Introduction to Brain Optimization

You can literally rewire how you think. You could re-wire your brain pattern. Because we're doing it for high performers to some incredible level. This whole thing's been around for 100 years.

But most importantly, now we can understand what your brains is. We can design a specific protocol feed. So what we are able to do, you wear that helmet, it will start to focus on specific parts of your mind to train them.

When it comes to mental health, its at its ultimate high. Does it really need to be where it's at today? We're literally changing our brains. However, what we're actually seeing in the massive case of people is a healthy point of view, a top rated show where we are bringing experts from all over the world to talk about health, wellness, beauty and mindset.

Today we have Sat! Sat Randhawa is the founder and CEO of One Hype Wellness, former Goldman Sachs trader and leader in brain and performance optimization through OneBrainX.

One BrainX is NASA-backed, extensively researched with the military and FDA-cleared technology, redefining how we measure and optimize the brain. What 1BrainX is?

If you could sum it up so people can kind of understand. It's like a blood test for your brain. it gives you a neural fingerprint of your brains and the magicals in the electrodes that we cure.

We're able to give you brain age, we're to be able give your a brain score and then the whole thing with everything comes down to okay what are you basing that on?

The largest neuro database in all the world. Nearly half a million unique reads. What is 1 BrainX doing for Athol? What we are able do is Welcome to another episode of A Healthy Point of View, your top rated show where we're bringing experts from all over the world to talk about health, wellness, beauty, and mindset.

I'm your host, Sam Tahata, in today's guest, we are bringing him all the way from the UK. We're going to be talking about brain health, but this is not like your typical brain.

Health that you hear us talk about the NAD, the NR, all of these other different types of modalities. We'll going be. Talking about. The first step measuring you guys hear me talk.

About this all the time. You can't improve what you don't measure. I'm going. To say that again, you can improve. What you. Don't. Measure. Today's guest, he's behind the company that's backed by NASA.

Yes, I said it, NASA, they send things to outer space. We have the CEO of One Hype Wellness. Today we have Sat. I was not expecting that. There you go, man.

It's nice to welcome you. That's how we do it here. A healthy point of view. Look at that, I can't even pronounce my own podcast. Seth, before we get into the meat and potatoes about brain health and measuring, which we got a lot to unwrap, We got the technology here, OneBrainX.

So One BrainX, we have it at Liquivita. We're working with a lot of different people, including professional athletes, when it comes to this technology.

I want the viewers and listeners to get to know who Sat is, so we're gonna go way back, man. And I wanna hear

about your upbringing, how it was growing up as a kid, from when you were like five years old.

Yeah. Well, firstly, thank you, Sam, for having me. It's a massive privilege. I know we do a lot of work together now, but I've been a fan for a long, long time.

So thank The youngest of three siblings, got two older sisters who, no matter how old I get, still act like I'm their little younger brother.

Sat Randhawau2019s Background and Health Journey

So, yeah, it was a great upbringing just outside London, living with my parents still, which is great. We're a really close-knit family, so always been into sports.

My dad was keen athlete. And for us, there was the case of you have to be active. always have to be active, right? So in the Asian culture, we would eat a lot, or let's just say what we know now is unhealthy food, but we'd be with it, and then my whole journey into this space has been gradual.

I'm not a doctor. But I've always been really curious about how do we stay fit. So, like, being… As a kid, I was just laughing, really. That's the main thing.

It's about being active and laughing so much, incredibly privileged for the journey that I am on now with my company. Yeah, that's down to my parents and my sisters really some yeah, it's grateful.

Absolutely, man, you know so you have a Most people in the biohacking space they have like their own story right a testimony or something about their health and Well, how I got them involved more in this type of space this industry You have your own?

story that I want people to listen to of how you get involved because I You know, initially you were selling more of the technologies of like the red light therapy, the Red Light beds, hyperbaric chambers, which you guys still actively do a lot of that provided to some of most elite wellness clubs that are out there.

Our technologies that we have at Liquivita are from your company as well, you know. And I just got to say, anyone who's listening to the podcast, they know how thoroughly our medical team looks over anything that goes into licovita.

So us having these technologies and working with NFL players and other type of elite athletes and executives, et cetera, we know that there's a lot of science behind what you have.

But I want to go into your story of how you even got involved and so passionate into what we're doing today. Yeah, so my story, I used to be a trader at Goldman.

So I finished university or college as you guys call it. I went straight into working for Goldman Sachs in New York. And as a trade, all I knew was sleeping three hours, have a load more coffee, go out with the guys after work.

Just constant cycle, constant circle. And when I moved back to England, I actually had a really bad compound fracture. So playing football, soccer, can't believe I said that, football.

I took a bad tackle and it snapped my leg and had, a lot of surgery to make sure it recovered. Then I got something called compartment syndrome. That meant the blood was not flowing through the compartments in my legs.

And I was told you might have to amputate. Wow. Sorry, that was obviously, sorry I still get choked up like 18 years later. That was obviously a massive shock and it changed how I viewed everything.

If you spoke to me prior to that, I was that biggest alpha cynic to all this. Why are you doing yoga? Why you're doing mindfulness? That's just a load of rubbish, just push through it.

But lying in a hospital day after day, it gives you time, obviously the morphine helps, but gives time to untrain your brain. And so luckily I had a physio who had worked in the US and knew something about hyperbolic oxygen chambers.

And she said to me, Sat, look, you're at risk of losing your leg. Hyperbaric could potentially help. Spoke with my surgeon. And he's an old English surgeon, and there's some brilliant English surgeons I should rephrase this.

He said, no, hyperbarric is for the bends. It's for bone crush injuries. I said well, your potentially telling me I could lose my leg, And you said I shouldn't use hyperbolic.

So obviously the choice is pretty arbitrary, binary. TriHBOT might work or not. So then I spent around six weeks on the south coast of England, one of those big diving chambers, and it helped save my leg.

And it just changed my point of view on everything. So I took a sabbatical from work, traveled the world looking for what does good look like? What does a good chamber look?

Like, what is a bad chamber? And really, why did this help me? Settled on with one partner out of Romania, we became business partners, then we were reselling, distributing, now we make our own.

And my whole thing has been, with bad advice, I wouldn't have had my lower limb. This is a family-run company, so my thing is, okay, how can I see the data that backs it up?

So from Hyperbaric, we transitioned into some other modalities. So like you mentioned, you work with some really big athletes, which is still crazy. Hotel groups, the likes of you guys, who are just incredibly smart and challenge us to be better every day.

That transition into what else can we do? And it wasn't a strategic play in 2015, 16, 17 to move into the red light space. It was more of demand from people working with us.

Working with elite athletes, I'd always get asked, is this good? Is that good. Okay, let me find out. We started making the light beds. Again, protocol based.

How do I know it's working? And then what really was a light bulb moment for me, we work with some of my heroes actually in the sports space. I'm a massive sports geek.

And I was speaking with this boxer and he told me he'd wake up in a morning and we had our H4, had out light beds. He said, I don't know where sometimes I wake and I am not sure where I put my keys.

I'm not sure if it's my child who's had a restless night, or I don't know whether it was that punch I took in that heavyweight boxing title fight five years ago.

And I was looking at one of my heroes thinking, we've got to do something here. Again, I started looking, found a really, really good expert who brain mapped him.

I'd never heard of this before. Brain mapped him, but and we've got so many good insights. Then he went and got an MRI, got a spec scan. So many things out there, the process for brain mapping was so eye opening and I know we're going to dive into that, But it took too long.

But the information we got was Again, I just went on the same journey I went with HBOT. What does good look like? Why don't I know about this? Is this based in science?

A lot of the stuff that I ride against now, is this people trying to use science to push a product? Or is it actually a project agnostic tool that we could change lives with?

And that set us on our journey. So again, it's like looking for good producers. And luckily, we found a really good

company and then we've got funding from NASA, funding for the military.

The whole thing has been about how do we bring this to the masses? So we can dive into it. Obviously, I know we will. But the brain space is something that's obviously really dear to me, but I was shocked that there's something so incredible that is used in hospitals already, used the the Military, scientifically backed, FDA cleared, and we don't know about it, That, pardon the pun, that blows my mind.

Like I, I couldn't comprehend that. I'm not a doctor, but my real skillset is asking a really basic question. And if you can't give me a clear answer, then we need to find out what's going on here.

All right. My skill set is bringing like incredibly smart people together and asking them a stupid question to get answers. Ask them another question that they want.

If they can give you an answer what is going? And we've gone on a journey over the last decade and we're changing lives in the hospital space. And we're going to do that to millions of people now around the world.

I love that. Love that story. That was a very long answer. Very good answer, so said, you know what? We're talking about brain health, right? Right now, when it comes to mental health.

It's at its ultimate high. Children and adults. Does it really need to be where it's set today? Oh, in terms of where our mental help is right now? We're getting conditioned to accept brain patterns and brain states that we would never accepted 20 years ago.

I'm 42 and I'll speak to my younger cousins and obviously I am older than them. it feels like a different life, a world we grew up in.

Why Mental Health Needs Better Measurement

And I grew around the internet and phones, et cetera, but the brain states we're accepting living with anxiety, living self-medication, with constant dopamine hits, thinking, okay, that's how life should be.

But we are getting conditioned to do that. We're literally changing our brains to fit into what's going on and living in these conditions and trying to unwire ourselves, which is not right.

Right, right. You know, when you start looking at like psychiatry medicine, psychiatrists, and this is something that me personally I have an issue with.

Psychiatry of medicine. It's all question-based. You never have, I always ask this, is you have this psychiatrist who's a medical doctor, MD. They're very quick to prescribe, put people on all of these different psychiatric meds, which if you're not crazy, these things are going to make you crazy.

Psychotic, right? And they're using, what diagnostics are these psychiatry physicians using? So I can't speak for everyone in this space. But what I cannot say, a lot of the time, they're not using an adequate baseline.

A lot at the same time. So what we're doing is taking subjective assessments of people. Doing some testing, and let's be honest, lot is based in science, but we are N of 1. But then we're treating people, we are treating labels, not treating brains.

So someone might fit outwardly something that looks like ADHD, or looks anxiety, looks PTSD, but we don't look at comorbidity. With that I mean there's multiple things going on, yet we prescribe everyone in the same way.

And that's what I rile against and I find that scary. And I've been the victim of that. I find that very scary, like sticking something on my head, taking this supplementation and thinking, this is making me worse.

Why? And even with like the access I got to doctors, I'd done it. Oh, i'm going to take this jab or I'm gonna take the

supplement. No, that's not working for me.

It's stimulating an already overly stimulated brain. which is we could dive into that if you want some like if we look at Adderall Ritalin and stuff like that for ADHD It's inappropriate.

Let's put it that way. So I want to preface this with one thing. Without tramadol or morphine, I cannot survive what went on with my leg. Medicine, medication, in my view, really has a place in this world.

However, the ease with which we just dole it out and us as consumers, because I still see myself as a consumer, accept it. It is wrong. I'll give you an example.

If we look at what we consider ADHD, Let's preface this, let's not debate in the gray. Even if we accepted all diagnosis of ADHD was technically okay on the surface of it, correct.

You come to us and you might say, okay, I've got ADHD symptoms. In most cases, we say that's low theta. We could dive into those brain waves, but that you're in a brain fog, a daydreaming state.

you can't zone in. So we give you a stimulant. Okay, you must've heard this a million times. Cause I think I'd heard people speak about it on this podcast.

They give me a stimulus to help you focus. However, what we're actually seeing in a massive case of people is it's not in the brain fog. And I'll speak for myself.

We're stuck in high beta, even gamma, which is whirling thoughts. Your brain's constantly whirl and you can't get to sleep. You can focus. If you've got five or six or seven or even like right now, 10 things going on in your head, then I give you a stimulant.

I can't tell you how many people that my doctors have seen and they're saying, this has made my child worse. Okay, let's give you another set of medication.

Let's balance that out. Now let us pump that. How are you guessing at your brain? I don't understand it. You wouldn't do that with the surgery. you wouldn' go in and just think, okay, lets have a look.

Oh, that didn't quite work. Lets push that bit up. And when I asked people that question, I'd get a blank look back and I've got the thing that really annoys me.

It's a very complicated subject. Yeah. All right. I'm here all day. No, no, it's it based in deep, deep science. OK. Again, on here today. But if you can't tell me why, and then it comes down to, okay, that's how it's being done.

That's what conventional wisdom is, That what's conventional medicine is. I speak with so many doctors, they never even got told about EEG enough. They never got even told enough about baselining.

And don't get me wrong, when we dive into it, this is old tech. Over 100 years, Dr. Hans was one of the first people coming up to 1930 who pioneered this.

This tech is out there, but why are people not using it? You know, the way that some of these psychiatry doctors are practicing medicine, they're playing guesswork.

They're not utilizing any kind of diagnostic tools to actually figure it out. You're going based off that subjective 10 question test, right? But you mentioned Adderall.

10 question tests, that person can answer it differently tomorrow, right? And they're prescribing this amphetamine, which the majority, I'll say it how it is.

The majority of people that I know, as I was going through college age, they were taking Adderall. They didn't need

it, and then number two, They would take it to go out drinking and partying.

It was like the legalized cocaine. But what's happening to that individual's body, it's becoming worse. And then people become more dependent. They up the dose as well.

So when you start seeing what that's truly doing to the body. The unfortunate part is no one's taking any kind of responsibility behind it. We're putting kids on these certain stimulants.

So speaking on that, of people being prescribed these certain stimulants, parents that have no knowledge on really what they're doing for their kids, right?

Parents that are agitated because they have too much agitation, the kids have to much of agitations, so in other words, they are trying to sedate them or do whatever the heck they try to do.

When you look at certain medications like Adderall, and you're looking, At the insert that comes with it when you get it from the pharmacy. I don't know if have you ever seen the side effects of it I have yeah, this is one of the medications which surprisingly If you look at one the first side-effects on there, which you see one The first set effects are the ones that are like the most detrimental right is sudden death I don't know about you, Seth, but there's not too many things that I do in life where the potential side effect is sudden death.

That means like, I dunno where you just walk in and boom, you'd just die, so. It makes me laugh, sorry. I remember when I first moved to the US, watching TV, and I must not have paid attention.

And I've come back and seen an advert for something. Just before, it's like two people walking in the park, looking all happy. And the guy's touching his knee, oh my God, I can move again.

And suddenly he just cut to, may cause death, May cause heart attack, maybe cause this, it may be cause that. I thought I was watching an SNL skit. Did SNl just come on?

Cause we don't do that in England. Then it just cuts to again, the couple walking. Oh, my knee feels great. What the hell am I watching here? It's just the same thing.

Why would you possibly take something that causes sudden death? And that's one of the questions I would ask is why? Why, what, would you do that in a car?

I would never get it. Well, I do get but I wouldn't, we can both guess why, but. I mean, it's something serious and people really gotta think about this as like, if you really wanna correct whatever issue you're having, let's take a deep dive, lets figure out what the root cause of the issue your having and then let address it accordingly, right?

You're talking about a medication, one of side effects is sudden death. Even the people that go party with this medication. I mean, I had buddies in college.

They take Adderall to go out. You know, they meet a beautiful girl, then go back to the hotel with her, whatever. And they can't even get a boner. The can get hard, you know.

Because what the hell is this a medication doing to you? So look at the side effects of what this thing's doing. People take this on a daily basis. Yeah, yeah.

Even though people have been on it for years. Think of it as a pre-workout. If you use a Pre-Workout, the only way is to get like take more and more, and if you just rely on that.

Take coffee as a smaller example of that, but it's the same thing for your brain. Your brain needs that seamless, then it gets used to it. Then it needs more when you get used it and then if fall out of the state, you need to get back into that state and you can't state shift.

And that's been caused by these drugs. Yeah. So, you know, I've always been very passionate about brain health, specifically the cognitive side of brainhealth.

And I'll tell you, until we were introduced to OneBrainX, We weren't measuring anything to do with cognitive health besides, you know, what the patient's telling us.

And this is even for myself, I do everything from the synapses nasal spray, the brain octane oil by Dave Asprey, an R by True Niagen, my NAD injections.

We even have Exomine, which is the transcranial stimulation, magnetic stimulation therapy. So all of these different treatments, which these are our physicians that are putting people on these protocols, we've never had a way to actually measure, right, let alone what is the baseline before we actually do the treatment.

So I want to go into some of the details of what one brain X is and what, what does it do? You know, if you, you can sum it up set in one sentence, why one bring X does just, just so people can kind of understand.

It's like a blood test for your brain. Let's put it like that. Gives you a neural fingerprint for you. Okay. Every fingerprint is unique. So is your brand.

So when people look up this technology and other technologies that fall under this category, people read brain mapping and neural feedback. What is brain-mapping and what is neural-feedback?

Okay, cool. So, an MRI looks at the structure of your brain. An EEG, which is a brain map, electroencephalograph, looks the electrical pathways of the brain, similar to an EKG for your heart.

Each electrical pathway equates an observed behavior. Language encoding, decoding, memory encoding decode, impulsivity, memories, spatial awareness, creativity, all the way down to potentially bladder control.

How OneBrainX Brain Mapping Works

So what we're able to do, when we map your brain, we'll be able look at where do you sit on each one of those parameters. Where are you slightly overactive, underactive?

Where's the ratios of your brains sitting? That's one thing we measure. The second one, so if we look activity, that's activity of each part of the brain.

The second one is connectivity. How does each part of your brain work? How did it state shift? Because if I'm in a planning, and we'll dive into it, but I mean, in the planning session, I might need my prefrontal cortex, which is more the CEO of my brain.

But if in looking at a space, or I look at spatial awareness, so I am undertaking sport, then I need to lean a little bit more into my SMR, my temporal lobe, all my praetor lobes.

When we're looking, okay, attention and spatial, how do I state-shift? And we're able to look at those connectivity passes, similar to your body, for example.

It's great having two strong legs, but if they don't work in unison, that's not good, right? Right. Same with your brain. Your brain's made up of parts, so we need to see, okay, how do we work it in a sense?

How do you work and use them? What's good for you? But that's what we're able to say is, okay, this is where you sit. This is what good looks like for other people.

It's all good, but potentially look like, for you. Now let's go make you a specific protocol to help you train them. So that first part, that is the brain mapping?

Yeah, it's the Brain mapping. Where it maps out all of those different parts that you just mentioned. Exactly. That specific Protocol, That's a new feedback.

Yeah, so the neurofeedback, that's brain training. That's the brain. So that the training and it's a fantastic, fantastic tool. Not just what we do. Let's, let's preface this way.

It's been around for a hundred years. This whole thing has been over a 100 years what, we've been able to do and we'll go to it is we're taking it up another level.

One, by giving technology that we could train anyone on. And two, giving you a database that is unparalleled. Right now there's conceptual wisdom. There's gold standard database has 900 unique reads.

Yeah. 900 unique reads, you wouldn't accept that for blood tests. We've got close to half a million unique read. So what you're able to do is draw actual parallels with other brains for your cohort very, very specifically.

But most importantly, now we can understand what your brain is, we could design a specific protocol feed. That's when neurofeedback comes into it. It's non-invasive.

Once you've had a stroke, for example, people relearning to walk, that's looking at your pathways. Looking at how do I connect this? How do i rewire your brain learning to talk etc?

Neuroplasticity, in essence, that's what it is. What we're able to do now is, okay, hey, Sammy, this is where you're at. The ratios from, getting into fast brainwaves, into slower brain waves, shifting from getting in to sleep patterns isn't as strong.

Or your impulsivity reactions are slightly overpowered in the prefrontal cortex. How do we bring that more in line with what we are looking to achieve for you?

Because you are N of one, right? We always touch on it like, I always feel like Darshan's line, Dr. Darshanshal, thank you. but I always steal his line.

We are N of one. What is N? Of one is that we are our own person. we have our neural, like DNA, neural fingerprint. So you need to understand what's right for your body.

The same supplements don't work for us. They're the same. Supplements would have worked for me as they would work. For you. so what we're trying to do, the best analogy, I think for the brain, for neurofeedback is a little bit like, So we went for a deep dive testing session at Liquivita yesterday.

Thank you for that, by the way. Now imagine you said, Sat, your vitamin D is low. Okay, this is what we recommend. But we could take that to another level.

Sat your absorption rates are here, inflammation markers are there, stress levels are her. This is going to work perfectly for you. It's like having your own pharmacologist prescribe that for Compound that fee very personalized.

Yes hyper personalized so what we're able to do you wear that helmet It will start to focus on specific parts of your brain to train them not based on stock protocols Which are still very good by the way, but it takes it to a whole nother level Yeah, so I'm gonna put emphasis on that because it's very important for the listeners and viewers to understand what N, the letter N of, and the number one, N-of-one data means.

And when we're talking about precision medicine, not medicine that consists of a group of 1,000 people, which, you know what, we need those type of randomized control studies, those trials.

But even with that, The individual person has to have their own individual trial because what worked for 1,000 people might not work for this person. They might have a whole different genetic makeup, right?

So what we're doing here as precision medicine is based off of that individual and what that person's doing on a day-to-day basis because a lot of these individuals are, you know, they have different type of line of work.

It might be someone like you, Sat, that you're traveling around the world, getting a little radiation on that airplane, not sleeping well, you in different time zones.

So even if you and I are on the same protocol supplement-wise, your body's gonna recover different than mine because you doing something completely different, right?

So that's where this thing really comes in and the other things that we do in the biohacking space. So, now when we're looking at utilizing the OneBrainX, what type of individuals, if we were to categorize, you know, different type individuals.

Maybe someone with ADHD, someone who has mental fog, somebody with anxiety. What are the different categories that this works well for? So this is going to sound cheesy.

I'll probably say another hundred times in the podcast, but we will treat the brain, not the label. So let's take ADHD, for example, like I was mentioning earlier.

In most cases, ADHD is considered low theta. Okay. Brain fog, et cetera. What we're able to see, okay, low-theta brain fog can't focus, can laser in potential that if we see that, that's what we going treat for.

But we might see, me, I'll speak about myself, high beta, constantly high-beta, stuck in gamma often, whirling thoughts, constant whirlings thoughts. They might exhibit on the surface as an inability to focus or tune in, but we have to treat them in two very different ways.

When you come, obviously, with you guys, this will be part of your circuit. So we're able to say, okay, satin. We need to bring your gamma high beta levels down more into alpha levels, and we can jump into that, which is what each one means.

But in essence, to help you gear shift, we're not trying to eliminate you being in that state. If you stay in the elevator, let's talk about me, like we just talked about, obviously, my schedule is difficult.

Staying in a state of elevated beta, low gamma, It's your fight or flight response. You can't live in that space. And I know your story, and obviously I'll let you share that, but you can, it's awful for your body.

So we need to be able to get there, you cant live there. What this helps do, or train your brain specifically, if two people could walk in exhibiting on the surface the same thing, But your brains doesn't like.

But what we would do right now is treat them in the way. Yeah, you have to rewire the brain. Yeah rewired the Brain is non-invasive and the thing is You would literally what we do and we can dive into when you're at feedback.

I understand Okay, so we need to bring you into slower brain waves. You're gonna watch Netflix on the iPad watching Netflix If I drift out or I suddenly start going into hyper focus hypertension Netflix will blur and The Sound of Crackle And it'll only come back when I come to the desired state.

And the ability to do that specific to my brain is what makes it really unique. Because what we're trying to is not just pinpoint your brain in general, your prefrontal cortex, or your occipital lobe.

Okay, Sat has high delta in his occiputal lobes. He has low theta in is pre-front cortex. We're gonna work on those at the same time in different ways.

It's comorbidity. it's the same way that if someone take this statin no you guys would never do that you even unfortunately some of our results need work like you were showing me yesterday but ldl is here hd is there that's accepted that we need to look at that depth before your brain There's some really, really good people out there

doing it without our device.

I'm just saying, but those people are so few and far between. So how do we bring their knowledge? And I think you've had them on it, like the brain code guys.

How amazing are they? Their mission is incredible. What they do is incredibly. But how we now give other people the ability to do that without having to train for 15 years, 20 years.

And more importantly, the accuracy to it. That's what we're doing. We're taking something that just wasn't available to people Unless you were trained and you happen to be lucky enough to live near somewhere to that depth And we're able to roll that out to anyone.

This is like the gym for your brain Yeah, you know that with that training and it's incredible how you said that As soon as you start to lose that part of focus of that of the brain Everything starts to kind of go dark on that screen and that crackles in the ears or forces you to make sure You end up focusing um If I were to say, right now there's a huge, huge number of baby boomers, people that are in about their 70s.

My parents are baby-boomers. And one of the things with baby booms, they're the ones tapping into this whole longevity space tremendously. They want to have good vigor and vitality.

And they're doing everything to, number one, maintain a very sharp brain. You know, especially when I see other people, some of the friends that are having dementia, Alzheimer's, nobody wants that.

Right. I could just hear my mom right now. Me showing her this technology and utilizing it. Her saying, well, I do my word cross puzzles in Sudoku for my brain health.

How does this compare? That's really good. So firstly, I want to say what I'm about to is copying what Tommy would. Everyone should look up a guy called Tommy Wood.

He's incredible. I can't do a CV justice, but look him up. he's a UK guy who talks about brain health, works with a lot of high performers. It's not about what you're doing, it's about how far can you extend your brain?

How far do you continue to do that in life? So Sudoku, yeah, fantastic. But how challenging is your mum fight? That's the key. How challenging are you finding it to keep your brain firing?

Or is it just on autopilot? Because doing Sudoku alone, it's not going to stop anything like that, but it'll help train your mind. But if you're not finding challenging, then we're pushing you into a state of learning.

So one of the things we see is people age. And this is, again, I just want to say this, not specific to us. This is science. Your power starts to reduce and your beta alpha.

So this one we're talking about, should I quickly jump into? So delta waves, slower brain waves help you sleep, help your drift. And then you've got theta more for calmness, it's memory to an extent.

It's more of your slower, brainwave state. Elevated levels of that take you towards ADHD, right? But otherwise it helps you relax. Then you've got alpha.

Alpha is considered that we talk like a geistic base, not quite flow state, but it's alertness at a calm level. And if we just pause on that for a second, doesn't that sound like an oxymoron?

You can be alert and calm. That is how we should be. You should be able to be alert and calm, but we think alertness means, okay, jittery, or calmness, means tired, archaic meditation.

But alpha is that unique wave that we are, not many of us are living in that enough. Then you got beta. Slightly faster, so we're talking about helping you undertake actions.

So alpha into beta, your flow state, decision making, high beta. Really focused decision-making. Then you've got obviously high-beta into gamma, which is fight or flight.

That's what we touched on. Imagine it's a spectrum. Each one is required for your brain. Your brain's incredible. But how do I shift from one to the other?

So coming back to your question about baby boomers, we see two things changing over the years. Your power output, this is your coherence, your ability for your brain to fire starts to diminish, and your alpha beta starts diminish those ratios.

So we need to challenge the brain, to keep pushing it. How do keep getting into my beta state? How to I keep get into alpha state. Interesting and so your body will in your 70s your 80s, your brain and your buddy will cash the checks that you're writing when you 20 30 40 50.

Neurofeedback, Precision Medicine, and N-of-One Care

Right in the same way that, you can start to build muscle mass at 60 you could still do a lot for your bring, but you have to challenge your. Simple stuff like.

Don't sit in a dark room too much. I see it with the close family members. It will impact your brain. You need that stimulus. Interact, you need the stimulus, challenge your brains.

And the challenge for everyone is different. But this is science. So when you're seeing that curve, it's impossible not to age. Right? But you can train more resilience.

For example, your body to when it sees a tremor, right? Your physical manifestation of a Tremor has been being fought in your brain for 10, 15, 20 years.

Let that sink in. But we'll treat it when we see the tremor. So what we're looking to do, there's so many cool things. That's what Dr. Eamon does. There's MRIs.

And if you know that EEG, what do we do won't treat or stop Alzheimer's. If we suddenly say, OK, the reduction in beta, or someone says, look, I've got this, potential early onset of Alzheimer, we know we need to start training this part of the brain to give you as much resilience now as possible.

but that's the data gives you. When we're looking at boomers, you need to train your brain in the same way. And I'd like to come back to my first point.

It's simple, but why is it being made so complicated? Because we don't have a point of reference and people don' want to make things simple. I do think that now we're in a certain time, in certain era, that people are becoming more health conscientious, right, especially post COVID.

And you're starting to see people have the whoops, the oar rings. this is the one for the brain, right? This is The Oro Ring of the Brain. You've literally stolen my strap line.

Use that strapline internally. I've heard you say so much. So I'm like, hey, I want to start using it too. For copyright reasons, you can't put it on advertising.

But in essence, it is like I admire what they do so. Much. Yeah. The so I know a lot of people that are listening because we have a. Lot of doctors that tune into the podcast.

The validation, how was this validated for us to be able to utilize it in the actual, in a clinical setting? So FDA cleared. FDA, if we break it down into a couple of ways, EEG, regardless of us, the electrical path is measuring it, that's accepted wisdom.

It's in hospitals. We look at brain state, we look brain functions, same with EKG. But that is accepted. Neurofeedback again, accepted, and we know it works.

that barrier has been someone learning to do it four, five, six, seven years takes an hour to set up and then you get the data might not be right. And then, okay, what do we do next?

And you have to get someone mapped again. But that is real. That's all validated in science. So what you have to do if you're coming with a device like this, which is totally changing how you measure someone's brain, you to prove the efficacy of your device against a normative database.

So a database that's considered correct. Okay. And we were able to that. One of the things that I do hear a lot, regardless of you views on the FDA, et cetera, there's quicker ways to get stuff out there.

We're a bootstrap company, we haven't taken on funding. We want to do it right. It costs seven figures to a lot of this stuff. The guys we partnered up with, that Lazarus, and hopefully if you have me back, will be able to talk about a little more about what we're doing.

But this is a significant investment to doing it, right? Otherwise, We hear this band, this phrase, extrapolate banded around. We're AI thrown at everything.

Okay, but you're extrapolating on what basis? On what database? Oh, no, okay, what did the FTA say about that? What did MHRA in England say? So this is where it becomes unfair on the consumer.

I'm a consumer, I use this technology, then I thought, okay, we need to do this better, because the information I got from this was incredible. But this where, like I say, regardless of your views on FDA, We had to jump through a lot of hoops to prove that it worked.

Like working with the guys at CGX initially, and now Lazarus, these guys are market leaders in this space. where the University of San Diego's been up.

The credentials are incredible. That's how we decided to work with these guys. And then we continued to evolve, but that's you validate, in my opinion, that something's working really, really well.

Yeah. You know, one of the things that I want to mention, because I think it's important for people to understand, when you have technologies that, there's similar technologies out there, What makes it significantly different is the backend.

The software, the way that the coding has been set up, if it's tapping into AI. I really started understanding that SAP through putting myself through other type of processes.

how prenuvo's MRI is significantly different than someone else's, based off of the way it takes the slices of imaging, the AI that's connected to it, or it's tapping into more aggressive data sources as well to give you this beautiful reporting.

And that is the other thing, reporting, how easy is it for us as the consumer to digest. Same thing as Hanoi, right? VO2 max, RMR, the rest of metabolic rates.

If I go back. Big shout out to Costas at Hannoi. Yeah, both of them great people. We work closely with them. But if I back, you know, 15, 20 years ago, we used to use the Parvo device, big crash cart, 12 lead EKG, has the gas connected to it.

You need a cardiologist to interpret the VO 2 max. And at that point, they're putting these protocols together based off of what they are seeing. No different than when I want to go get my CT scan of my heart, right?

You go back a few years where you didn't have the clearly heart scan, where it uses the AI and you can actually

see how much type of plaque buildup, you know, low density plaque, the calcification.

You know, all three different types of buildup that you have there. It's different now because of the softwares that they've created behind it. And where I'm going with this is one brain X, right?

When you're looking at something like, for example, going back to Pinoy, the VO2 Max, The reason we no longer use the Parvo device for Vo2Max or the Core device is that the reporting and the output that this system can actually give.

And the longer they've been around, the more data that's been fed into it, and then tapping into AI, where now we get reports that we know what IV drips.

that we can give our patients. I could never do that before. You know, it would take us days or hours to even figure that out. Now, I've been through a brain mapping and neural feedback process.

And I'll tell you, after I was done with it, i looked like that guy from that movie, something about Mary walking around, walking along with just hanging out, you know what I'm saying?

It was a mess. It had to take a shower. My report wasn't going to be ready for a week. So I want to talk about the reporting and the ease that you guys have created, not just for the actual consumer, but also for medical providers that are offering the service.

And let's be clear, that was one of our biggest drivers, right? Firstly was how do we get this technology into as many practitioners' hands as possible?

I would speak to so many doctors and then they first, if they knew about EEG, everyone raves about it. But the second, I just can't. I don't have a staff member.

Don't I have time to train on that. It takes too long. Yeah, like the information, but I, just don' think I'll be able to understand it and give it to my clients.

Okay, problem one. And we've solved that, so you can see obviously that the helmet here, it's, you spoke about the gel-based systems, which around 95%, maybe a bit more of systems are.

Apply gel to your hair. Okay, go back to the reading. Understand where it is. Oh no, that doesn't quite look right. That looks right, move it. Sorry, I put it in the wrong spot.

Let me put a bit more gel here. It's not a pleasant experience. Just put in that. Necessary, but not pleasant. And secondly, the person doing that is so highly skilled, they're few and far between.

So how do we get this into as many people's hands as possible? And the magic was in the electrodes that we created. The electrodes are able to pick up the electronic path to the electrical pathways of your brain, effectively.

And that's the magick. Removing that gel, removing that need for moisture. But more importantly, can I grab it, sir? Yeah, yeah. Cool. More importantly, and you'll see the little labels on here like FP2, et cetera, placing these on the right side, the parts of your brain to be able to pick up the wrong pathways.

So you can't even do a reading for us if the connection isn't strong enough. And it's literally a small toggle. You're on that iPad traffic light system.

green amber red okay it's red i need to toggle this on my connection is strong enough not oh it looks okay you come later oh we couldn't quite pick up those parts so we're gonna extrapolate all right my first question when i had it done what are you extrapolating against oh people of your cohort okay so what 35 year old i was 35 no longer but like 35-year-old male right-handed yeah okay how many people in that cohort i don't know So how can you give me precision based for my cohort and make those claims?

And this was one of the early companies we were looking to invest in. They had 12 people in my cohorts. Doesn't mean what they told me was wrong, but I make that claim, right?

So what we're able to do with these electrodes is pick up strong signals, and we can train anyone to within an hour because the software does it for you.

And then the second part on the reporting, which is crucial, Panoi are incredible at what they do. And so we have no ego here. We learn from those guys.

Absolutely. Yeah, they're incredible. So the whole point is, OK, Sam, if I now asked, or probably not you, you're not a good example, because you would have known.

But 20 years ago, someone asked me about HRV. No idea. I have not idea, I've no concept to it. Now we all understand. OK. we understand, that's increased, decreased.

What does that mean? You know about your HRV, but you don't know your brain score. And so what we've been able to do now is to give you a brain mapping, give a whoop or aura, not tied to anyone, that type of report that anyone could understand.

Get brain mapped, oh my focus is here. Okay, my alertness is there, and my memory is my spatial awareness is that. These are a few things I could potentially do for it.

Obviously we build H-bots and light beds, but I don't have access to one of those when I'm on the road. But I know where my brain's at, right? So even coming into this, like this is for me personally, I am a huge fan of yours.

It's a big deal for to be here. I was nervous walking in here, so I understand my state. And you just shift down, and you have to shift them. Otherwise I'd just be thinking the old me, come on, man up, get through it, let's go, that's not right.

That's not true. But I see my report. My report shows me, okay, my impulsivity control is slightly lower than it should be. And I seen that.

Applications for Athletes, Military, and First Responders

I saw that, so when I'll be in meetings, and I got told this by a really smart doctor, like, thank you, Dr. Frank Lippman, but I would be, if I'm in a meeting and the meeting starts to drift, I might, And, not getting the stimulus that I want.

Okay guys, X, Y, Z, let's move on. I thought that's me being a decisive leader, a strong CEO. What's actually happening is I'm not getting the stimulus that I want from this and my impulsivities kicked in and I've made a snap judgment.

I thought it was a process-led decision. Now what happens in the team laugh? I'll be on the cusp of it. I had to sit back and touch my chin. And I didn't even know that I touched my shin until the guys started laughing.

Yeah, they shouldn't mock me, but apparently it's a running joke. So I touch chin and then that would be my crutch. Okay, Seth, where are you? Am I in a right place to make this decision or do I need to re-think this?

But I wouldn't know that if I had a mean brain map. I would know where I am for impulsivity, I'd guess at it, and kind of know. But, but I'll be honest, never knew that my impulsive control needs to improve.

That's powerful, man. When you have that type of data, it gives you the ability to have the awareness. And I go back, just like any of the wearables that I wear, like my oral ring.

If I know the last week I've been trending where my sleep hasn't been too well, It's not that my ring is going to tell

me, hey, you're, at the point of time I'm ready to go to sleep.

It is not going tell like, Hey, your sleep hasn't been well, do this, make sure you don't eat. But now it's already in my mind where it is like you know what, maybe I shouldn't be too close to bed time.

maybe I should reduce screen exposure so I don't have that cortisol spike. But I have the awareness because I've had the data. So this here is giving you that awareness where maybe you shouldn't make that quick, impulsive decision.

Maybe you should write out that email before hitting that send button. I'm aware that not everyone can jump into neurofeedback. The goal is, OK, let's rewire your brain.

Because remember, your brains is neuroplasticity. you can literally rewire how you think. You can re-wire your brain patterns. And I've done that. It's always a journey.

They say you never forget to ride a bike. because that's you training your brain, right? When we were born, we both, everyone's ambidextrous in essence, but your brains train those pathways.

And we can train these pathways for these observed behaviors. We do it for high performers to some incredible level, and we all do that. So whilst the brain map is very, very powerful, the neurofeedback helps you train it as one of multiple things.

I'm a big fan of ExoMind. But what we're able to do now is, okay, Sammy, this is the part of the that needs X or Y. So you just mentioned high performers.

What type of high-performers are you referring to? Well champion boxes I Won't get into a debate but one of probably the two best footballers in the world soccer players Yeah, some of the best basketball players Currently so for like athletes.

What is what is one brain X doing for athletes? So what we're able to do is One increase your SMR, which is incredible SMI is your sensory motor rhythm That's a part of your brain that controls your function.

So if you're talking about a golfer, or you are talking, let's take basketball fans, what happened to Wemby in the finals? Wemb was absolute clutch. There was one or two decisions when he gave that ball away and you think, bro, hold it, you got 24 seconds.

What happened in that state? What happen to his brain? So what we're able to do is two things. One, look at what happens to your brain is stressful scenarios and help train that part of your.

But also with SMR, we were able. Help control your sensory motor rhythm. You'll control, your movements, you tremors, take a golfer. For example, We can help you with your putting because we help with that smooth the movement.

We help control that party, a brain. So one thing that we've worked on, really proud of it. Do you actually scan them while they're playing? Yeah. So we, with an MLB team, they approached us and said, we've got two of our highest paid hitters and sorry, I'm from England.

The terms might be wrong, right? That guy who holds a bat, but to like, yeah, to the most high, like high paid and high performing hitter. They couldn't pull to left.

All right. We need to help them pull it to a left, what's going on. And luckily they like Iro, who doesn't like being told he's our business partner. He's brains behind this, They were asked, OK, what can we do?

So we mapped him literally sitting, calm state, brain mapped in. This is what your brain looks like. Now what we're going to do, we need to a couple of mental exercises.

OK. That's what you brain. Looks like when we are doing some brain training that we took it another level. Let's go to the net. This is when you hit in your arc where you feel comfortable where your brains at now pulled to the left.

So this other parts of his brain just light up. Okay, let's do it again. Obviously do multiple times and you've got the live reading and it shows okay, this is what happens to your brain when we ask you to pull to left so we focused on two things one was brain training that specific part of this brain but also Now we know what's happening to your brain, giving you some crutches when before you go out, there's some mental crutches to get you into the right brain state.

Knowing it's just brain. It's your just your brains. Just a ratio. He's not physical. Then obviously we train those muscles, see where they move, See where the inhibition is.

And so that's what we were able to do. I wasn't an MLB fan. Relatively am now. But when you saw that guy and so we trained him, trained and trained them until the coach is like, you know, we're ready to call that in a game.

different pitchers, different arcs. You need to be able to pull to the left. Right, right. Man, like, he literally knocked it out of the park because he was ready.

We were able train him for that. That's amazing, man. It's so amazing. So the one brain axe. This device here, is this something that someone would have at home or would they go into a facility to utilize this technology?

How is it? So most cases you go to facilities. So our at-home model can't talk too much about it, but early next year we'll be rolling that out. But yeah, this is you going to facility, take 20 minutes, get tested, and get your report straight away.

And then when it comes to the actual training, that's at the facility as well? Yeah. So from next year, we can train you anywhere. But right now, it's a case of come to this facility, do the brain training.

Do multiple interventions. One of the cool things that we do, and obviously with the likes of yourselves, is, all right, your brain's here. We're going to put you on this supplementation.

You're gonna put in this many sessions of HBOT or LightBed or ExoMind. we're to improve your sleep in measure you again. Let's see where we are. Move that benchmark.

But before you'd have to go to a hospital go a clinic and get get mapped or let's be honest We've all seen it. So I mean like you go into clinics and ask what you do for their brain.

It's interventions not Telling you where your brain is. You wouldn't do that blood testing Okay, you look like this take this test. Okay. Have a bit of that You're doing it for your brand.

Yeah. And this is um This is incredible, by the way, because this is what I'm gonna say for the listeners and viewers, especially a lot of our doctors that are tuning in.

we do so much for our patients, or even the consumers, we so do much our brain as consumers. We're buying the Ginkgo cobaloba, right? We are buying that the NR.

Were buying NAD. were doing the bulletproof coffee. we're doing all of this stuff for mental focus and clarity. But we are not measuring where we at. This gives us the ability when we're doing all of these other type of protocols, the HPOT, right, The Hyperbaric Chamber, when were doing things, even taking medications, is it making a difference?

This allows us to actually see if we are improving or if were going backwards, if any of this stuff that were taken, any these supplements that we were wasting, not hundreds of dollars, thousands of Is it actually worth it?

Because sometimes, I see it. People supplement to just supplement. We want to supplement based off of what your actual need is. So does it make sense to continue to spend thousands of dollars if you're not even correcting

the issue?

One of the best analogies that I got, again, so I ask stupid questions, was why do we always have to be on the same supplement? Obviously, we're going back 10 years.

And then the doctor she replied to me said that we shouldn't is if you drove your car and it's running out of engine oil. Top it up with engine. Okay, great.

Next day you got to top it with an engine, okay, keep doing that. And you don't top up an engineer when it breaks down. Are you fixing something or masking something?

That's how we should as consumers be told about this stuff. Are you fixing or masking? But we're not told, right? Like how, again, and I'm not just saying it, it's a privilege to be on this podcast because you talk in a way that we can understand.

And this is the whole thing that when it comes to your brain or supplementation, the barrier is much lower to do it right now. We're not guessing at it.

You've got so many cool things for diagnostics. So we owe it to people to give them more information and make smarter decisions. We wouldn't accept it for our car, but yet we accept for other parts of our body.

Absolutely. We've got to look under the hood, guys. And if we can become sharper, smarter. You know, one of the things that you talked about, you mentioned this earlier, the military.

When I started thinking about the Military and then testing the brains, I'm thinking of two things. I think about PTSD, myself being a former first responder.

That's important. which we're going to get into that portion in a minute, but then I start thinking about certain military members that things have to be very precise, right?

That precision. And I remember you saying you have be alert but calm. Yeah. When I think about like a Navy SEAL, who's out for the hunt, he's alert, just like how my German Shepherd would have his ears up, right?

And he is calm, ready to go. Yeah, sounds like an oxymoron, but it's the truth, you have to. Right, so when it comes to these people like SWAT team members, military, what is it that the One Brain X is doing to train these individuals to be alert and calm?

So yeah, not too much I can say specifically but what we're helping them do is to shift state shift into those alpha and beta Training that part of their brain specifically and remember your n of one Alright, so let's put it this way some people might be on that on That Delta slower sleepy theta more slower brain with more relaxed meditation.

Some people may be up the higher end So how do we get you to that balanced flow state? So you can't just treat everyone in the same way. And let's be honest, too much of that is happening right now.

But if I am able, OK, Sami is faster brainwaves here. Sat is slightly slower. OK. We need to get sat to this level. Need to bring Sami's ability to state shift.

to that flow state. It's all about that balance and shifting, coming back to a phrase that I have seen a lot of people use now, and I'm really glad for it, is activity in the brain is great, connectivity is so important.

So how can we connect between those states and move between the states? So that's what you would do for these people. Right. Give you that state and that ability to shift upwards or downwards, but make a smart decision.

If you don't have that, ability, you might go from even that calm, alert state into fight or flight and make about this. Okay. or you might shut down.

So you can't have that, right? You've got to know how to process, how do it, and we can train that part of your brain, but we have to train your for that because comorbidity is what we accept for the less, I'll break it down, in the body, we except multiple things are happening at once.

We have deal with multiple at one or find, improve this and then we'll improve that. It's the same with your. You can look at a brain for a label and treat everyone in same way, which happens too much.

What about for like academics, right? Kids or college kids that are going through their different academic studies, does this help with the memorization component of the brain?

PTSD, Addiction, and Brain Health in Practice

Yeah, you can train the memory part of your brain, 100%. One of bits that I like to pull out, maybe I'm an example of that, our ability to encode a memory is very different to decoding them.

But if you just stick me in exam format, I might get stressed, might be anxious. I may not be able to show you my knowledge. So there's multiple things we can train your ability, to find that knowledge under pressure.

And then that's the way of decode. We would just think, okay, maybe you're academically not that strong. Or if it's not going in, we help you encode your brain in the right way, those pathways.

But when it comes to memory, yeah, We can improve these pathways because remember, it is your. Brain is just. It's a set of ratios. Everyone's ratio is slightly different.

Every biomechanics are slightly. Different. And that's the same with your brains. If we're looking at memory academia, and we could do so many things as a school in Dubai that we work with, where we helped them when students come in.

We met the cohort of students. So we can understand okay They like to do it for two things one is gifted and intelligent, but also neurodiverse potentially And I don't massively like that phrase neuro diverse But what they do with it is great because they can't understand which children need different teaching stuff because your ability to encode will be Impacted by your environment.

That's pretty interesting, right? We can see that So magic question, man. Am I going to finally be able to win the fifth grade spelling bee? Sammy, I've seen you spell, so we're going to have a lot of work to do.

OK, this is not magic. This is awesome, man. So, you know, we were talking about the military and first responders. I want to go into the PTSD portion of it, because this something when we talk about mental health.

Yeah, understand. How does this work on people and what is the effect when it comes to the post-traumatic stress syndrome that people have? It's clinically proven.

Let's separate this between us as OneBrainX and neurofeedback in general. Neurofeed back is clinically-proven to help with PTSD. we're able to look at your anxiety, your pathways.

Because remember, PTSD again, and this is the key point, shows up differently in every brain. So then how do we train that brain? Train those pathways to what we consider, let's break it down two ways.

One, closer to normal, but what are we judging normal against, right? It has to be a massive database. And then over time, we can build up what N of one is.

So your normal is not my normal. And so it can help, and it does help. It's not just us who can do that, Sammy. There's so many smart people who do it.

Our job as a company is to give more people the tools to do them. I don't run clinics, I didn't have a horse in this

race. I'm trying to solve the issue that they've brought up to me.

So I can't scale the business because I don't have a practitioner for this. I didn't. Have the time to do this? I wish I could, but I couldn't, so we're looking to sold that issue.

And so when it comes to PTSD, yeah, there's so much we can do and we see in England as well. Yeah, I want to get political, these lions for lambs. Hmm.

Regardless of your political views, these young men and women are putting their lives on the line. And their high performance environments as they're training are strong.

But what happens afterwards? Because remember these are high performing people. So what happens afterwards? They don't suddenly become dysregulated just overnight.

And this is, remember, like, I wanna break it down. It's just dysregation, it's ratio, so what happened? What's happened to that brain? And we're doing them a disservice.

That's where there's so many good things you can do. You know me, Sam. I'm not here to sell, but it is to help. This is really through purpose, right?

Passion and purpose. We turn down investment. Yeah. Like, we're happy. And I know that from working with you very closely for quite a while already. One of the other things that I'm pretty sure that a lot of listeners and viewers are questioning when it comes to brain health is one of the things that we do actively treat in the longevity space is the addictive personality, people with addiction, right?

Sometimes it's drug addiction and then sometimes I've had neuroscientists sit in that seat right there talking about pornography addiction. How does this technology help with addiction type of issues?

So if you haven't listened to it, please go back and listen to Sammy's podcast with the Brain Code guys, because I think they summed it up in the best way.

And I'll try and do it justice to what they said. So they were talking about they weren't able to look at someone's brain and say, hey, you need a glass of wine to feel like this, or you needs X to fill like Y, Because you can see that from the brain.

So whilst we can't stop you liking the taste of a glass of wine, we could look at what is your brain yearning that it needs that, right? So we're doing something really, really exciting in the ketamines.

understand where does your brain go? Can we replicate it? Or can we enhance the impact of it by understanding where your brains goes? So when we're looking at addiction, for example, it's what's happening to your Brain pre and post, what is your Braining yearning that having that glass of wine or something strong or addiction?

What is that for that period giving you what you need? Right. And that's where you're able to look and train those pathways. So and this again, there's some amazing studies out there that show the impacts on how addiction changes your brain, like what actually happens to your neural pathway, what happens actually to blood flow, and then what these interventions can do, neurofeedback can help you with those ratios.

And like I say, it's not just neuro-feed back, but neuro feedback can be so many amazing things because it will literally help rewire your brains. It won't change your taste for wine, But it'll look at what were you yearning and how do we change that?

How do you help your impulse control potentially? So what excites you in the next three years with the the brain health industry I People I'm really excited that people gonna walk into clinics like yours yours and not ask do you map my brain but start asking why don't you Like this whole people to account I like I I think everyone should use Hyper-Rack Auction Chambers.

Whether it's ours or not, everyone shouldn't use them. Everyone should get Brain-Mac. Everybody should have their VO2 max tested. But that's what I'm excited about because I see it without getting emotional, mate.

My mission now is different. I live in the factory building chambers with our guys, etc. Everyone needs to know you can find out about your brain and you.

Can make changes. You can improve the quality of your life. And that's what everyone needs. To do challenge people, challenge. People to be better. We're challenged all the time by athletes, by the likes of yourself.

Right. As consumers. ask the stupid question, because trust me, it's not stupid. Really, someone like you should be able to come back to me and say X, Y, Z.

And if you can't, then ask why not. But I'm really excited by arming people with the same knowledge that they have about their four sticks, about the blood, the HRV for their brain, giving them a brain age.

Hey, man, like we all, so many people know about your chronological age, your telomere length. This gives the brain age. Yeah, like this is Iris. Sorry.

That's like, that's what we're doing. We're able to give you a brain. Age. Were able. To give your brain score. And then the whole thing with everything comes down to, okay, what are you basing that on the largest neuro database in the world?

Nearly half a million unique reads Conventional wisdom is based on a database with 900 reads Yes peer-reviewed. Let me get that right, but that needs to go again now like blood work We don't just stay where we were from a 1960s database do we right?

That's that's my mission. I'm not a neuroscientist. So I''m just a guy who saw There's so much information out there And then that's why I'm excited about me.

That's what I mean. There's definitely a need and we're fulfilling that need set. This one's for you personally. You know, you're you've obviously been in the biohacking space for a while now, moving around, seeing all of these different new products, technologies, modalities that are out there.

What are the top three non-negotiable things that you do for your health? Okay. Non-negotiable things that I should do for my, no, that you do. Um, sleep.

All right. Weight training. And, uh, obviously I see you on Instagram. So slightly demoralizing when I. Like how strong you are, but no. But sleep weight training and, um, I start to regulate the first 30 minutes of my day.

and the last 30 minutes. I've got two young kids. Obviously, I live with my parents, so we're a good Indian boy. And I got my wife. So you can't suddenly be that, hey, this is your last six hours of the day.

Not everyone can be Mark Wahlberg and do that morning routine, which is wake up before you go to sleep. But regulate those last thirty minutes, get you into that state in those first 30 minutes.

So there's something that a good friend of mine, Sam, sorry, Dan Lawrence told me, he works with the likes of Conor Ben and High Performers. He gave a little hack to his guys.

If you're in a hotel or if you are training, if your on your phone, it has to be two pillows. has to be two pillows sitting up and then when you put your phone away that second pillow goes away and you can't pick your own up you better go pick that pillow up put it back and pick you phone up.

Future of Brain Health and Personal Non-Negotiables

I started doing that but it didn't suddenly stop me looking at blue light being something I could quickly do made me

think before I picked my phone and Yeah, sorry, I know it's not snapshot, but I'm just a normal guy, right?

And so the other one is like what Dr. Darshan always talks about, put your phone the furthest away from your bed as you possibly can. These aren't bio hacks, these are lifestyle hacks.

So they're the three things I do, sleep, wait, train, and try and regulate those. You don't want to wake up and think, oh, the tiger's chasing me. And that takes time, but that's what I do.

Yeah, awesome, man. Awesome. And how many pull-ups can you do? None. None? No, I don't know. I could try, But I've broken both my skate points. You've been working on the hand.

At my best, probably one more than you. No I'm joking. Let's do it. Now I see you guys. Like I'd say maybe about now. Ten maybe. Okay. Yeah, Los and Joel are gonna hold the accountable.

My flight is now, guys, I gotta head to the airport. I literally was doing the calculation. Could they get me to The Gym before I leave? Okay, let's say ten.

Awesome Sam we're gonna have a little fun here. So these are conversation cards that Steven Barlet with the diary of CEO came up with so you'll go ahead and grab that All right, take the sleeve off grab two random cards from anywhere in the deck My eyes are terrible by the way, so even with glasses Read it out loud and then answer If you could be If you could be a far of any brand or company, it's not far.

It's part. All right. If it could. Be a part of. Any brand. Or company. Past or present. Which would it be? And why? That's for you. Oh. Nike or Nike.

Thank you, yeah. Like, why is that? It's personal. When I see what happened to Phil Knight and the doors that got closed on him and how tenacious he was and…

the lack of ego that he had when people were not listening to him, it resonates. So like, forget like what you see they are now. Like at the core, the tenacity that it took to bet on yourself and to believe in yourself is one of the things that sometimes gets told about that story.

Obviously it gets gobbled up by Jordan, et cetera, but that's what I would want to be. That's, what resonates with me to To be tenacious to be a challenger to a disruptor and that gets thrown around so much, but you know me Sammy I don't really come in front of the camera.

I'm comfortable thinking how else can we change stuff? How can be changed there? But yeah the Nike but for different reasons to what people think seeing that like the stories of him opening up his trunk and Trying to show people this this trainer I was about to say sneaker but that would make me feel sick.

Come from England so trainer and It's inspiring isn't that they're the lessons I teach my kids. Right. So yeah, definitely. Awesome. One more. What? What topic is that?

No one. Okay. Well, what topic? Is no one talking right now? Right now. And historians will study in the future. The tough one, I don't really want to be political.

I think that what we're not talking about enough right now is the power the food industry has over everyone. It's easy to kick big pharma, but go look at the subsidiaries and, and people, how much the food industry pays.

And that is what if. If the news and historians are given the right to report on, that's what we'll see. I look back and I laugh. My dad said, I won't do that accent, because he'll kill me.

But he's like, son, if that aisle is the healthy food aisle, what are the other 27 aisles in this place? I said OK, yeah. That makes sense. Yeah, I, if they were able to the, the food inequality in this world is changing people's health, their brains.

And that's, that which brings me to a point, you know, right now there's a big movement called the maha. Yeah. That's what made me think of it. Make American health again.

What, what, What are your thoughts on the MAHA movement? Um, think it's brilliant. Honestly. Let's separate my half from politics for a second. It's easy to people want to laugh at X, Y, Z person, but look at what they're trying to do.

They're try to take on and make people healthy. Right. So why would we not at least listen? Right? Why would you not? And I've been through the FDA cycle.

And like I learned in this podcast, you heard me exalting. I think it's incredible. But I also know how hard it is. I also know like what it takes out of my partners, what he took out them and like, I think my husband's brilliant.

We should be in a space where we listen and what I like about those guys, they'll ask questions. And I know that you see you some great work in that space.

It's what we all need to do because you can't, how can you argue with making people healthy? I love it. I agree. Sat man, as we wrap up here on the podcast, If there is one person that's listening or viewing this podcast that resonates with today's message, what is that last thing you can leave them off with?

Know what's going on in your brain. Just know. Because your brains going to cash checks in 20 years that you're signing. And it's not hard to find out.

Try not to make it sound like a sound bite, It's not, sorry, but this is personal because I've had stuff in the family. It is not hard to find out what's going on in your brain.

And keep it simple. Start in first principles. Don't leave it too late. Absolutely. Instead, if people want to you, where can they find you? So we're at onehype.wellness at sat.onehyp, if you want to see me trying to do three pull-ups.

Yeah, we are at 1-hyped.com. So yeah, you can hopefully share the details, but you'll find out a lot more about what we do, why we Amazing, we'll have all the links listed down below.

Sat, it was a pleasure having you on a Healthy Point of View podcast and we're excited to have you back to talk about a few other things in the near future.

No, I appreciate it, Sammy. Look, you're doing so many great things and it's a privilege to be on here, mate. Thank you so much. Amazing brother, thank you.

Guys, You heard Sat. The technologies are here. We have them at Likovita. There's several other medical providers, organizations that have the One Brain X.

You can see it right here, OneBrainX. Let's take a deep dive, let's optimize our brain. Let us get our brains functioning at its peak. Make sure you take this podcast, share it with someone who you think might resonate with this message.