.

So trauma is not just something really happened to you, you thought something happened to you. That's how powerful your thoughts are. You can have a conversation with God.

Closing Thoughts and Where to Find Doctor Moorcroft

You can be connected with the universe, or you can decide that other people left you out, or you can decide that you're sick, or you can decide that you're well.

We have all the evidence to show that this is true, just like Doctor Eyman and Wexler we're talking about. But the bottom line is those things are nice and complicated.

We can look at the studies and blah, blah, blah in the end, all you have to do is decide what you want and then make it a conscious habit to focus on that more times than not.

And and it's a gradual, wonderful process, but you have that much power that you can change your biochemistry. Oh, that's that's amazing. So as we wrap this up, we started talking about infections and ended up in belief systems and in right.

People think they're not related. They really are. And and that's the beauty of our bodies. And we our body has an amazing ability to to generate health.

And that's the cool part, right. And so and so let's just wrap it up for a bit. How do you, how do people find you first of all? Yeah. I'm at Origins of health.com and YouTube and Facebook.

I conveniently kept it the same. So just Origins of health. On Instagram, doctor Tom Moorcroft and super happy to hear from everyone. Awesome. And, other any, parting words for audience before we close it off?

Yeah, man. I mean, I just I want to say thanks for the opportunity, and I just think that all of this stuff that we've talked about, yeah, these infections, they sound complicated.

And from a medical perspective, they can be. But you have the ability to change your physiology, optimize your physiology to make yourself the world's worst bacterial, fungal and viral host.

Right. You can your body is this amazing self-healing mechanism. And we talk about this body mind, spirit unity and kind of like you were saying with the the psychiatry and the neurology all being one thing, this is just one continuum of all the aspects of your life.

So sometimes you might need a medicine or an herb or maybe even a detox protocol, or to go see a structural therapist. So much of it is what you focus on and what you do at home.

And I'm really my mission is to let people know that they are in charge of their ship, and we're all here to help you and support you. There's so much great research going on, but it's what you hold closest in your heart.

So focus on that thing. Get really clear on the stuff you would love to do in your life, and just know that you do deserve it. You do deserve to heal and you can heal.

And we're all here to help you and thank you for being a badass. Thank you. All right. We're going to close it off. And I want to thank you for coming on once again.

And, go find, doctor Tom once again, as audience of healthcare as all of this audience of AL.com. All right. Peace.