Functional Medicine and Cognitive Decline

When we receive someone who's coming to the clinic with cognitive decline already, we basically are looking at it like a cancer diagnosis. It's a fatal disease and the longer it goes untreated, the more damage is done.

And so we really want to start first building those lifestyle pillars so that we have the foundation for healing and then we want to look at supporting them with the nutrients and the mitochondrial support and hormonal support that they need to be able to heal.

And then, we really want start focusing on modulating the immune system and getting rid of the toxins, the chemicals, and biologic toxins that are creating that oxidative stress and those chronic activating those chronic inflammatory pathways that generate more damage.

Hello and welcome to the Evolution of Medicine podcast. We are in a new location. we are the Institute for Functional Medicine's annual international conference and we have an incredible live podcast studio where over the last three days we've been speaking to speakers, innovators, people who are taking functional medicine to new and interesting places.

Now, I am really excited for today because we're going to do a little bit of a wrap-up of the conference from last year. But I'm also excited because, if you can see now, I have a special guest with me, Dr.

Christine Burke. Many of you know Dr Burke through many of her stories. She's been a frequent guest on The Evolution of Medicine. she's also been my doctor.

And she is also responsible for the incredible story with my father. Also, we are working together on true neuro to build the first clinical network that can reverse and prevent cognitive decline and over the last little while I've been trying to tell Christine look I need a partner here in the Evolution of Medicine podcast because this has already happened twice today.

Doctors come on and they just assume that I know all the biochemistry that they know and I'm like yeah okay that sounds interesting like I don't know if I could ever push back on any of these ideas because like it's just not in my wheelhouse.

So I need to have an expert and you're the expert. So welcome first time as the co-host of the Evolution of Medicine podcast, Dr. Christine Burke. Thank you very much.

Well, we're here at IFM and we'll have an opportunity to talk about some of the talks that you've seen, that that, you witnessed, but I want to just reflect first and foremost.

So on the first day we were here, were getting set up and there was a special session they'd never done before for only people who this was their first time.

And it was big room and that there are more than half the people that are here are new. What does that tell you about what that means for the functional medicine movement?

Yeah, I mean, it's really exciting that half of a thousand attendees are first-time attenders. And so there's just this really burgeoning interest in functional medicine, in practitioners seeking another way of practicing medicine or seeking ways to help their patients heal.

We're all getting very acutely aware that we're not creating health in our current health care system. One of the other stats is that 40% of people who are here this year are working inside institutions.

So it's not just the independent practices and the small group practices, but actually over the next few weeks you will hear from all of innovation that I'm seeing that's happening all across the country and all over world as people look to find ways to wedge functional medicine into nursing, into pharmacy, to medical schools, larger health systems, international countries.

IFM Conference and New Attendees

There's such an international flavor here. So that's an exciting moment. It's not just the functional medicines that you started in 20 years ago where it's only really small practices, there's a new wave.

Yeah, absolutely. I mean, we even had a talk here on integrating functional medicine principles into the National Health Service. And we've had other ones in the military.

So it is really exciting to start to see it spread into these institutional entities. Yeah. So some of the, I just wanted to ask you about a couple of things that I know you've started together.

I haven't been in many of talks that have been here doing this, but I knew you had a pretty exciting moment with James Carter, who I have interviewed and will be coming soon, very soon on the Evolution of Medicine podcast.

Before you were a cognitive decline expert, you'd been a vascular expert and I No one ever had a heart attack in years in your practice. So what do you know that the Cleveland Clinic didn't really know and what's happening now that it's coming around?

Yeah, I know it was just really exciting to hear him talk about the evolution of bringing the inflammatory markers into the cardiovascular prevention paradigm and to here him, talk the story of that evolution and how, you know, one of the main national cardiology organizations almost 20 years ago had talked about how CRP, C-reactive protein inflammatory marker, how that predicted vascular events and then promptly told us all not to measure it.

And then 20 years later, acted like it was a new discovery. So when he was telling that story, I was thinking that's how it's felt to me because when I first learned about how much those inflammatory markers can impact our ability to predict who's at risk and to change that event trajectory, And then thinking like, well, everyone's got to start integrating this because it makes such a huge difference in the outcomes that you can get.

And here we are 15 years later and it's just getting started. So it is amazing how long the lifespan is of knowing something is effective until it gets incorporated into conventional practice.

That 15-year statistic that you hear, I have now lived that a couple of times. The truth will out, right? Eventually it is true that inflammation plays a big role, so eventually everyone has to come around to that when you look at the outcomes.

So tell us a little bit about what your talk was about and what you brought to this year's conference. Yeah, so I had an opportunity to talk about my journey into functional medicine and kind of my transformation, if you will, from a conventional family medicine physician into the curiosity about which really the genesis of that is what we were just talking about.

It was a patient I that we had done all the things, we checked all of the boxes, followed all guidelines, all medications were in order, and then he had a serious heart attack.

And that led me to question what I was doing. If we were doing all things and I still had someone have a series event, what were we missing? What was that whole idea of residual risk that just got really real for me?

what are the thing that were choosing not to pay attention to? that are drivers of this disease. And then that's what I wanted to focus in on. So that was really what got me started into that cardiovascular arena.

Then I got to talk about a couple of my complex chronic illness patients before I knew how to do anything with

those patients and how they each urged me on to learn more and to learning what needed to be able to help them and eventually how that led me to where I am now.

And, you know, obviously the Avanthea trial that you've been part of, all of those clinicians trained you with IFM.

Inflammation in Cardiovascular Prevention

What is it about the IFN training that sets you up to be able to get outcomes with such a complex chronic illness? Yeah, that's a really good question.

I think, the focus on the foundational lifestyle components, which we use as the pillars of lifestyle in our true neuro framework, and then the systems biology framework that allows you to start to understand the interconnectedness and the interdependencies of all these different systems within the physiology.

And then when you start understand those, then you can see whether it's metabolic drivers, if it is blood sugar, nutrients and mitochondrial insufficiency, hormone deficiencies, if it's toxins and environmental exposures, but to start to see how each of those things feed into these final common pathways of disease.

Even though those diseases can look completely different and those patients present with really different conditions or symptoms, those same root cause drivers are involved.

And so having that training from that outside in perspective of looking at all of the physiology and then how it connects together, That's really what allows you to start to see how you unravel these complex diseases like cognitive decline.

Yeah. Well, we were sitting next to each other when Jeff Blam was speaking. Just a quick word on Jeff, 80 years old. I mean, I think both of us have experienced a little bit of the magic that he has brought to both our careers and anything particular that caught you from his talk this time?

I just always love listening to Jeff. intellect, the inspiration that he brings to how he thinks about things, and the way he connects disparate things and brings them together so that you can see them in a new light.

Like, every single time I listen to him, there's something amazing. Well, I'll give you a specific example of exactly what you said. You know, as you know about eight months ago we were sitting listening to Dr.

Bredesen talk and he said Alzheimer's is network insufficiency and I was like it just went off in my head because I felt like I'd written a book about social network and sufficiency so to have you know it portrayed in that way but then on Jeff's slide up there that black slide that showed the six areas I'm like oh this was always network in sufficency it's just wasn't communicated like that the nodes of the matrix These are networks that are losing sufficiency and you measure how they're losing the sufficency and look at it.

It's reimagined for me, an easy way to describe what's happening here because I think we maybe have gotten our own way in trying to overcomplicate something that is actually quite intuitive to people when they think about it, It seems like the messaging is getting better, IFM has new videos, 100,000 people have been trained, it seems there's real momentum.

And we had a dinner on Wednesday night and one of the guys that showed up there, which is really amazing, is someone who wants to bring functional medicine to Japan.

I think just as I've been thinking about it and got to know him and see, feels like It's amazing that in a country where they have the highest life expectancy, you know, he could communicate to me really well why functional medicine was still missing from whatever they're doing.

Obviously, public health is going pretty well. But there's something about functional Madison that there is an appetite for over there that he wants to meet the needs of.

And it's quite exciting to see that. There's value that could go both ways in that relationship.

Christine Burkeu2019s Functional Medicine Journey

Well, and I think also what that brings to light is that even when we can extend life expectancy, if we have an extended health span where people get to enjoy good health for as long as possible, there's still an appetite for that, of course, because we want to live well all the way to the end, not just live longer, but suffer.

Well, it's a good point because there's lot of dementia in Japan, a lot dementia, really high rates there. So I'm excited and, you know, we will be sharing over the next little while.

But if you are listening to this and you've ever thought to yourself either A, I'd love to go to Japan. B, I'd loved to be at the first functional medicine conference in a new country.

And by the way, that is extremely exciting. I just want to share because I've done that a couple of times already. On November 22nd, this year, there is going to be the first functional medicine conference in Japan and I'm intending to go and we will have more details coming forward if you want to join and come and meet those practitioners and be part of that sort of collective moment where brains from America, brains, from all over the world come to Japan, and sort have infused with that culture.

I think it could be a kind of a cool event and i'm excited to to So it's been great to be here. One of the things that, after the last 10 years, we've done a functional forum from the IFM conference, apart from three years where there wasn't a conference.

But I would make, at the end, an hour-long session. And so I'd speak to three people, and we'd do little interviews, then get little other ones on there.

You've been on a few times before. But now that I've been here and done all this, I just think there's so much amazing stuff that's happening as functional medicine does get widely adopted.

It's been amazing to be able to actually spend most of my time doing this. And I want to thank Fullscript and Genova and all the other sponsors that have made this possible.

Because I think that as you hear these interviews come out over the next few weeks and the few months, you'll realize kind of what you're missing by not being here, which is that there are really, really hopeful lessons in how functional medicine, these concepts are making it out.

So be here next year. If not, enjoy over the summer, the Evolution of Medicine podcast, where we bring in you some incredible speakers and content and very excited for all of that to come out!

All right. Once a month, I do a sort of a solo episode here, just to sort recap what I see has been happening. and this month I've done five events all across California.

I have done an event in Santa Barbara, Santa Monica, San Francisco, Santiago, and also in El Dorado County. The theme of it has been time is brain, which is your thing.

There was a real resonance with that concept and I actually didn't realize when I heard it that it came from stroke, but ultimately, The concept that we are trying to get across to practitioners through those events is one that when you're dealing with brain related and particularly with cognitive decline, you have to work quickly.

And so that was a big part of the theme. Maybe you just want to sort of share a little bit about how that works with you in clinical practice. So I just wanna take a minute to talk about the incredible mission partners that have here at The Evolution of Medicine that made this possible.

So first and foremost, I want to thank Fullscript and Full script journey. So Full scripts been an amazing partner for

10 years, we only pick partners that can help us achieve our vision and help you achieve your practice vision.

And Full Script have been incredible partner For a decade, but their new offering journeys, this is why we called it the evolution of medicine journeys.

is allowing practitioners to combine the relationships that they have with the newest technology to sell direct to consumer lab testing and use it as a funnel to bring into your practice.

And it's a game changer for the whole industry. So go to goevomed.com slash journeys. and you can get started on building the journeys for your practice an optimal way into your practise.

We're gonna have some conversations about it. This is a game changer. Next, Genova. Genoa have been fans of the evolution of medicine for a long time.

we're big fans with them and they now have a lot more specialty testing. They have lot of more tools and it's a key part of understanding the body ecologically.

So go to goeohomed.com slash genova to find out more. Come on over here and I wanna show you about the other mission partners. If you've been following us for a while, you know that these are organizations that we trust, that add a lot of value.

Freedom Practice Coaching, I have been supported by them since the beginning. And so many of the issues that practitioners face in building a successful practice, scaling a success practice come down to having the right support with people who have being there and done that.

Go to goevomed.com. Big boost marketing, Uli and his team are the best in the business when it comes to really understanding how to market your functional medicine practice.

Go to goevomed.com slash big boost and see how they can help you. And then what you're going to be hearing a lot about is the formation of clinical networks.

And ultimately, True Neura is our first effort at that, which is to build an integrated clinical network combining independent practices from across the country into a network that can reverse cognitive decline.

And if you go to goevomed.com slash TrueNeura, you can get a demo. You can see what it means to be part of an Integrated Clinical Network. That's mentorship, that's software, and that is making it easier for you to get incredible outcomes in a disease state where there are no other options.

So thanks to our mission partners, let's get back to the content. Yeah, so you know when we receive someone who's coming to The Clinic with cognitive decline already, we basically are looking at it like a cancer diagnosis.

Jeff Bland and Network Insufficiency

It's a fatal disease and the longer it goes untreated the more damage is done and so we really want to start first building those lifestyle pillars so that we have the foundation for healing, and then we wanna look at supporting them with the nutrients and the mitochondrial support and hormonal support that they need to be able to heal.

And then, we really wanna start focusing on modulating the immune system and getting rid of the toxins, the chemicals, biologic toxins that are creating that oxidative stress and activating those chronic inflammatory pathways that generate more damage.

So it really is time is of the essence because the longer we allow those things to continue, then the more damage to the tissue is done. So we want to halt it as soon as possible and then we wanna start that rebuilding process.

So, you know, that was the theme, but really the under theme for us is, I think, building a clinical network of

practitioners that are aligned already in California.

Now, we've got some great people already. So obviously you're there. Dr. Ryan Arnold is holding it down in Santa Barbara. And honestly, like seeing he brought to dinner his whole ecosystem of support partners, so that like the chiropractor that he refers to, there's a specialized fitness place in Montecito that is specifically for older adults wanting to build muscle.

And we know how important that it there. So he's really built this incredible community there, it was amazing to meet Yoshi Ran at dinner the other day, Julie Helm and others that are already here.

Um, but, you know, what I've seen, one of the magic things that I saw on Wednesday is, so Dr. Ryan Arnold, he's in California. Dr Anna Satter is in Maryland.

And, their relationship is purely Wednesday morning on Zoom. and yet, when we walked into a room together, it was like best friends. Totally. I think there's something about coming around a certain, purpose of learning together and going through something together that is really cohesive for friendships.

Yeah, well, and not just the learning together, but sharing the vulnerabilities together. Tackling the problems together help, you know, helping to solve each other's stuck points.

Like all of that outside of the Learning, right? All of That does exactly what you've been talking about, Right? It just creates a community for us where you feel heard, You feel supported, And you Feel like you have a team.

You have A pack around you. Well, something amazing that I've experienced in the last few months that i've been speaking to with the IFM community and also, you know, I'd love for more people to understand is that, the mentorship side of functional medicine I think is broken, right?

It never really worked because, even if someone's standing behind you and following you around, they're not really getting what's going on in your brain.

So, you know, it'd be hard to find that mentorship structure. And it's not easy for the clinician to deliver the mentorship. It's easy to be the mentor, and it is just quite a random how people would learn.

What I've seen this year in the Mastermind is that when you present a case, not just two or three PowerPoint slides, but a full set of data, typically what I have seen with sort of online Zoom sessions going over cases is it creates more questions than answers.

because you don't know. Like if you give a case in two PowerPoint slides, there's so many unknowns and good clinicians will be all, what about this? What about that?

Because their pattern recognition tells them that these are often things that I see with this kind of issue. So to have a full data set, to be able to see it all laid out and scored and organized, What I see is doctors building confidence very quickly in being able to take on chronic illness.

One, because they feel that they have a community where they can bring this kind of case. But two, the reinforcement of the ordering of what to do in what order is being shared and is been consistently communicated.

Japan Conference and Global Adoption

And I think there's something that's happening there that I how functional medicine should be learned and should been mentored and it should educated.

And I know you're biased on this because this is the thing you made, but like ultimately, yeah, the bias on it. But yeah. You've seen the magic. I have, exactly.

and I agree with you. One of the things when we were developing TruNura that I talked to you about a lot in terms of what I wanted it to be able to do was presenting the data in the same way, in same order.

each time because that's what helps you learn the pattern recognition. We see that now from people who weren't comfortable in certain areas, like weren' t comfortable with biotoxin illness or weren t uncomfortable with mold or with the tick-related infections, Lyme, Bartonella, et cetera.

As we talk through these and demystify them in a way, and we're approaching them the same way over and over again, it really It just helps people to build that confidence.

And it also is so much less random, right? It's not like you have this lab report and then there's this thing that's abnormal over here and this things that abnormal here, and you're trying to figure out how it all works together.

We've done that clinical structuring, that organizational piece. So you can see the things that interact together and that are important to address together as a group, as network, just like you said.

Yeah. Well, that word has come up, and I actually see that IFM uses that in different places that I hadn't even talked about. They talk about a referral network for the 2.3 million people that went to the website looking for a practitioner.

One of the things that I think is being addressed now, which I've always wanted, the energy of The Functional Forum was always, well, and you were one of first people to run it, but if I put a group of clinicians in a room together, they can give each other confidence that this is the future.

The problem is a bit random. You're having dinner, maybe there's value but it takes time to accrue. Certainly, this is a much more efficient way to create cohesion between practices.

And I guess one of the things that I've just seen is that the benefit, like if we looked about clinical networks, there's so many ways in which all the practices don't need to go it alone.

Working together on solving clinical cases is one example of network value. But as I've gone through, I did an event in Colorado and now I have this conversation all across California.

I think there is aches and pains that practitioners feel that they don't really know that I feel are much better solved by a network. So many examples, but in in colorado is the example.

We've had a conversation here with pharmacists and Uh, polypharmacy is such a huge issue in this exact patient population. And wouldn't it be great? I mean, you've got an amazing team, but you don't have a pharmacist.

It would be really great to have. But like expecting everyone to suddenly employ a Pharmacist is kind of crazy because it takes a while to work out. Well, how do I make this person pay for themselves?

And how did I do that? Possibly. but like to, have the ability to bring in a specialized poly pharmacy consultation, just one time, You don' have to employ them.

They just come in, But they're employed by. the network of clinicians that have a certain volume of patients. There's just an inherent inefficiency in that that is going to be very difficult to replicate expecting everyone to go and do it.

Right. Absolutely. Yeah. And there's many examples of that. Like even the example that you gave with the focused exercise community.

Mission Partners and Clinical Networks

We have one in our area too that we use that focuses specifically on what the exercise regimen that and then we've expanded that to be able to include that for our regular patients as well.

And so having someone that understands exactly what you're trying to accomplish, but I can't employ a full-time gym and trainer, But we can utilize this shared community resource that's been focused in on our needs.

It's really cool. Well, the other thing that came up today, and I didn't tell you about this, I'll pitch you live, but I had Carol Pan, Dr. Carol Penn, come and talk here and she's been doing a talk of mapping Qigong to the functional medicine matrix.

And, you know, there's just something about seeing the videos of groups of older Chinese people doing QIGONG in the park where you're just like, There's something about my core humanity that I'm missing by not having that sort of practice.

And we've been, you know, talked about group visits, the group medical visits. But there's about embodied movement in groups for older people that feel like there is something in there for us.

Yeah, there is something in there for us. That's a real cool idea. Yeah. But yeah, that was a 10 out of 10 interview and that'll be coming soon because I really enjoyed that.

And, you know, in his last years, Gabe was really into Qigong and we went down and did like a whole QIGONG training. I could see, You know there, is, something valuable here, but to see it like mapped onto the functional medicine matrix.

So then now, I've been so much, so, much more conscious about the older population and the needs of the other population. that's been, it'd be huge for me for that Anything else you want to share about your experience from the conference or the events that we've seen or that the network, anything that stands out.

Yeah, you know, I think it's just always so, it just refills you to come and be in this big community of people that are all trying to make a difference for humanity.

And just to see all the different ways, the creativity that people have had, different communities that they're able to plug into and to help communities of patients.

And I think it's just very inspiring to see how people are really out there doing this work. I think it's really the idea that functional medicine is only for a certain class or person or only a set demographic or otherwise, that's been blown apart for me on this event.

Seeing all the different ways in which it has been developed, the way it is being adjusted, different professions getting into it. It's great. And something happened here that I didn't expect.

You know, if you try and get people at a functional medical conference in America to dance, generally it was a disaster. Everyone was little bit stiff.

But in the first session today, whatever Geeta Maker Clark did, However she set it up, I saw something happen that I hadn't seen in America. I've seen it in Mexico, but I went to that Mexican conference, people would really throw down in the break, But I haven't see it here, so something special was engaged at that moment.

I want to just, you know, it's just to, to as well. So last week on, um, on the, the podcast, and the show, we did the first functional forum that we had held back in February in San Francisco.

And that event, We had your colleague Kat Toops talk about, You know the success of the Avantia trial. We got a number of other speakers and presenters there like David Rabin and Molly Maloof and, uh, Ryan Arnold.

and one of things that, Um, that came up on that event was we were sort of launching to the world or at that moment to that group, but now it's come up last week, Supa.

And Supar is a new biomarker for systemic chronic inflammation. Since we put it out last, week we've had

hundreds of practitioners saying they're into this because I think they understand the limitations of some of the biomarkers that we have for inflammation and how they move.

And I remember we did a session actually that Jeff Bland had talked about at PLMI where he was talking about what is SII, SIRI, what are those, whatever the purpose of those and what sort of impact you think it could make to have a marker that looks at systemic chronic inflammation.

Time Is Brain in Cognitive Decline

Yeah, so the SII, Systemic Inflammatory Index and SIRI are just ways that we can repurpose the information that, we get in a standard CBC, a Standard Blood Count, So that We can understand a little bit better the inflammatory drivers that are going on.

uses lymphocytes, one uses platelets, and monocites, so you get a little bit of different information from the two of them, whether it's more likely a bacterial driver, for example, like that type of an infection, or it is more like the innate activation of the immune system, then that can help you to understand risk.

Then Dr. Chris Magrida, in his presentation, he was talking about how he can use those indices to actually predict which kids with right lower quadrant abdominal pain are likely to have appendicitis.

And he can use that to differentiate which kid's need immediate intervention and which he follow and check in on the next day very, very safely. That's amazing.

I mean, that's paradigm shifting in terms of how we manage these patients. So really exciting that we can take cheap information that we've had for a really long time and, you know, twist it around a little bit and get something that can give us such amazing predictive value.

One of the things that I didn't understand when we started talking about cognitive decline that you've revitalized my mind on is really what we're talking, about is identifying one, is there chronic systemic inflation?

And then two, if there is, where is it coming from and what's driving it? I mean, that is the protocol, right? Right. Yeah. And, you know, ultimately what Chris is talking there otherwise is that population health predictions for chronic illness based on an understanding of their long-term systemic chronic inflammation, I think could be very helpful for taking functional medicine into its sort of rightful place, which is what we'll be talking a lot of times, how do we predict future disease and how we stop it from getting to disease by understanding what's driving it.

Right, exactly. And if we can start to learn how we use these indices to predict who with chronic illness, chronic, you know, like heart failure or other things that maybe aren't infectious, but be able to who the people who are likely to decompensate are, then we've gone another step further, not only in helping to alleviate or reduce the suffering of those people, also in unburdening the tremendous expense that those hospitalizations create for the healthcare system.

That's just one small example. Yeah, absolutely. Well, look, this has been really fun. I knew it would be. And, you know, when we all have a little bit more time on our hands, maybe we'll do this more regularly.

Look, if you liked Dr. Burke and I as a dynamic for the Evolution of Medicine podcast, let me know so I can forward all those emails and say, see, is this the way we should do it?

Clinical Networks, Biomarkers, and Practice Support

It's actually great to have someone who you could get into all of the clinical side of things because my penchant has been for more of like the practice management and technology stuff, because that's something that I feel I can really get my head around.

And the critical stuff is interesting, but there are some limits to my understanding. But it's really been really great. It

is a big deal to come here and be to be sort of saluted by being put on stage to show other practitioners, look, this could be a career that you could have.

And to pick you in that role I think is powerful because I there's a lot about your journey that is something that would be easier to do today. If you just started, you can go on that journey, get into functional medicine, develop specialist knowledge because of passions, take it through and then hopefully be in a position to make a real impact in, you know, in couple of different disease states.

So I think that's, really powerful. And I just want to give a shout out to what's about to happen here at the Evolution of Medicine podcast. For the last two and a half days, I've been sitting in this, incredible corner of the conference.

We've done about 26 live podcasts. Not all of them will be coming to you because we only do one a week and there's going to be a lot more coming out. But the good news is we've captured some absolutely incredible talks and I will picking the best of the them and sharing with them over the summer.

Please stay tuned. And if you love the Evolution of Medicine podcast, please share it with other clinicians, because I think what you'll see, what this conference has done for me is to revitalize what I thing is possible within the functional medicine ecosystem.

What I'm really excited about is by bringing in this sort of diverse network of opinions. The foundational layer is we have to understand disease through understanding function, right?

There's the range of function and how to bring back function. Now, I don't think we found all the ways to do that. I think that we've found ways. And even for the work that we're passionate about here, in order for that to become a standard of care, we need to find new ways to identify what's driving the pathology and how to get it back in.

And I think that coming to an event like this will give you ideas. Coming to Japan might give some ideas on how they do that too. But ultimately, there's an amazing melting pot of content that's happening here.

Thank you so much for tuning in. This has been the Evolution of Medicine podcast. We've been here at the Institute for Functional Medicine's annual international conference.

Over the next few weeks and months, you'll be seeing some of the best interviews that I've done here. Stay tuned. Tell your friends. Thanks so So we are here asking practitioners about their practitioner journeys and the reason why is because journeys is a new product from Fullscript.

Journeys allows you to set up your own lab offerings as the top of the funnel, give the patients what they want, they wanna know about themselves and it's the easiest way to bring them into your practice.

We have all types of practices from across the country that are building their own unique lab panels for their unique practices selling them to their community and acting as a great funnel into their practice.

This is a massive innovation. I think this will accelerate the evolution of medicine. You could go to goevomed.com slash journeys to find out more, set up your own journeys in half an hour and transform the health of your community.

Go get them. So that was the podcast. What an epic session. Thank you so much for tuning in to the Evolution of Medicine podcast, we'll be back again next week and thanks so