Dr. Terry Wahls' Big Hairy Audacious Goal Transcript

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Vision for Changing Standard of Care

Have a big hairy, audacious goal, and my goal is that I want to change the standard of care so that every massive neuro immune patient, is told that diet and lifestyle are critical to having the best outcomes.

And now, to do that, we need to have peer reviewed, published research. And to do that research that I really think needs to happen has required philanthropic support.

And so this talk is to tell you the story of my journey and how my work has impacted changing the standard of care. So, as you know, I had my, severe decline and recovery, during the year of 2008.

Now, my chief of medicine at the University of Iowa encouraged me to get a case report, working with my treating medical team, published in peer reviewed literature.

And that got published finally in 2009. Now, if you look at this graph, you see that before that time there is very little published, peer reviewed research about diet and lifestyle.

Recovery and Early Research Publication

And so it was really a heavy lift for me to find a science, based guidance for what to do, that were the things that were under my control that could improve my outcome.

But since that first publication, there has been this dramatic uptick. Now, how did that happen? It was because of people like you that were demanding it.

You see, I had my recovery. I changed my practice. I began talking about diet and lifestyle to my patient, the Traumatic brain Injury Clinic, and in the primary care clinic where I was staff and residents, I spoke where I was invited.

I got banned as a speaker by some organizations because my message, they thought was dangerous. I, spoke in churches, colleges, community centers. I had an opportunity to speak at a Ted talks.

That talk went viral, which then led to a book deal that was published with Avery. I originally self-published Mind you, I mitochondria. I had the book deal with Avery and Penguin, and was then able to publish the walls protocol, which I revised in 2020.

The walls protocol, cooking for life. I continue to teach for the Institute for Functional Medicine and for the American Academy of Art AG and other integrative medicine conferences.

Public Advocacy and Growing Awareness

And in 2018, I was given an award by the Institute for Functional Medicine for my contributions to research and patient advocacy. And the public got totally energized.

And it was you, the public, that drove a lot of the change. And let me explain. You see, I published my new my mitochondria in 2010 and was solely, you know, getting that word out through all of my lectures.

The TEDx talk led to the book deal. And that came out March 14th of 2014. And, it was controversial because I had this message that there were things that we could do that could improve our clinical outcomes and our quality of life in the National Ms.

Society, monitor social media to understand what their constituents and their donors are talking about. And after my book came out, there was this dramatic uptick in social media mentions about diet exercise.

There's another image that, shows the dramatic uptick in the mentions of the walls protocol. Doctor, her walls and the walls diet that led them to convene a wellness conference.

And they tracked me down, got me there, and they then made diet and lifestyle research a research priority. Very exciting stuff. And again, that happened because the public demanded that you drove it.

And they then created a handout that talked about diet and nutrition, looking at the research. And they saw that by then we had some papers coming out as well.

Now here are some of the milestones that, came out. So I recovered in 2008. I began talking, in local organizations. 2009, 2010 I published, the case report.

Clinical Trials and Diet Intervention Results

Then we had a case series, then 2014, our very first clinical trial came out with just ten. Then in 2015, then we had 20, then in 2017 we had. And that first study was done in people who had secondary and primary progressive Ms.

using the same protocol that I used. And we showed that, yes, people could implement it, that we reduced fatigue, improved quality of life, reduced cognitive decline, improved motor function, in that motor function was clinically significant in half of those folks.

Really quite remarkable given that this is progressive. Ms.. That in 2017, we did a small pilot randomized controlled study of the paleo diet in relapsing remitting Ms., showing, yes, people could implement the diet, that it was safe and it led to reduce fatigue, improve quality of life.

Then we did avoid call the paleo plus study comparing the ketogenic diet, the paleo diet to usual diet, again showing that people could implement these diets.

There were safe and well tolerated in that we had benefits. Then we had a study funded by it. Now their Ms. society, and this was a comparison of the low saturated fat, the swank diet and the paleo elimination diet.

Basically, the was a elimination diet. But we had an observation period. People got randomized to those two diets. And again, we showed that diet led to improved, clinical outcomes.

Then we have, a couple more studies that are presenting in, scientific meetings that will talk about it with us control that evaluates a online wellness program and a quasi experimental study comparing health behaviors without drugs to, people who are following usual care and again, will be, representing that.

And then we have a couple of studies that are in front of the IRB, one where we're adding more study populations to the online wellness program, and another that is comparing the ketogenic diet, the modified paleo diet and usual diet, and dunk Pam, which is a supplement regimen that will be looking at its ability to impact, the optic nerve function.

And we've had a really huge impact that we've done seven clinical trials. We're doing our eighth clinical trial, but we're now able to do what's called a network meta analysis that lets you take all of the dietary studies.

And there have been 12 studies that have looked at eight diets. And we can look at how these diets reduced fatigue, and improved quality of life, the mental health quality of life and the physical health qual quality of life.

Here I'm showing you the impact on fatigue. We're looking at the periodic diet. Those who studies from our lab, modified paleo diet, a low fat diet to the swank diet or the McDougall diet.

Mediterranean diet, the ketogenic diet studies, fasting studies. An anti-inflammatory diet and calorie restriction. And you see that the central line, if the gray box favors control, then the intervention is not good.

If the gray box favors intervention, the intervention is helpful.

Meta-Analysis and Evidence for Diet

But in order to say it's really helpful, you need the error bars to be entirely on the side of the intervention. So we see that pill stick is the most effective, most efficacious, efficacious, followed by low fat and Mediterranean.

And the pill a thick diet is about 50% more efficacious than low fat or Mediterranean. But all through those diets, are definitely helpful. And then we have improving physical quality of life.

And again, here there are two diets that were helpful. The pill, let's say in the Mediterranean diet. Again very positive. You see that many of these diets are helpful.

But the error bars cross over into favoring the control. So we can't definitely say that they're helpful. And then if we look at the next slide we've got the mental health quality of life.

And now again pelagic diet Mediterranean diets are the most helpful. Now what is so important to recognize is it was the MSA that put money into these small pilot studies to get them going.

And that happened again because of you and your interest and the donors interest in driving, the need for the Ms.. Society to say, you know what, we should be making diet and lifestyle, exercise, stress reduction research a priority.

And so they infused millions of dollars into that effort. And in the same issue that published that network, meta analysis was a editorial by three very well-respected neurology diet researchers who have an opinion saying, and we have more of these opinions coming out, that there is sufficient evidence to say a healthy diet should be a part of the intervention for everyone with Ms..

And I could add to that, no immune patients. And yes, more research is needed. Absolutely. That will continue to be worth investigating.

Funding Research and Future Studies

Now, salad therapy helps make all of this happen at a much faster level, because I have been blessed by having very generous donors, grateful patients they have infused into my lab support so we can have postdocs to help us write those grants and those manuscripts, and to help fund some of these early studies that made all the difference in the world with having more citations and more studies.

So what this can do, if we have an analysis of specimens that we have in our freezer, those kinds of studies are not that expensive, 50 to $100,000. And so that's easier for us, to do, to write, to write.

And by having that, analysis of existing data, we can use that, for preliminary data for the next level of grant. Yeah. Let me tell you, reviewers really want to see mechanistic the component to the study.

Now, we can also investigate new disease states or a new intervention if people reach out and would like be to investigate a new disease state, such as rheumatoid arthritis, inflammatory bowel disease, another neuro immune condition, the.

And to have that early pilot study that would let us collect a little bit of data so we could write for a larger study that's a $200,000, grant, because I have to pay my staff to conduct that kind of analyzes.

Or you may have a different diet or a different protocol that you would like me to investigate. So we're open to

doing that. But again, research cost money so I can pay my staff to do that.

Research. And we have been so blessed that we again, because we have some grateful patients who have said they would like us to do these large randomized trials.

And now that to do kind of study that I'm doing right now, a two year study that we use the intervention and follow people for two years, you can do that after you've had your pilot study.

So you know how many people you have to recruit. That's usually a 2.5 to $3 million, study to make that happen. Now, we can also have really impactful gifts by funding a specific research team member, such as a research intern, study coordinator to help do the nuts and bolts of these pilot studies.

PhD students, postdoc scholars. They're really phenomenal because they help write the manuscripts, write the grants so I can do the next level studies.

Now we have many lab team members. I'm listing just a few, and we have other research collaborators here at the University of Iowa that have helped us do these types of investigations.

And, we've created a handout, a steady brochure that will talk in a bit more detail about the types of projects that we can do. And you can contribute small gifts, whatever amount that fits for you and your family is certainly very welcome.

Call for Support and Closing Thanks

If you're in a position to have a larger gift or you see a particular interest, disease, state or intervention that you would like me to consider investigating, will in that brochure let you know how to have those conversations.

Again, I want to put out a thank you to all of you because you, the collective, through your your comments in social media, it was you who drove the shift in awareness for the Ms.

society that diet research should happen, that wellness research should happen. And the reason the, tide changed, it became easier for me to do these studies to get our publications published.

Is all of you. So thank you. I look forward to working with you and look forward to, having more and more success to that big, hairy, audacious goal that we will build the research to justify changing the standard of care so that all mis enrolling patients are told at diagnosis to have a healthy diet, to meditate, to have good sleep and exercise.

Now, much love to all of you and enjoy today's interviews. Bye bye now.