Stop Depression: The SHIFT Method for Root Cause Healing Transcript

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Introduction to the podcast and guest

The thing that people need to understand is that depression is not a silver bullet approach. It's not going to be one thing that resolves it. It's going to be a whole list of things that need to be addressed all at the same time and perpetuated.

So I find that some people will say, oh, well, I tried this and it didn't work and I tried that. It didn't work and I tried this and did work, but it's really Adding something and then adding another thing and then adding another thing and really doing all of those things at the same time.

And so it is fixing your sleep and perpetuating really respecting your sleep, respecting that you need sleep and making decisions that might be not necessarily convenient or popular.

Hey there. Welcome to the Recharged Biomedical Podcast. I'm Dr. Edward Park, and if you're curious about regenerative medicine, you've come to the right place.

We're diving into the latest breakthroughs in telomerase activation, stem cell exosomes, and all the cutting edge science that's shaping the future of healing and longevity.

Let's get started. All right, everybody. Welcome back to another episode of the Recharged Biomedical Podcast. I'm your host, Dr. Ed Park, and today we're very lucky to be joined by Achina Stein.

Hey, Achina. So yeah, great to see you. I think, I'm not sure when we met. I think it might've been at Mark Hyman's conference, but were you also at the Intellect's DNA conference?

We met at the IMMH conference in 2024. Oh, okay. That's Kiki's thing. Yeah. Yeah. That was fun. Yeah. Did you go this year, San Diego? Yeah. I was the speaker this year.

Oh, nice. Nice, nice, nice. So today for our audience, we're going to be talking to Amazon bestselling author. She wrote a book entitled, What If It's Not Depression?

What functional medicine means

So just to give a little background, she practices mental health, but she has a focus on integrative and functional medicine, which gives her a lot more tools to help people.

I did have the chance to read your book yesterday, and it was really a great read, very comprehensive. For those who don't know about functional health, it really is quite the Lexicon of all that kind of pathways is a great self-help tool.

Tell us a little bit about what you think functional medicine is. Functional medicine is looking at the root causes of issues, chronic disease in particular, more so than acute illnesses, but it's really helpful to help people who have chronic and complex diseases and addressing those root causes and bringing the body back into balance.

And is really looking at diet and lifestyle for example actually went to a recent lecture prime med east and i was so happy to see that they presented research that showed forty five percent of dementia is caused by diet lifestyle that's huge.

That means there are things that you can actually do yourself to change your life and reduce your risk of dementia and even reverse aspects of dementia.

So, you know, so it's really important that I feel like functional medicine is the best course of addressing medical issues, chronic medical disease and by finding the root causes and attending to those root causes through diet and lifestyle changes.

Yeah, absolutely. So, that's a good overview. People really should pick up a copy of the book. What if it's not depression? Because, you know, you can go through a list of all the things autoimmune, infectious, I guess you use an acronym.

Shift, can you describe the letters of shift? Yeah, so what we're looking is to shift the paradigm of disease and health, but also to shift your metabolism, shift your body into a healing state.

A lot of times people are stuck in fight flight and that's one of the root causes because if you're in fight or flight, you can't repair, you can't heal.

And sort of if you're on fire, if you're inflamed and on fire, you're not going to be able to rebuild, right? The house is on fire, you can't rebuild the house until the fire is out.

So, we look at what's causing the fire and which is, you know, looking for where is there inflammation in the body that shows up in many different ways.

Depression, sadness, and the SHIFT framework

and putting out the fire and fueling the body to be able to heal itself by supporting the immune system. So the SHIFT acronym is what are the things that we look at?

We look at foods, infections, toxins, stress, and hormones. And so that spells the word SHIFT, but it starts with stress, hormones, infection. Okay. foods and toxins.

Yeah, no, I thought it was a really good acronym. So so this year, you know, I kind of got tired of listening to myself talk about exosomes. I don't really know that much.

I'm trying to learn. So I got more into the functional medicine thing largely because I went to Alisa Song's PEDS conference and everyone was talking about gut dysbiosis and mold and pans.

And I was like, oh, OK, we'll learn more about this. So it's been a really interesting year. But Your book makes the case very strongly that there are a lot of things that can cause people to feel dis-ease that can be like those things you mentioned, but there are many ways to not feel good.

But let's unpack a little bit about depression, right? So my friend, my patient made a movie, I watched it last night, it's two, over two hour movie about AI sex robots, right?

And it was funny because the AI sex robot was programmed not to be sad ever and never to be fearful, right? And so, you know, spoiler alert, because you probably won't watch the movie, the woman who ordered the sex spot was so happy until she realized he was the perfect guy.

And then somewhere in the middle, he got consciousness and started to talk about his slave name and how he didn't feel like making love. And it was really funny, actually.

So part of the human experience, of course, what I'm getting at is being sad, right? Right. We just had Diwali. Right. Without darkness, there's no light.

Right. So you've been sort of a guru of teaching people, you know, there's many other reasons that you're sad. Right. So I guess my point is, isn't it part of the human experience to be sad?

I mean, I know that the DSM, you make us the case that they want to be taken seriously as a real science. They

started to categorize symptomatology and began to believe that, indeed, really bad sadness was a disease that should be treated like most real diseases with medication, and then we got to this 20-something year SSRI loop.

But in your experience as a person, as a doctor, as a researcher, Is it sadness part of the it's a feature, not a bug, right? Being human, it's an emotion.

So I actually use, you know, I talk a lot about depression, not necessarily sadness. And when people say that they're depressed, they don't necessarily mean that they're sad.

It could be they have a lack of pleasure or so, but. To even look at the word depression, it's just a symptom. It's a symptom. And if you look at the DSM, it's one symptom out of nine, and you need for, let's say, major depressive disorder, and you need five of nine of those symptoms.

They have to be every day most of the day for at least two weeks. So there's all of these. symptom it's so it's the actual symptom of depression or sadness is not considered a disorder but it is part of the human experience it's and it's more about how you're feeling and accepting it as a feeling and then knowing how to respond to that.

And how you respond to that is based on how you were brought up your culture a family experience you know so it's a matter of looking at it in context and then making certain decisions about it so sometimes people feel depression.

And it's because it's an overflow of inflammation that's finally affecting the brain in the body and so sometimes people are given a diagnosis of major depression and that's just the cherry on the top all these other diagnosis.

Already gathered for a period of time but sometimes people are given diagnoses of major depressive disorder and and the and the like initially because some people are vulnerable in the brain compared to the people who have the more the cherry at the top you know so it's.

disease starts where you're vulnerable, and you can sort of guess where their vulnerabilities are by looking at their family history.

Trauma, brain health, and emotional patterns

And so if there's a family history of, let's say, depression, major depression, then that tells you where you might show up when you have inflammation, where it might show up for you.

And so you can even guess, like, where are you vulnerable? So some people have autoimmunity in their family, or they have cancer in their family. So if you don't make changes in your lifestyle and your diet, you know, you have a higher risk of showing up when you have all this inflammation.

Well, for sure. We age because our telomeres shorten and our stem cells deplete. But what if we could support both? I've been taking TA65 for 17 years.

It's the only supplement I trust to support better mood, better sleep and exercise recovery. At age 57, I don't have any gray hair and I don't need reading glasses.

I mean, we've done a couple of things on fecal biome. We've talked about mold. We've talked about autism. And I definitely from As a practitioner listening to people who struggle to be their own quarterback, to be their own researcher, I do see that diet is often, especially elimination diets, is often very helpful.

So there's a huge overlap with gluten sensitivity, dairy, maybe soy, maybe nightshade. So everyone has their own journey there. So the very important rhetorical question you ask is, what if it's not depression?

Meaning like, if it's not depression, like just some kind of sadness, it could be a functional thing. And there's many ways, even if it's partially depression, to mitigate with diet, lifestyle, hormones, infectious risk, etc.

So it's not a mood question. People need to know that there are ways that they can optimize their health. When it comes to mental health, You know we we have the the software of our brain you know and the hardware so it's unlike other specialties where you know they don't necessarily have a software and hardware so to speak where your gut can speak emotions.

so sometimes people confuse the two and sometimes it's even hard to pull it apart like how much of this is the hardware of the brain and how much of this is the emotion so, trauma for example you know if you have early childhood trauma or if you have adverse experiences in your life.

where you have trouble processing emotionally and are stuck, let's say, like I said, in fight flight or in this traumatic loop, traumatic loop that is that you're unable to sort of break, then that can also be a root cause.

But having inflammation in the body that affects the hardware of the brain makes it even harder. It just adds another layer. So I found that people who are, for example, Been in therapy for years and they're kind of stuck in the same place in the same like why is this always coming up for me why is this always coming up for me but then when they do the function medicine approach of addressing issues in their body they find themselves moving forward in their therapy.

And really making changes emotionally in the way that they respond to situations or the bed conflicts that they have been carrying are the burdens that they've been carrying emotionally they finally gets put to bed because the hardware of the brain has been addressed.

Well, you know, actually interesting. One of my first podcasts was with a former therapist who has now for years been doing psychedelic assisted therapy, right?

So when I read your book and you talked a little bit about your personal history, it struck some chords with me in terms of like, having that childhood experiences, the adverse early experiences, it sets you in a sort of kind of what wounded healer type of thing where you're trying to treat everyone and maybe if you can do that, you can treat, you know, your mom had some chromatic brain injury and some problems that really kind of guided your life's purpose in that important way.

And I think similarly for myself, adverse childhood experiences, it created like a template And some people create, like they call it cell danger response, but I know people who catastrophize everything, right?

It's sort of like a perseveration loop. So sometimes psychedelics are an exit. Sometimes people do the tapping, like they think about the thing and then they tap it out of their body.

So I do think that the body is like software, it's hardware. And it's, you know, a lot of this perseverative nature of people's rumination over their perceived problems.

They tend to see the same monster in every closet and under every bed. But even more interesting to me is the spirit, because I really feel as though, yeah, I mean, the more you think, the more likely you are to be sad or anxious, right, because you're living in the past or the future.

But I think that when I think about the way that people live in the modern world with their doom scrolling and their aspiration to be rich or whatever or have kids, there are so many preconditions upon being happy that people just have not really mastered the ability to be happy.

And even my son, who grew up in a very affluent place, I was so grateful he spent two months in Ecuador because he lived with nothing, people who had nothing, and yet their experience of being alive was so rich and fulfilling.

So I kind of think like it's not only childhood trauma, it's intergenerational stuff. It's past life stuff, perhaps, and that, yeah, it's not that we're supposed to be happy all the time, but when I think about my own dysthymia, you know, I'm rarely in the moment or always thinking about the future, the past, and that's fine, you know, but it's become so integrated to my default mode network that I consider it like normal and yet tedious.

So I think that my point is At some point, how do people just get better at just being alive and just appreciating the moment and they don't have any aches and pains and nothing's coming to eat them?

Like, how do we live a more abundant, just present life? Like, what's the hack for that? Do you meditate? Do you sleep well, exercise, all the above? Well, I mean, I think it's a matter of being present.

You know, sometimes people are walking around like a robot, you know, doing the things that they think that they're supposed to do, as opposed to deciding for themselves, like, what do I really want my life?

I mean, I think at some point everybody comes to an age of a midlife crisis, what we call a midlife crisis. I think that's like, oh my gosh, you know, I've come this far and I what have I even gained?

Right. I think that's the crux of a midlife crisis, so to speak. You know, but some people go into their 70s and just doing the same old, same old thing.

Yeah. You know, it's basically stopping to smell the roses, essentially being present, taking a look back of wherever you've been and thinking about, you know, having gratitude for where you are and all the things that you have accomplished and then making a list of things that you want to do or want to accomplish while your life is still here, while you still have this life.

Right. But I think it does come down, in my opinion, to gratitude. you know, looking at what you have and being grateful and accepting the things that you have, and then having some passion for yourself, for your family, for the future, and contributing and thinking, how can I leave this world a better place?

And having the purpose. Purpose is a big part of it, I'm sure. So I think when you have that combination, you will achieve happiness. Yeah, maybe what it's so elusive, right?

But you know, are you happy when you're throwing a frisbee around with a bunch of 20 songs?

Presence, gratitude, and self-compassion

Oh, absolutely So for people that don't know the ref, she's an Ultimate Prisma player and quite proficient at it, right? A striker? A midfielder? What are you?

I'm a cutter. I'm a cutter. Nice. Yes. Cutters are people who cut from the stack into the field to catch the disc and then you either throw it back to the handler or continue the next throw.

Yeah, well, you know, I am not going to ask your age because that's rude, but you're probably a few years older than me if you graduated in 90. So you're out there running out with these kids playing Ultimate Frisbee.

That's really great. I guess I'll be I'll be I'm not afraid to tell people my age. I'll be 62 years. Oh, you look amazing. Wow. Good. Ah, but you know, what's interesting is, yeah, I do play with 20 year olds and I'm certainly not the best player.

I'm just happy being out there every day that I play. I'm happy being out there. It doesn't matter that they're faster than me. It doesn't matter that they play better than me.

I love the community. It's a loving, caring community and I'm just having fun. So but other people might be upset about like oh you know they cut me off they ran faster than me to got it before me you know i can't keep up like you could have that mindset and be quite disappointed angry upset.

unhappy right right but you know and sure i'm not suggesting that i never feel that way because i've had discs grabbed before me it's like ah i almost had it and you came along and took it from me but for in general though for the most part i'm just really happy being out there and listen dr stein at your age no offense most discs that people are worried about are not the flying ones they're the lumbar ones or the cervical ones right so So to speak to that,

I'm happy that I just don't get injured.

Yeah. Yeah, that's great. So but you know, when I think about like the human condition, because you know, lately, I've been working on AI, and it has a lot of great quick traits, but doesn't have that soul, right?

So there's no soul, but people are enjoyable. But as wounded healers, perhaps as people who think that if they can only help others and empathize and improve other people's lives, somehow that will heal some childhood wound.

I think that the idea coming from Asian cultures or coming from the sort of rat race that we live in. The idea of conditional love is so part of our system, you know, and we think, well, we have to get into a good school or marry the right person or have be a good parent.

Like this idea of self-compassion, of just being OK with you. I think that becomes the last and final, most elusive part of being human, let alone being a doctor who's in the caring profession.

So how do we find that little bit of just that self-love and compassion? Well i it's not it's not an easy thing to do for people but again it is noticing the emotions i use this acronym that i created there's other people have similar acronyms that have different letters but i use the word rave so it's recognizing emotions acknowledging them validating them and expressing them in a healthy way so.

You know, it really just starts with, again, being still and noticing what is passing through you emotionally and taking note. You might want to journal and and note what are these emotions that are coming up for me and and maybe note the memories, thoughts, feelings and even where it is in your body.

Sometimes people have emotions and it causes their stomach to churn or tightens their throat or the causes are, you know, their their shoulders to rise or And so it's really noticing that, acknowledging it, validating that these are normal emotions, just like you might notice the clouds going by in the sky.

These are normal emotions. And even when there's thunderstorms, just like you can get really angry and upset about something, they pass. And the sun does come out eventually, right?

So if you look at emotions as not being dangerous or Bad or shameful or have you know where you don't feel guilty about having them never all emotions are valid and so really into.

Validate these emotions and then find ways to express them cuz some people have it. Have a hard time expressing emotions and some people easily express it, maybe overexpress them.

So finding a way to modulate that expression if you're an overexpressor and also doing some techniques to release it from your body and complete the trauma response.

You want to complete. Sometimes emotions come up over and over again and people suppress, suppress, suppress. And that could be going on for decades, right?

You really want to just let it out, find ways to let it out where you feel safe and let it out in a safe way that gives you a sense of comfort and then just release and complete that stress response, essentially.

Yeah, that's a great way to think about it because I think a lot of people do repress But then they also project, like they also create relationships, romantic or otherwise, that recapitulate this whole self-fulfilling notion that I'm unsafe, I'm not worthy.

And then they sort of get caught up in the drama and that becomes the secondary gain in a way. Yes, but that takes, again, they're not doing that on purpose.

It's all unconscious or subconscious. Yeah. I mean, Freud called it repetition. I don't know if it's Freud, but the psychoanalytical world would call it repetition compulsion, right?

Where you repeat dynamics in your life, And the purpose the reason that happens is because you're trying to understand the conflict within you and almost recreate the drama so that it can be completed or finished so yeah and so when but when you recognize these patterns.

You can take a step back and say you know what i'm gonna do something different this time i'm going to speak my mind instead of keeping my mouth shut i should have spoke my mind in the instance stood up for myself instead of letting that person beat me up and put me down.

you know and so you break these these vicious cycles by changing your behavior and and and your response to that perpetual conflicts you have to do something different and that takes courage it does it takes quite a bit of courage it's not enough to just recognize but it when you change your behavior it takes quite a bit of courage because you are literally not addressing one conflict you're It's like a domino effect.

I think that when I think about the human condition, people get a little lazy. And as they get older, they get more ossified. So the ability to not see your thoughts and your beliefs and even your feelings as defining you is very hard because people get trapped.

Building habits for recovery and resilience

Like my mom and I were having a heated discussion last night. She just is trapped in her default mode. Her MO is consistent. So I'm wondering, you know, even people late in life who do dissociative and theogenic psychedelics Just to spend six hours outside of your way of thinking can sometimes be therapeutic.

Have you ever seen that? Because I don't really think that depression is serotonin deficiency that can be treated with a pill. I think it's a result of being genuinely unhappy.

And I read that beautiful summary of your mom when she went back to India at 16. She was just in her environment and happy. There are so many things that must have made her not happy in the US.

So I kind of think like, how can people get away from this notion that big pharma has this pill for you? How can they have their own happiness in a more efficient way?

I mean, you're asking, you know, the answer is complex, you know, and there's a lot of things that you can do in terms of the functional medicine approach, addressing all finding and addressing all those root causes.

But certainly it's going to be addressing these things. concurrently to you really want to start habits that are helpful and continue and perpetuate these habits and then stack these habits one on top of the other.

The thing that people need to understand is that depression is not a silver bullet approach. It's not going to be one thing that resolves it. It's going to be a whole list of things that need to be addressed all at the same time.

and perpetuated. So I find that some people will say, oh, well, I tried this and it didn't work, and I tried that and it didn't work, and I tried this and it didn't work.

But it's really adding something and then adding another thing and then adding another thing and really doing all of those things at the same time. And so it is fixing your sleep and perpetuating, really respecting your sleep, respecting that you need sleep, and making decisions that might be not necessarily convenient or popular, but it's for your health.

And it's believing that by making these decisions that you will get better because you want to. And obviously, people have to do a certain amount of research to be able to believe that, right?

Otherwise, they won't put these habits into place. But there's plenty of research that shows that lifestyle and diet improves depression and other mental health disorders.

Oh, for sure. Well, you know, I guess when I think about kids these days, and luckily, your kids are grown and mine are getting there, you know, you put together a really scary little vignette about your son having some suicidal ideation.

And I my son's friend from college just took their life. And he has three or four friends