Introduction and Ashok Guptau2019s Background

For the. Welcome back to the reversing mast cell activation and histamine intolerance summit. I'm your host Beth O'Hara of Mast cell 360. And I'm so happy today to have with this my colleague and friend Ashok Gupta.

We've been working together for a few years, and if you have been dealing with sensitivity, massive activation where you feel stuck. Mold toxicity where you feel stuck.

This is an interview you definitely want to listen to because this is a huge piece of the pathway to getting unstuck. And what we're going to talk about is one of the cause of the MSC 360 process that we use in our clinic at Mast cell. 360.

Let me tell you a little bit about Ashok and then we'll bring him on. So he's a well known neuroplasticity expert and health practitioner, and he has dedicated his life to supporting people through chronic illness and achieving their potential.

And he suffered himself from chronic fatigue syndrome about 25 years ago when he was studying at Cambridge. Through the neurological research he was conducting, he managed to get himself 100% better.

So it's really inspiring and exciting. And then he went on to set up a clinic to help others and published a lot of well known neuroplasticity, brain retraining, a program called the Gupta program.

And they've been doing ongoing research on the effectiveness of this program, and it's now being used to support people with mass activation syndrome, mold toxicity, chronic fatigue, multiple chemical sensitivities, long Covid, a lot of other related conditions.

Thank you so much for being here with us, Ashok. Thank you, Beth, for that wonderful introduction. Thank you. And I know, just like so many of us that have dedicated our lives to this, there's a you have to have a passion for this.

And that passion comes from usually our own stories. Can you share with us a little bit about what happened for you with your health, and then how did that lead into the work that you're doing today?

Because I know you were pretty sick, just like so many of us. That's right. Beth, as you say, many of us as practitioners came to this from our own experiences and feeling like the mainstream medical profession wasn't really catering to the huge amounts of suffering that occurs with these conditions and not prioritizing them.

So, yeah, as you've mentioned, I was studying as an undergrad and, you know, living life to the full had loads of energy doing everything. And then I went to India and got a stomach bug, like most people who go to India do, and I came back and the stomach bug went, but my body never recovered and I just went downhill and I just got more and more fatigued.

More and more symptoms would come to me pain, cognitive difficulties. So the point to which I would open up a textbook and I couldn't even read it like real amounts of brain fog, memory loss, in my worst days, I had to crawl to the bathroom and it got so bad that I was almost, you know, suicidal.

And in that moment, it was like a brick wall, you know, it's like, what am I going to do with my life? And I would see doctor to this doctor, that doctor, they say, oh, you've got depression.

Here's some antidepressants, but that would make me feel worse. Or they would tell me that, look, you've got this condition called any your chronic fatigue syndrome.

We don't know what causes it. We don't know how to treat it. There's no cure. You probably gonna have this forever. Go and rest and I thought, you know, what am I supposed to do with that information?

And for me, I'm someone you can't take no for an answer. And I said, no, this is not good enough. There has to be some reasoning behind this. So I made a promise to the universe.

From Chronic Fatigue to Brain Retraining

I said, if I can figure this out, if I can just work out why I'm here, if I can get myself better. There's thousands, millions of people who are suffering.

If I can get myself better, I will dedicate the rest of my life to helping others with this condition. And so I, as you said, study lots of brain neurology, especially the work of Professor Joseph Ledoux on the amygdala.

Part of the brain worked out a hypothesis as to what was going on. Then ad hoc retrained my brain on the periphery of consciousness, got myself 100% better, and then set up a clinic to treat others, and then published a medical paper, online in 1999 and in Medical Hypotheses journal in 2002.

And since then we've been treating patients learning about what works. So we we didn't say, right. We figured it out. We tried to be as humble as possible, say what's really helping people.

And then in 2007, we were the first brain retraining neuroplasticity program to publish our treatments. And one, I'm so happy that you've gotten better.

And and so sorry that you had those experiences. And I have my own health journey. And the similar thing really fell apart in college. Your work has been quite instrumental in the hundreds and hundreds of people that have come through our clinic and also our wider community and a wider audience and I want to talk about what's behind that so that people can understand why this is so important.

And probably a good place to start is just what is the limbic system, the amygdala, that you're mentioning as part of the limbic system? What does it govern?

What is it managing for us? And then how does it get dysregulated when we have these kinds of chronic conditions? Yes. It's such a mystery, isn't it. Best like it's it's something when it happens and you go from doctor to doctor, they don't have an explanation that seems reasonable.

It's like, what is this mystery? And I'd love to start from first principles. You know, I always ask this big question, why are we here? Right? Because there has to be a logical reason for these conditions, like muscle activation.

And I want everyone to think about from a scientific perspective, we're here because our brain, our nervous system, this physical body is designed to protect us against the environment, ensure survival so that we can pass on our genes to the next generation.

So we are survival machines and our muscles are part of that survival process. They get activated when we have threats, it toxins in the body, viruses, infections, etc..

And what really happens is that when we go through a traumatic event and normally we think a trauma is an emotional trauma. But imagine that when you have a virus.

And let's take the example of, long Covid as an example. Right. So let's take the example of Covid 19 infection. When you exposed to Covid 19, your body knows that that is life threatening.

Just like any infection is. And so it recruits all your defenses. And let's take a really good example here of that I don't know. Are you are you a fan of Game of Thrones?

I did watch it. No, I it was not good for my limbic system, but I didn't watch it. Well yes. No. Very good point. Although, let's say the example of a fairy tale.

Right. And best imagine you're the queen of the castle. Yep. And your navy is the immune system, and your army is the nervous system. And the nervous system of the immune system are there to protect the castle in the kingdom.

And you're the queen of the kingdom. And along comes an invader, in this case, Covid 19 infection. Now, the army normally can fight off that infection very easily, like many people have Covid 19 and they hardly have any symptoms.

And off goes the invading army and everything's fine. But imagine that for whatever reason, there's a drought in the kingdom, which is analogous to many people feeling overstretched, overworked could be chronic stress, could be even athletes overtraining syndrome.

It could be pushing your body too hard. Whatever it is, your system not quite at its stable level. All right. About these like underlying mold toxins people have accumulated.

But they're functioning or underlying Lyme infection. But maybe they're not symptomatic. Exactly. Right. So it could be an underlying background inflammation where know and we know in the modern era because we are surrounded by pollutants, toxins mold.

Our bodies are just in the background triggering slight bits of continual inflammation. Yeah. Which can, as you say, make our bodies even more prone to feeling overwhelmed when a real, you know, a more intense trigger comes along.

And so the there's a drought in the castle in the kingdom. And so the army and navy are weaker than they would be normally. Now along comes another invader over the hill.

This is the Covid 19 infection and the Army and Navy work really hard to fight off this infection, and they have to really recruit all the resources of the castle, and they managed to just fight off the virus, just fight off the invading army.

But now the Army and Navy are traumatized because they realize, hey, we only just survived that experience. What happens if another army comes over the hill?

What happens if we didn't defeat them and they're just over the hill and we can't see them right now. They come to you. So the generals of the army and Navy come to you, Beth, the queen of the castle.

And they say that we need all the resources of the kingdom. We need all the metal, all the wheat, all the energy. Yep. So that we can be in a state of high alert and readiness because we want to protect the Kingdom.

Limbic System, Amygdala, and Mast Cell Activation

And so even though the king, the original invaders, have been fought off, it's left this legacy of a traumatized immune system and nervous system that keep responding in a state of readiness, using up all the resources of the castle.

Now imagine that the army and Navy, especially the Navy, the immune system, keeps firing off lots of arrows in random directions just in case there could be an invader hiding over here are hiding over there.

And actually, it's just a child playing with a stick in the garden. But the brain says that could be evidence of the army being present. Quick mass, cell activation, histamine and all the other chemicals go out to create this chorus of defensive responses.

And there we get a clue to mix and similar conditions of what's occurring. It is our brains natural evolutionary, correct thing to do to over protect us, because our brains care more about survival than they do our well-being.

That is a fundamental point. More about survival. And so as long as you survive and you on the side of caution, you will procreate. Pass on your genes to the next generation.

Now, if you're unwell, the brain doesn't care so much about that. And so then we generally find that there are triggers such as firstly genetic triggers.

So we could have a genetic predisposition to these conditions. That can be a lack of detoxification skills or that could be childhood experiences. So we know that people are more likely to get these conditions if they have adverse childhood experiences.

Abuse and trauma is the background. So that's one risk factor. Second risk factor is then this acute or chronic stress. And the third factor is this trigger.

And if I can just show a little diagram that makes it little more visual for people. You can see here that here are these kind of predisposing factors to getting these types of conditions such as long Covid or mix, predisposing factors, acute of chronic stress and then a viral bacterial or the trigger.

And that can be mold. It can be a chemical can be Covid 19 can be a host of different things. Normally the body deals with it, but in a minority of cases it creates this trauma in the brain, specifically the amygdala and insula.

And I'll come on to describing those two brain structures in a moment. And this causes this vicious cycle where we have a trauma at the brain. At number four, this causes chronic sympathetic arousal.

That means our stress system gets over triggered. Our immune system gets over triggered, will always mast cell is getting activated now which causes the symptoms at number six.

So muscle dysfunction and pain cognitive difficulties those symptoms of allergic responses sleep issues autonomic dysfunction a whole list of different symptoms which then loop back to a hypersensitive brain at number eight.

And number nine, where the brain takes in all these incoming signals and says, This is evidence of ongoing invasion, ongoing challenges in the body. Let's re trigger the immune system, the nervous system, and around and around we go in these conditions.

And you'll even see at number seven that can lead to adrenal exhaustion. That can lead to mitochondrial dysfunction. So this this idea of, cell dangerous spots where the cells actually themselves are in an altered state, not giving us the energy because they're in a defensive state.

Latent virus and bacterial reactivation. And, of course, as you've mentioned, allergies and sensitivity is increasing in general, mainly because the whole body is in a defensive mode and any new supplement or chemical or medicine or food, is on the side of caution and starts firing off, just like the army firing of random arrows in different directions.

So in a nutshell, this is our hypothesis that our brain has now gone into this altered state. It's not in homeostasis anymore, not in balance. And the purpose of our brain retraining is to retrain and interrupt this vicious cycle.

And finally, many people and other programs that came later have used this idea of limbic retraining. In fact, that's half the story, because the limbic system is the ancient part of the brain that mammals have.

All mammals have a limbic system. Yeah. And that's where the amygdala, the hippocampus and the hypothalamus, they all sit in the the limbic parts of the brain.

But the insular parts of the brain that sits between the limbic system and the cortex, that's not actually part of the limbic system. And I believe that in the insula, that's where the core trauma actually occurs.

That's what I describe, this insula part of the brain, because it's very relevant to muscle activation. So the insula is a part of the brain that takes in all incoming information from the body.

So that's all how your body's functioning, your heart rate, your blood pressure, your immune system and takes out incoming information, processes it, and then creates the appropriate autonomic or immune response.

Now, before, it used to be thought that our immune system was very peripheral. So some cells over here will detect an invader and create the appropriate response locally.

But of course it makes sense that like you are the queen of the castle, you need all the generals all around the country to report back to you so you can make an integrated decision now to protect your castle.

And it turns out that that integrated center is actually the insula. And some recent research, we've been following this for many decades, but some recent research has shown that when it comes to gut inflammation, they looked at gut inflammation in mice, and they detected a specific signature in the insular part of the brain.

And then they were able to trigger that part of the brain insula and create that same inflammatory response in the bowels. And that was groundbreaking research.

No one's ever done that on the planet before that, that we know of. And it proves that certainly in animals, the insula is where we store that central information about how the body responds to our environment.

So we believe that a mass activation is due to the insula and amygdala part of the brain. Learning to become overly cautious is continually triggering these mass cells, which causes all these downstream symptoms and contributes to a wide variety of different conditions.

And that's a great analogy, and what I want to highlight for people who this might be new information for them, and we've talked about in other parts of our summit, is that the mast cells line every nerve ending.

They line every nerve sheath and their cells. It used to be thought there were no mast cells in the brain. We now know they're vessels in the limbic system itself.

And they're responding to not just pathogens, the chemicals, every molecule of air they're sensing, just like the nervous system. They're responding to our thoughts or stresses, our experiences, and they can respond within fractions of seconds.

And it's because of this interwoven ness with the nervous system. We can't really I know when when I did all my education, we had nervous system. We had immune system psychology over on a different campus.

But that's not how we function. And we have to remember that, that the muscles are this interface between the nervous system and the rest of the body.

And that's how all this is happening that you're describing. And why this nervous system angle is so critical. And this is why I say that nervous system recovery and nervous system retraining is at least 50% of our healing process with mast cell activation is quite significant.

Can we dive into see you talked about it. I'm on a high level with this hyper vigilance when there's the child playing with the stick in the garden and that, but the Army and the Navy are traumatized.

They don't know. So they're just kind of going in. Everything I say, they start shooting at the butterflies and they lose their fine tuning. They can't tell anymore.

And we're not talking about, I mean, this certainly happens in people who are, for example, war veterans and have PTSD. But we're talking about this in terms of having had a we've crossed this threshold of the the number of pathogens.

Chemicals could be physical stressors, could be emotional stressors that we can keep up with. And that's that cell danger response I'm talking about. And then there's this whole downstream effect.

But what I love and find so fascinating about this, the nervous system side of this is that we can use the nervous system work to send signals down to that cellular level, to tell the cells we're moving out of danger and into safety.

That's how I think about it, and helping us to shift out of that cell. Danger response one and we have, whole topics just on cell dangerous spots for people so that they can get deeper in that.

But can you talk about that more, how we shift out of cell danger response with this work? What's happening and how are we using it to reprogram particular sensitivities?

Because we get people who they're down to two foods there can't take any medications, and that tailoring supplements. I used to have to hold my breath going down the laundry detergent aisle.

And if somebody was in the elevator, I couldn't get in because they might be wearing Cologne, or I couldn't get in a taxi because before we had Uber and Lyft, because there might be one of those three things hanging.

There's air freshener. Yes, yes, yes, yes. Yeah. This is when people have this type of response as you described.

How Brain Retraining Calms Cell Danger Response

The first thing to realize is it's perfectly normal and it doesn't feel like it's normal. But as far as the brain is concerned, it's doing the right thing.

And so going back to our analogy, when those generals now have a meeting with Queen Beth, it is Queen Beth job. And that's what we do in brain retraining to say to these generals, you guys have done a great job.

You've done a valiant job, but the war is over. Yeah, we have defeated the Army. And actually by you continually thinking the army is here, you're causing more issues now. Yeah.

So we'd like you to calm down and feel safe. And, you know, actually, it's equivalent of in an emotional situation, if you had a son or daughter or niece or nephew and they were crying over something very small, what would you do?

You'd soothe them to say they're there. It feels really bad, doesn't it? But actually it's not that bad. You know, you would soothe and calm them down.

And then similarly, we are soothing in calming down these defensive responses and these defensive responses in the brain, as you say, traditionally we separate them out emotional response, biological response, physiological response and the chronological response.

And these are different departments in hospitals. But the brain doesn't see it that way. It's you know, originally the amygdala was associated with PTSD and anxiety, fight or flight, but now it's being associated with pain gateway, with immune system responses.

So the brain doesn't differentiate. It simply says, what do I need to do to survive? And so if there is a potential threat, it will create an emotional response, a physiological response and immune response.

And we can take advantage of that and be able to train the entire brain system so that we can indirectly calm down the immune response. And so you've described it exactly right there that we are going upstream.

So rather than, you know, we give you the analogy if imagine you're you're standing on a bridge and you're looking down and there's people drowning in the river.

So you jump in the river and pull them out. And then there's another person in the river. So you jump in and you pull them out, and suddenly the 60 people in the river and loads of people saving them.

So they set up a hospital next to that bridge saying, right, we're going to fish all these people out and save them. But no one's asking the question.

He's throwing these people upstream into the river in the first place. Right. And so the so danger response, exactly right is the downstream effects. But it's not really where the core programing lies.

And I know there are certain theories around cell danger and how it's localized. We just don't buy into that. We believe truly that it is an upstream issue.

And these downstream cells are getting continual messages to be in that protective state. And of course, it's an interaction. So the brain's constantly communicating with the body.

The body's giving signals back to the brain. So it's a chicken and egg. But ultimately if you can get to the core parts of the brain in calm and tamper down, temper down that response, the rest of the body begins to heal.

And we've had some, you know, obviously some people need that extra support, but other people have been able to completely reverse that. Marcel. Just through, brain retraining, you know, come on.

For their supplements and that, and they're fine because they've gone to the root cause and others, they may need that. Obviously, it's just great support that people like yourselves provide.

So, it's really that hope that that realization that mainstream medicine has found it difficult to treat these types of conditions because they're in that black box called the brain to medicine.

It's about measurement. What can we measure? We can measure, hormones. We can measure enzyme. You can measure gut responses. But open this brain and try and figure out 100 billion neurons.

That's actually virtually impossible. So these types of functional conditions have got missed and they have become misdiagnosed, mistreated because it's very difficult to treat the brain in this way.

And so until we're able to dissect every single of the hundred billion neurons and figure out which one to retrain, until then, we have these types of brain retraining.

Neuroplasticity approaches to retrain the Army in the Navy, essentially. Okay, like that approach. Better than trying to dissect all my neurons. But yeah, exactly.

But we're on the same page in terms of we have to trace back to what are the the top level issues here. And and I love that you, you all have people who are able to do this just with the limbic retraining.

And that's amazing. And this is where I have people start. And then if they, are still struggling, well, we have to take the other threats out. I find that people can really struggle if they're still exposed to mold toxicity because we're trying to retrain, but they're in a lot of mold.

And that that, olfactory nerve keeps sending that dangerous signal. Another thing I find really common, and I wonder if you see this is people in toxic relationships.

Yes. And this is something related to adverse childhood experiences. So we know if we stop back for our birth, actually, even before birth, the experiences of the mother influences the factory setting of our amygdala.

So how prone are we to react to emotional environments is actually related to how our mother experience pregnancy, but also the birth experience itself can be traumatic for for a baby.

Then secondly, our upbringing that also impacts on the amygdala and how sensitive our brain becomes at an emotional level. And once again, we've traditionally separated emotions and physiology.

But it turns out that the brain incorporates them. And people who have had adverse childhood experiences are 3 to 4 times more likely to experience chronic illnesses like these functional disorders later in life.

Now, the good news is that your genes are not your destiny. Your upbringing is not your destiny. If we have that background and we certainly notice ourselves more emotionally sensitive and therefore more physically sensitive, it simply means that we just need to work a little harder at keeping our mind calm and our nervous system calm, and our immune system calm to having regular practice that perhaps somebody who doesn't have a triggered amygdala may not need to do.

And therefore relationships, tied to this because in our intimate romantic relationships and they may not be romantic, they can also be parent child relationships.

They're trigger some of the unresolved emotions from our childhood. So powerfully that they can trigger the amygdala and that can cause, cascade of muscle activation because of the core emotional nature of our intimate relationships.

And that's why they can impact. And therefore, what we also do in our program is help people. We use parts work. We help people understand some of their triggers, some of their approval seeking or angry parts, and to be able to work internally with themselves to calm down those parts, to improve healing as well.

But I don't know if you see this, but we certainly see that some of you can get better from a whole host of different things. It might be a physical work, it might be the kind of work we do, and then they'll have a traumatic situation happen in their lives.

And even though they're on the same protocols, all of the symptoms can come flooding back. And then they think, oh, I'm back to square one. Nothing's working.

It's not that they've come back to square one. The learning is still there, but they've just got to calm down the amygdala insular again and get back to that normal functioning through the work that, you know, we we definitely look at that work about how to handle stress and relationships and get back to back to normal.

So that's an important part of healing now. And and you're exactly right. I do see that I often have people we get a lot of phone calls and emails after the holidays and people wanting to schedule.

And they've they've gone back home one day. They've gone off of, you know, they've eaten things they don't normally eat. They're not eating well, these types of things.

But they I find even bigger than that will be these stressors that are happening, these triggers that are happening. And what I really love about your program and have been through your program, is that you work on soothing and working with those parts in the now, which is so critical when people have this chronic illness.

And I see a lot of people trying to do more in-depth trauma processing, and when we do that, where we're going through the story, detail by detail, by detail, at least my experience has been our nervous system doesn't understand the difference between I'm dissecting this and processing it at this really deep level.

And it's it's happening again.

Trauma, Relationships, and Heart-Based Healing

Exactly. And and I find that, that there's a time and a place for that. But when we're trying to come out of this, limbic lockdown, this hyper vigilance, the cell danger response, that's not the time to, to be doing the the archeological digs into the trauma.

I agree with that, Beth. And a lot of modern psychology, Freudian psychology is based on this idea that somehow bringing up those past memories will automatically heal them.

Yeah, and it's a nice idea. And occasionally it occurs. But why is it people are in therapy for years and years and years? You know, for me, something's not working after five years.

Stop it. Right. You know, it doesn't work because what we're doing is, as you say, excavating all of this emotion. But there's not necessary a process to process that emotion and be able to release it.

Now, that's not to say there aren't some fantastic therapists and trauma work people who are exactly working on more solution orientated approaches. So I want to be very, very clear that it's it's really good work.

But as we go through brain retraining, if we're simultaneous see, trying to process years and years of unresolved emotions, all that's doing is potentially re triggering in the amygdala.

So we say to people get better from this condition, calm everything down and you'll be then in a better, stronger place to then deal with underlying trauma.

Now very very occasionally some people still need to do the trauma work in order to heal, but those are definitely the minority. The vast majority of people can still get better.

And we say to people, there was a time before you got the condition. We still had those traumas, but you didn't have the condition. So the condition is an overlay above those traumas.

We want to remove the overlay and then we can go into the deeper work. And in the meantime, when we do things that keep us in the present moment and we have the kind of work that you do is wonderful at that, we have things like somatic focusing.

We have a talk on that that's really about just soothing and being here and being present, and we don't have to go through every minute detail of of what occurred.

Shifting gears a little bit, sorry, but I just want to also add something that you've you've mentioned that we know that the majority of people who get these types of conditions, it tends to be more female focused, for sure.

And it's so important, there's a heart centered approach, and I think there are, you know, other approaches out there which are very masculine in some ways, very bootcamp orientated.

And we definitely focus on the more heart based approach because we find that that's longer lasting. There's no point someone telling themselves off or having the condition or or whatever.

It's very much about soothing this anxiety through heart based approaches, especially for women and that's the approach that we take. I love that, and I'm really glad you highlighted that.

And I have a background in marriage and family therapy and a long background and, spiritual development and coaching as well. And what, what we know about it's often talked about in terms of the ego, but I think of that as part of this limbic peace as well, is all this is going to relax, it's going to release if we feel safe and we feel safe when we're loved, we feel safe when we're appreciated.

We feel safe when we're seen and we're understood. And sometimes it's hardest to give that to ourselves. I'll often have people imagine their favorite beloved child, whether it's their own child at a young age or someone related to them, and how they would talk to that beloved child.

And, you know, if you if you wouldn't lecture your beloved child for not being able to get up and get the dishwasher unloaded, how would you have that conversation?

And I took them when I had severe chronic fatigue, and I'd have to get to, a doctor's appointment and, and my husband travel full time for work. So I didn't have family in the area to everybody to take me.

I couldn't get in the taxis with the little tree air fresheners. So I would talk to myself enough and call myself sweetheart, and I'd say, you can do it.

You know, you're look at you. You're getting your jacket on. That's really good. You've, you know, you've got your purse, you've got your water bottle plant.

Great job. And I would have to cheerlead and coach myself through every little step of getting out the door and into the car, and then even driving the car, because I just, I kind of just pulled over and stopped five minutes down the road.

I was so exhausted. But that's how I got through. Yeah. It's a heart based self-compassion that self-compassion to get through this is so important because most people have had this condition.

They've had that emotional sensitivity in the background of their lives. They've had enough of people lecturing them, talking down to them, mild to moderate abuse.

It's only ourselves that if we stop now talking to ourselves compassionately, we begin to repair those old wounds. And that's also part of the recovery journey.

Yeah, I love that. And we don't have a cultural context for this kind of chronic illness. We have a cultural context for for cancer. We understand cancer.

It's it's devastating. But when you get cancer, people send you cards, they bring you casseroles. You know, they arrange carpools for the kids. But we don't have a cultural understanding around these kinds of chronic illnesses.

And I think there's a own trauma in that that occurs. And so that's what this heart centered approach is so critical. Yeah. And I think the way that from a cultural perspective, I'd like people to think about this for themselves, not necessarily for anyone else.

Is this idea of the caterpillar turning into the butterfly that many of these chronic conditions, come to us when we're the caterpillar? Yeah. And this isn't anything about blame, but it's about transformation.

But going into these conditions is like a cocoon because it feels like a cocoon. We're often separated from the normal systems in life, and friends and family, and we feel isolated and alone.

But it's a process of transmutation, transmutation into something bigger and brighter and better. The better version of ourselves. And sometimes it takes these conditions for us to take a pause and reflect on the caterpillar that we were and the butterfly that we choose to be, and the butterfly then has to struggle out of the cocoon, which is strengthening its wings.

So the very process of getting better from these conditions is strengthening some of the new skill sets that we need around being more centered, being less, aspect sensitive to our environment mentally, physically, emotionally, being able to be taught compassionately to ourselves.

These are all the skill sets that we learn because we're forced to learn it in that cocoon. And then we transform into the butterfly. And if we can see that in ourselves as a cultural story, that rather than seeing this, these horrible conditions that we're being attacked by.

But actually, this is an opportunity for my growth and my healing and I'm going to emerge into my true potential from this, that it takes away a lot of the anxiety around these conditions.

And I learn. Thank you. You had a mission around it that if I I'm going to take it out when I heal from this condition,

I'm going to dedicate my life to serving people who are dealing with this.

And I had a similar thing, and I always knew down in my bones for some reason, that there was a way out of how ill I was. And if we can hold on to that, that if we can take this, this suffering, this cocoon, this these challenges, and know that we will emerge better.

And there's a faith that's required in order to remember when we're in the midst of it. This is hard to remember in the midst of it that that we can't emerge as something stronger.

And I'm certainly a much better person than I was on on this side of it. I mean, I worked myself to the bone and work three jobs and did independent study research into graduate courses as an undergrad.

And and it wasn't necessary, but I was so driven that I had to be successful. I had to achieve to be okay. And I don't know that I could have broken those patterns and really learned to love myself and take care of myself.

Yes, necessity is the mother of all invention, so it's only when we're forced into a situation. And for me, that is part of life.

Long COVID, Gupta Program, and Recovery Tools

It is, whether it's a relationship breakup or an illness or, a job loss or something, they all feel so painful at the time. But the silver lining is they are opportunities for growth.

Now, we don't wish them on anyone or wish do we wish them on ourselves. But once they are here, then we need to make the most of it for our own growth.

No, I do want to say while we still have some time touch on what you're seeing with long Covid, we're seeing a good bit of long Covid. People have come into our practice, have developed long Covid.

Interestingly, more people who didn't have mass cell activation before Covid, and then they had it after, not as much. And the people are already established in our practice.

And I think one of the keys is that they're already doing the nervous system work. We have the nervous system, the mast cell kind of supports on board.

What are you seeing around long Covid and how is this framework connected in with how people are or what people are experiencing with this. This is a real problem.

Yeah, absolutely. It's a real tragedy. What is happening with literally millions of people and some of the research that we've done shows that actually the first few months of long Covid are different to chronic fatigue syndrome, and in the sense that there's more immune symptoms.

But then gradually long Covid and CFS, dovetail into essentially the same condition. There's a, you know, they're indistinguishable. And it certainly could be in this first few months.

There's more mast cell activation as a result of the fact that there's more of those kind of immune type symptoms near the beginning of, of long Covid.

And so there could be a lot of crossovers between the two. And for us, it's the same hypothesis that we've already mentioned that long Covid is yet another trigger of these underlying neurological processes, which creates then a unique basket of symptoms that they, experience.

And in long Covid, we're actually getting some great results, as long as they don't feel that, oh, this is something new and mysterious. And you know, have I still got the virus in my body?

As long as they're able to to actually recognize our hypothesis is applicable for long Covid, they we actually have quite quick recoveries because the enrichment in the brain hasn't been so deep, which normally might be dealing someone who's had it five years, ten years, 20 years, there's more consistent retraining with quiet with long Covid.

We've had many stories on our website. You know, within weeks they've got back to 1,995% healing. And then final 5 or 10% is just rehabilitation back into normal life.

So it's, you know, it's a very serious condition. But at the same time, you know, there's really hope for a lot of people suffering from it. That's wonderful.

And we're seeing great results with people doing nervous system, rebooting limbic work with with long Covid as well. I like to to leave people with hope and to leave them with action steps.

Let's talk about how you go about rebooting the limbic system. What does that look like? So in the Gupta program, we have the the three hours of the Gupta program, the first hour is retraining the brain.

And that's the the core of our protocol. That's very, very unique. And that involves the patient recognizing there's unconscious signals on the periphery of consciousness.

And so it's not CBT. So it's not cognitive behavioral therapy. It's not thinking positive. It's retraining rehabilitation through repetition. And that is the core of it.

And then we have the second hour which is relaxing the nervous system. So that's your things that people perhaps are already doing breathing meditation.

And then we also a good anti inflammatory diet and antihistamine diet if they got mass cell activation and good sleep patterns, exposure to sunlight, all of those good things we know are good for general healing.

So holistic health. And the third are is reengaging with joy often a missing piece of therapy, which is actually how can we enable a person mindfully to become aware of the small joys in life singing, dancing, music, gardening, whatever brings you that joy.

And that's very powerful. Enabling neuroplasticity and enabling healing and resetting the immune system. Same with meditation. We know that meditation increases the plastic, the plasticity of the brain, enabling you to shift things.

But the core of the program is that brain retraining, and we have now able to operate throughout the world, is an online program, and people can go to our website at Gupta program.com, and they can sign up for 28 day free trial so they can sample lots of videos, lots of content.

And then if they choose to take the full program there, they'll get 15 interactive video sessions, which are shot in the beautiful healing mountains of Switzerland.

So it's very relaxing to watch you get over 40 audios exercises that you can specifically adapt to your certain circumstances. And then there's also a support group.

So we have a, you know, 5000 people now in our intimate support group where people advise each other, answer each other's questions. And we also have trained coaches around the world to have now about 20 coaches.

We're training up another 30 to 40 coaches, to enable one on one sessions. And finally to keep up that motivation. There's weekly webinars with myself, taking people through the content and answering questions.

So we want to hold people's hands. You know, people have brain fog. It's difficult to to focus. So we give people all of that supports and ecosystem to help them, to recover.

And until we have the large scale phase three clinical trials, we offer a one year money back guarantee, no questions asked on the program so people can use it, see if it works for them, as if it's right for them, and then return it and use the money for something else.

If it's not. And this is because we have done small scale trials which have shown great impact. So a clinical audit we did showed that two thirds of patients reached 80 to 100% recovery within one year and 92% of patients improved.

And a recent randomized controlled trial, which was very proud of it, was the first randomized controlled trial ever on a neuroplasticity program. And it's a fibromyalgia patients.

And that showed a 40% reduction in fibro scores within eight weeks, and nothing in the control group and a halving of pain, a doubling of functional capacity, a halving of anxiety and depression in those eight weeks.

So really great results that was published in the Journal of Clinical Medicine. And we're now pursuing further studies, and we'd love to do a study. And obviously a massive activation as well.

So yeah, for us, it's about proving this to the mainstream medical profession and getting people access to this as early as possible. It's so exciting, and I love the program.

I've been able to integrate the tools into my daily life, so I want to encourage people to go beyond that free trial and really give the the big program, the whole program, a try.

We do have, you shared generously with our community, coupon code. So we've got that linked. Oh, and, we've got that coupon code for everybody over at Mast cell three 60.com/summit.

And then and they can get those details over there and get joining on your program. Have a quick little story of how I've used it. So I had car accident several years ago and I was badly injured.

And I'm still ligaments damaged, extreme pain and still getting some of these areas, structural areas, repair. But for quite some time after that car accident, I was T-boned from the side.

Any time a car even was going slowly would come up towards my car like a light or stop light. I would jump and I would tense. And your program has, a retraining system that you learn and you walk yourself through, and then there's the accelerated version you learn to do in your life.

And I've been able to take that accelerated version when I was driving and lost myself through it. As I'm coming up to lights, as I'm seeing the car coming and I don't jump, I don't have the tension anymore.

I don't have the the stress and that help the pain levels. And I know that that's helped my my mast cell activation. And I tell the story a lot of how my, some of my initial massage symptoms are hand swelling and I've done experiments with myself where I can cycle on very stressful thoughts or memories, and within seconds, my hands will start to swell.

Yeah, and then I can start to shift shift that limbic response. Do do this type of work, do that retraining. And within a couple minutes I can visibly watch that inflammation drain out of my fingers.

Yeah. So this is literally how powerful it is. And I wanted to share because it's so critical that people do retrain the limbic system when they've been dealing with chronic illness.

Yeah. What a wonderful story, Beth. Yeah. And it just really is that analogy that that is what we traditionally see as a psychological response to a car coming, but it has physical ramifications.

And on top of that, it's recognizing that when it's physical, when we retrain the physical brain, it's not it's no longer an emotional response. It's actually a physiological protective response.

Just like you tensing office, tensing up the car, hitting you in the same way the muscles are, tensing up, as it were, against potential invaders inside the body.

So it's the same analogy. And now we've unlocked that. We've unlocked how we can reverse that and train our bodies. Train those generals, to come back to homeostasis.

And that's just really, really exciting. I want to thank you so much for sharing your time, your knowledge, wisdom, and especially for your work in the world.

It's a huge gift for people and just really grateful for you. Yeah. Thank you so much. Thank you so much. And, just like to also make sure that everyone's aware we have a free e-book which people can also, download and as part of that summit, lots of information that we've covered today, all in written form, they can have in front of them.

And, yeah, I really want to give everyone that hope that no matter what a doctor has said or what a support group is said for the great work that you're doing, we're doing so many great practitioners in this area.

Recovery is possible, and I believe that everyone can can get that. Thank you so much. So you can find an e-book called Retrain the Brain to Heal from Chronic Illness.

That's in the bonus section. And then, go to Marcel 316 at Palmer Summit and you can get your coupon code and check out the Gupta program.