Introduction to Gupta and the Summit

Now, Gupta is an internationally renowned speaker, filmmaker and health practitioner who's really dedicated his life to supporting young people through chronic illnesses and achieving their maximum potential.

He is the creator of the Gupta program, and it's called The Secret of the amygdala training. Pretty fancy. And I am having him on today discussing exactly how people with chronic disorders can really find success in technology and training and in their health.

The good the program is one of the most revolutionary, tools for improving brain health and neuroplasticity. Mindfulness. It's a very holistic concept for a lot of chronic conditions and even long haulers and Covid as well.

So I would like to welcome Ashok Gupta to the summit. So excited to welcome you to this summit. Thanks for being on. Yeah, really excited to be here. Thank you for inviting me.

Yeah. So, you know, this is this is all about, brain and brain health and one of the most crucial things and most misunderstood things about brain, especially in recent a couple of years, is the coronavirus and long haulers and Covid, long, long Covid syndrome or whatever.

We're calling it these days. And we recognize there's a lot of symptoms that go along with it that's similar to other disease states as well. But let's kind of dive in.

What what do you think long haulers and Covid syndrome really is? Well, yes, it's, the million dollar question. And there's so many different researchers with different theories.

I think from our side, the main reason for long Covid is what we believe is, is stuck in your system in colloquial terms, essentially.

Understanding Long COVID as a Brain-Body Loop

So the hypothesis that we use is that, you know, what is the biggest reason that we're here, right? Why are we here? And, we can answer that from a philosophical perspective in another podcast.

But, right now we look at it from the scientific perspective. We're here because this body and this brain is designed to ensure survival. So as far as the brain is concerned, survival is more important than your well-being.

And so when we come across an infection. So those could be viruses bacterial infections and in this case Covid 19 the body obviously has a plan of action which is the virus enters the body.

The body then enacts a whole series of different defensive mechanisms through the immune system. And then once it is fought off, it resets itself and goes back to its homeostasis, back to balance.

But what we find is that in about 10 to 20% of Covid patients, they go on to having lingering symptoms. And we believe this is because the brain essentially errs on the side of caution and creates a chronic inflammatory response that continues.

We don't believe this continual virus debris in the body like some researchers do, although we can't be sure. But our hypothesis is that the immune system gets stuck in the nervous system, gets stuck, and continues to over defend against otherwise neutral stimuli.

So the neutral stimuli in the body are the aches, the pain, the tiredness, the normal symptoms of post-viral fatigue,

but they become conditioned stimuli.

The brain perceives those as evidence that the virus is still present. Looping back to a hypersensitive, hypervigilant brain, triggering the immune system and nervous system.

Creating the symptoms in the body. Looping back to a hypersensitive brain and round and round. And we go into chronic illness. And these illnesses often have waves.

So they come and go and patients experience good days and bad days. And we believe this is because there is a feedback loop. So in in physics, the only way you can get these kind of chronic waves is when the inputs an output of the system has become linked together.

And so it is with this, the brain and the body are essentially playing game of tennis, whacking the ball harder and harder against each other, believing there's something wrong, creating this cascade of ongoing chronic illness.

You know, what you see is very interesting because that's kind of like how we describe pretty much all autoimmune disorders. And there's a huge implication of the brain.

And, and, most people don't know this, but I'm going to give you a little bit of background data before we publish it. But, you know, we treat a lot of long haulers at Texas Center for Lifestyle Medicine.

So, I'm known for brain mapping and one of the classic, classic things on the brain is that the brain operates really at extremely high frequencies, even at baseline, basically perpetual fight or flight.

And you can see the like the like you can see like the, the, the EEG just like this. Right. And that happens, after after the coronavirus. And that actually happens after every person with coronavirus, not just long haulers, but long haulers tend to be a lot longer.

Right. And your connection, you know, talk a bit about the the ping pong back and forth brain in the body makes so much sense. Because we can actually physically see that we see, like the paddle being swallowed really hard, you know, by the brain, and it's receiving the signal.

But we said earlier is sort of this conditioned response, you know, the brain and the body is primed to see something there. And that just happens to be coronavirus.

But you know, but coronavirus is one of the things that the brain and the body sees. There's could be mold. There could be other neural toxins and stuff like that.

And so I think there's a lot of fear going behind. Long haulers. What do you think? What should people do as a self person to start tackling the long haulers?

Sure. So we've spent, over the last 18 months or so, treating, long haul Covid. And we have a neuroplasticity brain retraining program that specifically targets long Covid, as well as some of the conditions you describe.

So, I mean, chronic fatigue syndrome and fibromyalgia and then chemical sensitivities. And we believe all of these conditions have a similar pathophysiology in the brain, which we are targeting using these brain retraining and neuroplasticity techniques.

And so with long Covid and certainly within the program itself there are three key areas. So the first area is what is core which is retraining the brain.

Brain Retraining and the Gupta Program Approach

So training the brain to uncouple symptoms in the body as conditioned stimuli that represent ongoing infection. So it's decoupling that link in that connection.

So that's what we do with the core brain retraining and then supportive techniques. So the second hour of the program is relaxing the nervous system. So we know that the brain is more neuro plastic when it is calmer and less stimulated.

So we use a variety of breathing meditation techniques good sleep hygiene, an anti-inflammatory diet, exposure to daylight, you know, infrared rays and sunlight, all of these different things to actually calm the nervous system overall so that that specific conditioned response can be detangle, retrained from the brain so the brain can reset and go back to homeostasis.

And the third, is reengaging with joy, which is a often a neglected aspect of, of medicine. So we help people understand you can't wait until you get better from this condition to feel good, to feel happy, to have positive, feel good chemicals in the brain.

So using a combination of mindfulness and things like singing, laughing, dancing, all of these things once again promote feel good chemicals in the brain, promote neuroplasticity, and encourage the brain to let go of these survival instincts.

Right. So the brain can actually have a huge impact on the rest of the body for these survival instincts. And that's exactly what we see. And it's very interesting because a lot of the people that we see with long haulers now, it's almost predictable who who they are.

They're generally people who, have relatively hard live experience and crazy traumas, in their past. They're these people who, are sort of, always on sort of fight or flight, a little bit on the edge.

Chronic anxiety. And it's, it's now becoming more obvious who's potentially going to get long, long haulers. You know, once we were able to identify the risk factors for these patients.

So getting back to balance the emotionality behind it is just absolutely crucial. And without that component, it's really hard to heal, right? Yeah, absolutely.

So the connection that we have is essentially we deal very much with the brain structure called the amygdala. And also the insula. So our treatment in academic terms is called amygdala and insula retraining.

And generally the amygdala, as many people know, is the kind of, sentinel for our emotional responses, our fight or flight responses and anger responses.

And in traditional psychology it was known for emotional responses. But of course, this is because medicine separates, you know, the psychology department over here, the immunology department over here.

But the brain doesn't make that differentiation. And so the amygdala is now associated with pain gateways with immune responses. And so is the insula part of the brain as well.

And we believe that there is a link where the factory setting of the amygdala, the insula is decided by, the emotional state of the mother during pregnancy, the actual birth process itself, and then adverse childhood experiences that happen in the first 5 to 10 years of life.

They can determine the factory setting of the amygdala and how reactive it is. And then that predicts how likely it is that brain will get conditioned by other defensive responses.

So we know that people with adverse childhood experiences are 3 to 4 times more likely to get these types of chronic illnesses later in life, because the amygdala doesn't differentiate between the the types of threats, it simply says, what's going to threaten survival, right?

Here's Covid. This potentially threatens ongoing survival. Let me create a conditioned response. And so these are almost like post traumatic physiological responses in response bacteria and viruses.

And that makes sense. You know, the way I kind of explain and the way I think about it is that these are chronic, post traumatic physiological responses.

And there's, and there's a lot of evidence behind it, too. So, you know, going through medical training, medical school residency, there's a lot of, like, poo poo on this concept of is fibromyalgia real chronic fatigue syndrome.

Real right. And now that I am knowing, knowing what I know now is absolutely real. And there's a huge, emotional inputs that's required to get people to these places of physiologic states.

Trauma, Sensitivity, and Predicting Chronic Illness

And in the best way I can describe it is that, you know, if you were in a movie, you saw a scary scene, and then you gasp and then your face goes white.

You basically have a physiological response to an emotional trauma that your body can't determine if it's a psychological trauma or a physical trauma.

And then the same thing. Now I'm a child of concussive injuries. I played a lot of sports, a lot of contact sports as a kid, a lot of a lot of, a lot of concussions.

And so what we see on the brain map is that those people who received from manic experiences, the brain mapping looks identical to someone who's grieving actual physical trauma.

And these people are kind of wired to develop these chronic states. And I know we talk about long hauler Covid, but also like chronic fatigue syndrome and fibromyalgia and stuff like that.

And so the there's there's should be an absolute, appreciation of connection between the mind and the body. And that's part of what this summit is all about.

Yeah. And so another part of the summit I interviewed, Doctor Daniel, and we actually talk about how trauma can have physiological effects. But one thing that I want to kind of want for you to comment on is that, okay, there's viruses and mold.

And I live in Houston, which means there's more than 80% of the buildings, that are here. Right? So are all these things that are that are out there, and a lot of them are natural things that are that are out there who responds poorly to these quote unquote toxins, right?

And who like and who does not, because I feel like there's a very specific population that is going to receive, some bad effects, that ping pong effect between the brain and the bodies and, and how predictable is this?

What do you think? Yeah. So, for us, there are certain characteristics that we identify in our patients time and time again, that predict this. And the number one predict to be some type of childhood trauma or adverse childhood experiences and events which predispose the brain to more emotional sensitivity, which then mean it's more, sensitive to physiological insults, as well, and threats and those childhood experiences often create what we call sub personalities, which, are looking to offset some of those fear.

So conscientiousness, an achiever mindset. So the person who pushes themselves beyond their limits regularly always is putting other people's needs before their own.

We see some of these kind of secondary personality effects that build upon those initial childhood experiences that predict for us how likely it is they're going to go on to have longer term, effects.

And often it third eye area is when people have hyper vigilance of their body. So if they've grown up with illness or their parents had illness and they've their brain has, is pre-wired to be more sensitive to what's going on in the body, then they're also, in our experience, more likely to get these types of, conditions and these sensitivity

reactions.

As you say, we're all surrounded by these types of, you know, mold or viruses, etc.. What decides whether someone gets this? It's not just the genetic predisposition and their upbringing for us, there's a third factor, which is the chronic stress that leads up to the sensitizing event.

So if somebody has had a lot of stress, they're exhausted, etc. and then they get Covid or some kind of infection, that is a they're also a very big predictor as to whether they're going to have longer term effects.

And the reason for this is when your immune system is drained as a result of stress, that it is more likely to over respond in that particular situation to that virus, to on the side of caution because, as we said, survival is more important than your wellness.

And therefore, even once the virus is gone, the brain, as far as it's concerned, is making the logical decision to continue defensive reactions just to ensure survival.

Well, this is fascinating because that's that's how Alzheimer's works, right? Because the brain actually develops proteins to sequester things in different areas as a hyper response.

You know, and it's funny you mentioned that. Sorry to interrupt. You mentioned that I've just appeared on the Alzheimer's Summit, and there are actually people outside this research is using our treatment program to rewire outside patients, and they're getting results.

They're reversing Alzheimer's. Anecdotally, using these types of neuroplasticity approaches, which is incredibly exciting. And also Ms. as well. So we're looking for further research and randomized controlled trials to show how effective this actually is.

Yeah. No, that's that's that's incredible. And once once I think once people understand, to really ignore the actual diagnosis that's really labeled, and just focus on the physiologic effect of what is the most upstream thing that we can do for more downstream effect, no matter what diagnosis it is, it all comes back into like mindfulness and breath and balance and joy.

It's not all just about elimination diet. It's not all just about supplements and stuff like that. It's really about the the truly holistic concept of overall health that has been in my culture, my generation.

I'm Buddhist, I'm Chinese, and so it's something that I've kind of grown up with and I really kind of people on it, like during medical school residency, because I was just highly intellectual.

And now I'm kind of back to square one, which is not it's not a bad. Yeah. Yeah, absolutely. And, one comment, I would like for you to have and this is an observation that a lot of people, with long haulers and chronic fatigue syndrome have very, distinctive characteristic on the brain map, which is hypersomnia.

So hypersomnia, it means that the brain can slip from awake to sleep in, like, a second and slip right back up, and then, and they'll have a sense of like, an attention focus, like what was going on, you know, brain farts and stuff like that.

And we find that a lot of these people have a lot of, like, chronic neck pains. A lot of them have tongue ties and like, mouth issues. Do you see a lot of these people having some physical, logical effects from like, body structures and what they're born with, suffering from either long haulers or fibromyalgia and stuff like that?

Program Structure, Research, and Clinical Results

Yes. Yeah. Absolutely. So I think once again, there's a, a predetermined aspect of their physiological structure. So are they more vulnerable to tension in the muscles?

And then once these conditions come along, if the system is in that defensive response, the nervous system is tightening up. The fight or flight response is really in gear.

And so all the muscles are tensing up all around the body, which can then cause these, secondary effects, you know, and also spinal fluid, so cerebral spinal fluid.

And so some therapies that can help as well. So. Oh, we see all of these different types of things. But we always say, you know, imagine you're standing on a bridge and you're looking down and there are people drowning.

So you're jumping in and you're pulling them out and you think, yes, I'm so brave. And you jump in again, you pull them out and you set up a hospital next to this bridge to kind of save all these people.

But ultimately, we truly believe it's about asking who's throwing these people into the into the river upstream. Right. Getting back up to the source to the top of the mountain, saying this, throwing these people into a river.

We can keep, you know, adjusting the physiological response is absolutely. We can keep, you know, fixing the gut biome and all those types of things. And those things are great and powerful.

But ultimately, if we can fix the brain, and get it back to homeostasis, then all the downstream effects we find just naturally alleviates automatically.

Yeah. It's amazing. It's rooted in our belief systems and our belief system structures that's been installed within us in our in our upbringing. Right.

And so that's the beauty of stuff like mind body medicine, which we do a lot of at Texas Center for Lifestyle Medicine, where we're able to employ these things to really like generate health, not reverse disease, but actually generate health, you know, and that's the the beauty about, you know, programs such as yours.

Right. And so let's talk about your program, a little bit more in detail. What does that really consist of? And, and how did you how did this develop in the first place?

Sure. So it's based on, my experiences and many of those who have come into this area have gone through our own suffering, our own journeys. And so I suffered from any and chronic fatigue syndrome when I was at university.

And it was a brick wall in front of me, you know, where people said, we don't know what causes it. There's no real solution to it. Good luck. And so I studied brain neurology and all these different physiology to really understand what was going on.

So I got myself better and then established the program as a neuroplasticity program for these types of conditions. Back in 2007, some first published treatment in 2007.

And, essentially, it's an online video program, is interactive video program with 15 video sessions and then about 30 to 40 audio exercises, forum, weekly webinars.

There's a whole ecosystem of supports to help people retrain their brains. And we have about 20 to 30, trained coaches all over the world as well. And the great thing about this is most people with these illnesses are quite, you know, physically affected.

So they can't travel. But this means they can do it in the comfort of their own home. And, you know, so that's how the program is structured. And people can consume it on their phones and tablets.

The laptops. Oh, that's that's absolutely amazing. And I see that a lot of doctors already referred to the program. Right? Yeah. So because people are seeing these results, a lot of functional integrative doctors are saying, okay, we want to have this as part of our overall protocol.

And for some people they're saying, we want you to do the program first because you're so sensitive. We can try supplements and enzymes, all kinds of things, but actually they're not going to work because your body's simply going to react.

So do the Gupta program first. Get your system back to balance, and then we can start dealing with anything that's left over any peripheral things, including, you know, that biome, etc.

and that's been, you know, really amazing for us to see the results that a lot of these doctors are getting. And I think our biggest challenge is not that we the people aren't getting better, but it is actually convincing people to make the investment of time and energy to do this program, which is why we're very much focused on, research.

You know, you know, we, and we like to do the same thing to, is to find that balance first, prior to not executing a lot of more complex strategies. But, you know, I think when people are kind of triggered, with trauma or even medical trauma, because, you know, they go to the doctors and doctors, they know there's nothing wrong with you, right?

There's a lot of medical trauma that comes comes with it. The level of uncertainty is astronomical. And a lot of people and a lot of people listening to this as well, and that level of certainty, really triggers them to want to take a handle on things that, may they may have some control in.

And I think there's a bit of a hyper focus right now, in the, in the integrative health world on a lot of the complex strategies that are there. And when those things fail, then there's a sort of sense of hopelessness.

But I think if we start with the brain training aspect of it first, then that creates a extraordinarily, extraordinary amount of success in a shorter period of time.

So I really want to, you know, commend you for for creating this. And this is exactly what we see integrative help here, you know. Yeah. Thank you. And and I think an alternative and complementary medicine and I'd say in, in functional and intuitive, there's a danger that we become just as reductionist as the mainstream medical profession in terms of saying, right, it's enzymes.

We've got to fix this before your ever going to get better. This neurotransmitter needs fixing first. But what we're not doing is saying, well, why are they in out of balance in the first place?

Let's go, as you say, upstream and fix the brain. And and that's why for us, to to make this more of a mainstream approach, we've been investing in randomized controlled trials.

And, and recently we just published, Trial of fibromyalgia showing that an active group is 40% reduction in fibro stools within eight weeks. But no impact on the control.

And I was in a six month program. So and also with long Covid as well as we've been talking about long Covid, we've recently prepublication, we've just done a trial, which we believe is the first randomized controlled trial on long Covid, showing, that we're able to massively reduce fatigue compared to a control group.

And hopefully, and that's published, these types of treatments will become more mainstream. Our brain is so powerful, it's able to really generate your health and these successes that we're not really seeing in conventional medicine and pharmaceuticals or anything like that.

So it's it's absolutely brilliant. You know, one of the things that, that I always talk about, especially with patients with, with long haulers, is this concept.

And you put a really nicely it's like the brain in the body playing ping pong back and forth and your immune system, there. Right. But there's this, there's this other concept of relationships and that kind of goes back to the, to the, to the brain aspect of it.

So a lot of times, you know, people like who have Covid are, well, first of all, they're already isolated and they're

forced to be isolated even more because they're technically still symptomatic and the forced to not go to work or the forced to stay in just one particular area.

How detrimental is this concept of isolation to people with long haulers and chronic fatigue syndrome? I think it's huge. Chang I think you've actually hit it on the nose.

You know, it's a big factor in developing the long Covid because at that time, especially, you know, let's say like two years ago, the amount of trauma that was going on.

But, you know, here's this worldwide pandemic. We don't know what's causing it. We're all isolated. And then suddenly you're getting lingering symptoms, which can create even more anxiety, which makes the brain more prone to learning these conditioning effects and continuing with the ongoing symptoms.

And we know from research that loneliness is the number one biggest predictor of chronic illness, even higher than smoking and drinking and all these kinds of things.

Isolation, Connection, and the Role of Relationships

And therefore, in our program, and we hope in general, we have this idea of, of a buddy program where you can connect with other patients to a retraining so that you stop people who understand your situation, and that we have regular webinars to make people feel connected so they aren't isolated and alone at home, with their condition.

So if anyone is suffering from long Covid, I think I would really encourage them to as much as possible, in a paced way, continue to have kind of social interactions as much as possible to support the health.

And that's part of this reengaging with joy. If you are isolated, alone, depressed, your brain is more rigid and it's harder for it to then snap out of this condition response.

Yeah. So that's part of loneliness is a huge risk factor. It's the biggest risk factor. And and I think that's, you know, absolute true. And and I'm going to support that with a few other pieces of evidence.

So I used to do palliative care. And what we know in palliative care research and health care medicine is so that those people who have, what's considered terminal disorders, cancer and stuff like that, Alzheimer's, tend to actually live longer or the more touchpoints they have for their family and with, psychological support.

And so the people that are involved in palliative care, we, we, we kind of all know this, right? And say, well, people are actually surviving longer, in hospice than they are.

They go through more aggressive measurements of treatment. And I do feel like that the more aggressive measurements of treatment create an isolation process that people don't deal with, you know, head on.

Whereas in hospice, palliative care, that's where we start, right? We start with the connection. Let's have some family discussions. So remember, just someone that you always want to talk to over the last few decades that you've never connected with.

We're happy to make that call for you. You know, I used to call, you know, father and child, a son that's been in jail for 23 years. Right. And so these are and so these are really constant.

People think this is like very like a holistic and nontraditional. But integrative medicine is actually the hallmark of palliative care medicine. But I just don't think people have to wait till they're dying or have a terminal this disease thing. You know what I'm saying?

Yeah. Yeah, absolutely. I think this is about shifting our medical system. So at the moment our medical system is an emergency care system. Yeah it does.

It's a fantastic system at certain types of conditions. But actually 60 to 70% of the conditions that someone goes to see their doctor for are actually these types of chronic conditions where you can give drugs to try and, you know, alleviate symptoms, but they don't get to the root cause.

And actually, we need to shift that and say, now when someone comes, they're given a different type of treatment that gets to the root cause of neuroplasticity or meditation or whatever it may be, and that should be the first port of call.

And if we can get those systems in place that we can help millions. Oh, it's amazing. You know, the, this, this, this concept of looking at the root cause, like you said earlier, who's thrown the people into the water, you know, upstream, right.

There is so in medical training and, in my medical training, there is always a focus on, on root cause analysis, but there's never a distinction between, brain health or mental health.

And I shouldn't say that there actually is a very, very clear distinction between mental health and physical health. Right. And so now, knowing the things that we know, there's there's no distinction.

And in fact, our brain can generate a lot of physiologic disorders, that are there, right. And so when you talk to someone and they have a fundamental belief system that this is just anxiety or this is just PTSD, that's got nothing to do with my body.

How do you start that conversation with someone, especially if someone's like listening to us right now? Like, what do you want to tell them? There's a couple of analogies that I think people really connect with.

So, you know, when our car used to go wrong, let's say 20, 30 years ago, right. That was a more reductionist philosophies. You take your, you know, your car to the garage and they say, right, there's something wrong with the engine or there's something wrong with the tire or there's something wrong with this.

But now in modern cars, when you take your car to the garage, it's always the electrical system, right? Something's gone wrong with the electrical system, which is the the wiring, the neurology of the entire body.

And so what I say to people is this is not in your mind or in your body. This is in the nervous system, which is the electrical system that controls everything in your body.

And so that's one analogy that I think people really kind of connect with. If we can, we fire the software, then it fixes the hardware. Same with the computer.

When your computer goes wrong, it's not really often the hardware, it's the software. There's a bug in the software that is then impacting on the hardware.

And you know, traditional medicine has once again been brilliant at fixing the hardware. But these are software issues and medicine is where it is right now, simply because the the brain has always been a black box.

So medicine is based on measurement. What can we measure? Well, we can measure neurotransmitters. We can measure hormones, we can measure enzymes, we can measure muscle health, etc..

But the brain very difficult to measure stuff because it's and so the brain got associated with emotions and subjectivity. But now we're opening up the brain more.

Mind-Body Healing, Placebo, and the Insula

We realize, wow, actually, could the brain be at the root cause of about 60 to 70% of illnesses that are occurring in, in, in modern society? And if we can unpick that and rewire it, we have the ability to fix the electrical system and then have the the car operating at its optimum level.

Yeah. And that's why we see a lot of clinical studies done on like Taichi and meditation. They actually work from a physiological standpoint and, and even in pharmaceutical trials, you know, they're placebo controlled trials.

Well, why is placebo working so well, you know. Exactly. And, you know, it's so funny because so many times I hear people say the power of the mind. It's so amazing.

And we get spiritual teachers and, you know, the, the, the mind's incredible. You can heal yourself. But I always found that no one ever gave you the step by step instructions to actually recruits the power of the mind.

And so that's what I've spent the last 20 to 25 years doing, is figuring out what are the tools and techniques that maximize and optimize health in the brain, in the body.

And how can we teach that to people to get them? Well, and that for me has been that quest is to figuring out how to harness the power of the mind. And we see that in placebo studies. Right.

So in depression studies, we know that, antidepressants up a few percent more effective than placebo. So generally, you know, and pain medication as well.

So when people are given a placebo, even though they know there's a chance a placebo, they are imagining the positive impacts of it, they are on an upward spiral.

And by doing that they switch off these defensive responses. So that's our hypothesis of what causes the self-healing and impact or placebo effect. And we believe that directly impacts on the amygdala and insula parts of the brain.

And people may be interested. Why do we say the insula. So some recent studies in Israel, I mean, we which are the insula, was probably the master organ in the brain that was, storing conditioned immune responses.

And we said that for last 12, 13 years. And we were very delighted to hear that in Israel. They did a study on inflammatory bowel disease in rats. So they triggered inflammatory bowel disease, in the, in rats.

And then they measured the signature in the insula. And then the rats went back to normal. They triggered the same electrical signature in the insula.

And they were able to create inflammatory bowel disease, without any actual physiological trigger. And this is the first time we now have proof that, the insula stores are previous immune reactions ready for when it may be needed in the future, like an efficient system.

And therefore, although the immune system is often operating on a periphery, it is storing it in the insula for future reference. And that means if we can retrain the insula, we can, once again switch these systems off.

Okay. Well, this this is great because, I mean, this is the first time I'm hearing about this. And, the reason why this is great is I see a lot of insula frequency abnormalities in people with autoimmune flares.

On brain mapping, I had an understanding of why, but now that it kind of makes sense. Yes. Yeah, absolutely. Yeah. And so. Well, great. Listen, this has been such a powerful conversation, I think.

And it's, it's something that I think every person really needs to hear. But my last question is for you is like, what do you know now that you wish you knew when you first started this, this, this whole research journey?

I think it's one thing, one thing. To sum it, all patients want to hear, which is healing is possible no matter if you've been knocked back by doctors, no matter if you've been on this journey for 20 years trying to figure out the solution.

I really want people to know that we deserve health and healing is possible no matter what you've been through.

Final Advice and How to Access the Program

So it can be we we get a lot of patients very cynical by the time they come to us and we say, let go of whatever's happened to your past, be optimistic and say, I'm going to heal from this.

And that will spur you along that journey. Know that's amazing. And that's the that's the one true belief that I have. And that's the reason for this someone as well.

Well, listen, thank you for so much for being on. How can people find you in your program. Sure. So they can come to our website which is Gupta program, dot com, Gupta program. The.

And there they can sign up for a 28 day free trial no credit card required. So you can watch videos, audios, get a sense of whether this program is right for you.

And until we get to the large phase two and phase three clinical trials, which is what we're working on right now, we offer a one year moneyback guarantee, on the entire treatment, which I think we were the only clinic that does that.

And because we know people have, you know, small amounts of money because they've been off work, so they can use that for something else if it's not helping them.

So, yeah, that's how the treatment works. That's amazing. Risk free. Amazing. So thank you so much for being on. What an incredible discussion. And I hope, people get a lot of discussion and really, truly understand that healing is truly possible.

Thank you very much. Thank you so much for.