Introduction to Long COVID and the Podcast

what happens is that then causes a whole bunch of symptoms in our body, fatigue, exhaustion, sore throats, difficulty concentrating, memory loss. There's over a hundred symptoms associated with long COVID, but those symptoms become what we call condition stimuli.

The brain interprets those systems as a proxy for the COVID infection still being present. So the brain says, let's stimulate the immune system and nervous system because we're in danger.

That then creates this physical symptoms and the body that loops back to a hyper defensive brain that thinks we are still in It's an immuno response. And then we get stuck in this cycle of the brain and body firing off against each other, getting caught in their own internal loop.

Welcome to the TBD Fit podcast on Dr. Talks. I'm your host, Daniel Keeley, and I will be guiding you through this wellness journey in terms of optimizing health and longevity, where we unpack the science, the do's, and everything in between.

Come join us. Look forward to seeing you inside. I'm your host, Daniel Keelan, a functional medicine practitioner. My goal is simple. and recovery, which often enough you guys hear me speak about.

So joining us is Asha Gupta, internationally recognized speaker, filmmaker, health care practitioner, and founder of the globally renowned Guptah program, a pioneering neuroplasticity-based protocol.

for ME-CFS, fibromyalgia, long COVID, mold illness, chronic Lyme, and related conditions. His journey began over 25 years ago at Cambridge University, which I'll let him dive into here shortly, where he personally developed ME CFS and devoted himself to understanding the neurobiology behind chronic illness.

And through his own research, he made a full recovery, which we're going to highlight in today's episode. His work is supported by peer-reviewed studies, RCTs, and a multidisciplinary medical advisory board.

Asha Guptau2019s Recovery Story

A-shock. Welcome to the show. Daniel. It's wonderful to be here. Thank you for the invitation. I love opening every episode by allowing the guests to speak to their story because yours certainly was inspirational and kind of how it drove them to what they're doing today.

Obviously pain drives purpose. So take it away. Yes. Well, as you say, a lot of us have got into this area because we've been through our own challenges, our illnesses or the journey that we'd been on.

So my journey started in the mid nineties where I was an undergrad at Cambridge and I. Was burning the candle at both ends. so I, was partying, but also stressed out about work and the competitiveness of being in that environment.

And like many people, probably pushing my body a little too hard. Then I got a flu virus, some kind of flu, I had a stomach bug, and a number of different symptoms.

And the virus seemed to go away, but I seem to feel worse and worse, and my illness got worse to the point at which I couldn't open a book and read the words on a page.

I would find it difficult to concentrate. And for people who haven't experienced what I later got diagnosed as chronic fatigue syndrome, imagine your worst day of flu times five in that deep exhaustion, no energy, don't feel like doing

anything and rest doesn't alleviate it.

In my worst moments, I was almost suicidal and it was just really awful. And I remember making a pact with the universe and I said, if I can just get myself 30% better, 50%, better daily, a hundred percent better.

I will dedicate the rest of my life to helping others with these chronic conditions because I, you know, admit hundreds through different support groups, people who were suffering.

and my doctor would say, we don't know what you've got. We have no treatment for it. You're on your own. By the way, he might have this for the I was the kind of person, I'm not going to take no for an answer.

I said, no, that's not good enough. There has to be something that can heal this. And there was one very poignant moment, Daniel, when I in a bookstore in Cambridge when in those days we didn't have the internet or not a developed internet to research.

We actually had to go and read books and articles. So I was in this bookstore and there was a self-help section and the neurology section. And there's one book jutting off the shelf that just called to me.

For even now, I can't describe why I picked that book off of the shelves. The book was called The Emotional Life of The Brain by Professor Joseph Ledoux, the foremost neuroscientist on the amygdala in the 80s and 90s.

I read that and I thought, wow, this might be what's going on in my brain and explain what is going in these conditions. And so in a very ad hoc way, I wrote a medical thesis on what caused these conditions.

And then in ad-hoc way I retrained my brain. So I managed to retrain my train within six months, get myself a hundred percent well, and then I eventually opened a clinic to treat others with these types of chronic conditions I spent many years, probably about 12 years in one-on-one practice, and then I set up the Gupta program in 2007. And since then, as you know, you've mentioned, we've done seven clinical studies and app and various other things.

So that's been my 30 year journey to getting to where I am. It's interesting how you mentioned how it spoke to you because I think too often is, it's funny, one of my patients who's become a very dear friend and we have it on the podcast as well, his journey is remarkable.

He always tells me, Dan, haven't you heard the adage that when man plans, God laughs? Like something to that extent, right? It's like, we have a plan, but we try to create a plane.

But often we're closed off to serendipity. And I certainly believe in frequency and energy. When you said that, that book kind of spoke to you is it's interesting how fate somehow intervenes, and it shows us the path.

We're often closed it off. we've lost our intuition. That kind gut feeling that drives us. There's 10x more afferent nerves from the gut to the brain than vice versa.

It's interesting how, again, the catalyst behind how you found your solution. Obviously, let me see if we'll get into that myologic encephalitis chronic fatigue system, which plagues most of us when you said you know that you're burning the candle on both ends in America especially so what I find too often is we're overworked and under recovered and what does that mean is that well we just say we got to push harder right gases on the tank is empty we like okay I need to caffeinate and I got a work more I gotta set my alarm in the morning instead of what time do I go to bed we gotta you know, constantly in this capitalistic culture, consume more, work harder, keep up with the Joneses, and it's to our detriment.

And same thing by staying up late at night. But in terms of neuroplasticity, perhaps let's start there. If you maybe want to define that for our audience, because by retraining the brain, you were able to kind of rewire how you're able heal.

So let see kind what that looks like, I guess, in practice. Yes. Neuroplaticity is this idea that It used to be thought the brain was fixed, right? So we would have our upbringing, our teenage years, and then pretty much our brain is fixed for the rest of our lives and didn't rewire.

Understanding Neuroplasticity and Chronic Illness

And actually the latest neuroscience tells us over the last 20, 30 years that actually, the brand is constantly rewiring, constantly changing. personality traits we may have or our physiological or neurological reactions to the environment, or indeed what we're talking about here, conditioning in the brain, that these are temporary, it's not a life sentence of this is how we are going to feel for the rest of our lives.

And so that means that actually the brains inherently flexible and there's far more that our brains can change constantly as we kind of living our life.

And so that then opens up this idea of neuroplasticity for chronic conditions. And if I can go through briefly the hypothesis, that will then explain how neuro plasticity fits with what we believe causes these chronic.

Actually, probably about half the conditions someone goes to see a general practitioner for he believe fit under this banner of what, we call neuroimmune conditioned syndromes.

So that's syndromes that occur as a result of conditioning in certain structures in the brain. So this hypothesis, I always like to start with the biggest question of all, why are we here?

Because I believe that everything needs to be linked to evolutionary biology. From an evolutionary biologic perspective, we are here because this brain and this nervous system and the immune system has evolved over millions of years.

So many people aren't aware that actually our DNA contains the DNA of previous species leading to where we are now. So we, are a kind of species that has adapted to our environment and learned all the adaptations of.

Previous species. We share 40% of the same DNA as a banana, which I find a really fascinating statistic. That means that we're hardwired for survival, not wellbeing, but survival.

That means that when a threat comes along, everything else is dropped by the brain and body. The nervous and immune systems prioritize us surviving. And this gives us a clue as to why we might have maladaptations when it comes to chronic disease.

So if I take the example, there's a lot of people with long COVID right now who are suffering long-term symptoms as a result of getting the COVID infection.

It's very mysterious, but very similar to Chronic Fatigue Syndrome. So the way that happens is in our humble view and our hypothesis is that when someone experiences COVID, the immune and nervous systems kick in, they kick into gear to defend us.

But imagine if the body is already weak as a result of overdoing it, stress, burnout, et cetera. The system is far more fragile. So when the COVID infection comes along, The brain goes into a hyperactive mode, which is we're fragile, And we know obviously from psychoneuroimmunology that stress reduces the effectiveness of our immune system and the body knows that.

So it then says, we're going to fight off this virus, but we are not sure if we fully fought it off. Let's continue to fire off defensive responses even once the COVID infection has gone.

And so therefore the, body enters this chronic inflammatory state, a chronic defensive state where the immune, system, and nervous system are constantly over firing in order to help survival and support the system.

And then what happens is that then causes a whole bunch of symptoms in our body, fatigue, exhaustion, sore throats, difficulty concentrating, memory loss.

You know, there's over a hundred symptoms associated with long COVID. But those symptoms become what we call condition stimuli. So the brain interprets those systems as a proxy for the COVID infection still being present.

The brain says, let's stimulate the immune system and nervous system because we're in danger. That then creates this physical symptoms in the body that loops back to a hyper-defensive brain that thinks we are still in dangerous, creates an immuno-response.

Then we get stuck in this cycle of the brain and body firing off against each other, getting caught in their own internal loop. And many people say, well, hang on, what's the precedent for that kind of thing?

Actually, we see it all the time. If we think about the people who've passed away from COVID, they didn't pass away because of the COVID infection during our horrible lockdown periods.

They didn' COVID, they passed away from their own immune system overreacting, causing a cytokine storm, which then overwhelmed the body, overwhelmed, the lungs, tightened all the airways until literally a patient suffocated themselves to death because the brain had an over-reaction and over defensive reaction to the virus.

And so therefore there's plenty of precedent medicine where the, body and brain make mistakes in over responding to threats in order to defend itself.

of course, that's autoimmune conditions, various inflammatory conditions. Allergies, sensitivities, they're all examples of where our own immune system makes a mistake in order to defend us from an evolutionary biology perspective.

I love using this analogy, Daniel, which I think a lot of your listeners will love. It's called the fairy tale analogy. Now, we used to call it the Game of Thrones analogy, but our patients with anxiety didn't like that because they thought there was too much violence in Game Of Thrones.

I shouldn't laugh, actually. You've caught me at an inappropriate point of laugh. But we had to change it to the fairy tale analogy. If you imagine with a fairy-tale analogy imagine you are King Daniel of your kingdom.

So you have the prefrontal cortex, the conscious rational mind, and your body is the kingdom, And imagine that you have an army, which is your nervous system, as the information flows around your body, and a navy, your immune system that protects you from dangers.

And in comes a threat over the hill. So that threat could be a virus, it could a bacteria, could it be toxin like mould, or it can be pain, something that's caused pain in the body.

Those are generally the four or five general threats on our system in terms of survival. And the army and navy kick into gear, but the problem is there's been a drought in your kingdom.

So the kingdom is weaker, your army or navy are weaker. But still they look to defend the kingdoms. They go and valiantly fight off the invading army.

Let's say the invasion is, in this example, it could be COVID infection. It could mold. And let's take mold as an example because mold is something that's increasing the population.

In comes an invader, mold, the Army and Navy fight of the mold and the mycotoxins. But they aren't sure if they fully fought it off because of this hyper-defensive state.

So they continue to fire off their weapons of war, their cannonballs, the arrows, they're missiles. But some of those fall back in the kingdom causing autoimmune type effects, which is widespread inflammation in body, widespread

information in brain.

And the weaker and weaker that the body gets as a result of this inflammation, the harder and harder the army and navy fight because they believe that weaker we are, more we must keep defending the kingdom until there comes a point at which the whole system is so weak, so overstimulated that a person then has no energy to the point to which even paralysis could occur where the system itself is over responding to itself.

vicious cycle. And they come to their weekly meetings with King Daniel. The army and navy generals say, King, Daniel, we need all the resources, all of the wheat, the corn, and the water, food.

You agree, thinking, yes, well, you guys are here to defend the kingdom, so you keep channeling all resources to the army, navy. But that means that the Kingdom itself doesn't have the resource, which is why when people have these inflammatory conditions, they also feel very weak at the same time, because resources are being channeled.

And of course, from mitochondria perspective, a mitochondrion go into this cell danger response type, where they are no longer responding from a place of providing energy, but they're butting down the hatches for threat management.

And brain retraining, neuroplasticity, is when the army and navy generals come to their weekly meeting with King Daniel, they say, we need all the resources.

We need to keep defending. You say to them, my dear generals, you have done a wonderful job at defending the kingdom, But the war is over. you can stand out.

And most of the time, those Army and Navy generals won't believe you the first time or the second time of a third time. But through neuroplasticity for these specialized retraining tools we developed, we can, through repetition, continue to train the Army or Navy to stand down, stand, down and eventually the immune system and the nervous system rebalance.

Our body comes back to homeostasis and energy returns. So in a nutshell, that's what we believe is going on. There's this maladaptive response in the amygdala and the insula and then autonomic nervous system branches that are stuck and your program allows you to intervene at a very high level.

to tell everyone, okay, the threat is gone. We can now resume healing, right? The vigilance, hyperreactivity or sensitivity. Is that correct? That interpretation?

It's right. Yeah. So it's stopping the hypervigilance. It stopping. The over-response and it attempting to train the brain that we are no longer. in danger, we are in a safety response rather.

So how does this compare to some of the other programs that already exist in like DNRS or neuro-linguistic reprogramming or primal program? How does your program kind of, let's maybe segue into your programs.

I know there's three R's, three components of your programme that are essential to rewiring this maladaptive response. Let's highlight, I guess, what is the solution?

how do we get sit unstuck? Sure. So yes, our program has three R's. The first R is regulating our nervous system. Because when our brain is stuck in a maladaptive response, it is in an stressed state and it's not reprogrammable as easily if it isn't regulated.

So the first port of call is how do you regulate our system? That's the 1st R. And the second R is, how do we retrain the brain? And that's where we have specialized retraining techniques that we've developed over many years to help the bring recognize that, we are in safety, that are not in danger.

And there's many different techniques. We have somatic techniques, but we, have a more cognitive technique, which is seven-step brain retrainer. You have an accelerated process called the accelerator and various other

techniques to all come together to retrained the, brain out of these maladaptive responses.

And the third R of the program is re-engaging with joy, which is that it's one thing to get well, but how do you stay well? Because I'm sure, Daniel, you see this in clinical practice that you may use some amazing protocols to getting someone to healing into wellness.

The Brain-Body Loop in Long COVID and ME/CFS

But as soon as they get stressed again by something going on in their lives or there's an overwhelm, a lot of new symptoms can come or a new diagnosis or new illness, and then there is a pathway or protocol that then has to be diagnosed and followed in order for someone to heal.

So in the third are re-engage and enjoy. We help a patient recognize their stress triggers, their stressed responses, the personality traits which may contribute to that stress and help them overcome that so that they can make sure they get well and stay well for the rest of their lives.

Those are the kind of core components. And you asked the question, what's the difference between our program and other programs that are out there? So many people aren't aware of this, but actually we were the first neuroplasticity program to publish our protocols in 2007, where we started off as a DVD program and we're mainly known in Europe at that time.

And after that, there were other programs that kind of, let's say took inspiration or came along later. And, you know, that's totally fine. But what we do uniquely, I think, is first of all, we're the only program that has any independent published clinical research on the work that we.

So I, think that a very important part is that. We're very much evidence-based. And we want to have evidence on, the protocols and the responses that were getting.

For instance, a recent study just showed that, We have fibromyalgia within three months, 54% reduction in fibro-malgia scores. as an example. So I think we're unique in terms of now seven published clinical studies.

The second is that we are an app, and I that's really useful for patients to be able to, be on the move and follow. I, I we have daily live zoom calls for our patients.

We have two to 300 patients coming along. Because as you can imagine, when people are on their own, they're isolated, their demotivated, but by coming onto a zoom call that is run by our clinicians, They get to get that live interactive experience every day.

That's been proved very popular, very powerful for healing. I think we've now got an AI version of me, so people have 24-hour access to all my knowledge and all the things that can support them in their healing.

That's proved very popular despite some of the drawbacks, obviously, of AI. Finally, just this overall compassionate approach. There are other programs out there that are very regimented and say, this is what you have to do.

Do this one thing again and again. Of course, each person is unique and we find through a multiple of different tools, there were certain tools that are more effective than others for different types of clients, depending on their personality and what's going on in their brains.

And therefore we have a more compassionate and comprehensive approach, I think, and that's what we really specialise in. You mentioned fibromyalgia and the improvement.

I had a patient, fibro-mialgia patient who was referred to us and She had a few pathogenic strains of bacteria, because again, biased, my focus is microbial medicine or the interplay of microbiome in every biological system.

We do comprehensive stool analysis where there are a lot of chronically ill patients. Certainly that's warranted and

every time it's kind of indicative of where we need to become hypertargeted in treatment.

Needless to say, she had few pathogens strains that were 900 times higher. the healthy norm. So right away we saw what was her Achilles heel, right? We cleaned that up and overnight she became human again.

I mean, she walked into our office and… She had requested, you know, turn down the music, dim the lights, shut off everything. Like she was, like she's a walking zombie.

Since once we engaged in that protocol, in the treatment plan, I mean, day in, and day out, she started feeling improvement. The last component, interestingly, is kind of rewiring of the brain, which is something that I want to start integrating.

How does that look in practice? So say we know there's this kind a dysautonomic state, they're stuck in a fight or flight. What are some of the tools, tactics, like someone like that, where do you start or mold, which is becoming so much more prevalent or at the minimum, the reactivity to mold is certainly becoming more problem, especially with.

Maybe in conjunction with a lot of these non-native VMFs or co-infections. What does step one look like? Is it across the board? It's a different reach individual?

is it different for the disease state as well? Or just like, I guess maybe those two particular examples, but how do we start? Cool. So firstly, Daniel, I wanted to mention that when the brain is in this dysregulated state, as you've correctly said, there are so many cycles that are going on and we can hit that cycle at different points.

So of course, one important cycle is the Brain-Gut axis, and therefore the brains having a massive impact on the gut in terms of the inflammation, the tightening of gut, emergency response, inflammation.

And that's going to have a knock on effect on digestion, on enzymes, pathogens, mycotoxins, etc. And as they build up, they also then contribute to further symptoms.

So therefore, ours is a both and approach. We work with a lot of functional medicine doctors, integrative doctors and nutritionists where we say, let's have a comprehensive integritive approach where, we take care of the brain stuff, you guys take of very important kind of physiological challenges that a patient faces.

And actually, when we work together, We have three to four times better outcomes. That's what we've seen in a long COVID study. Certainly it's a very integritve approach and We also have some general advice on diet, nutrition, and supplements that generally are good for the population or certainly people with inflammatory conditions.

And when it comes to how a patient starts, there are some people who believe that actually with brain retraining, if people do the brain training first, the interventions from a functional doctor or a nutritionist can be even more powerful because the body is now ready to receive something new and different.

But when its in a hyper-disregulated state, it also sometimes is very sensitive to new interventions. So generally a patient would download our app and program, so it can be done online or it could be through the app.

And the first thing they will do is learn about their condition. So we talk about the hypothesis and what causes these types of illness, but in very much in layman's terms.

Then once they've learned that, a lot of our patients find that just through that understanding and that explanation, they start feeling better because they now have a logical reason for why they're experiencing what they are experiencing.

And then we move on to the first part, which is preparing the somatic type approaches, training a person to recognize those very unconscious protective responses in response to symptoms in their body.

And so we engage with some somatics techniques, and then as I've mentioned, we'd move onto more kind of structural cognitive type techniques, although it's still brain retraining.

It's not the CBT or anything like that. And that's where a patient learns a seven-step process that we've developed that as they step through these physical steps, almost like, I kind of put it, it almost representing two neurons in the brain, two neurological reactions, and how they want to switch from one neurological reaction to a safety neurological.

So they do that repeatedly and train themselves on recognizing when the brand is about to go in an emergency response and they can change that and that might sound very strange because often a talk that actually the autonomic nervous system is automatic.

The immune system, it's automatic, we don't have conscious intervention in the immune systems. Actually, there are so many studies now showing that we do and of course you could argue the placebo effect at some level is an unconscious intervention that's stimulated by a psychological response that can impact on our immunity and on the outcomes of our various illnesses.

So we've kind of bottled that. We've understood how does the brain actually influence our immune system and how can that be taught? How can it be trained?

And once people go through those protocols, that's when they find it takes a number of months, it can take weeks sometimes, and they can start seeing the healing.

They can stop seeing recoveries and getting their lives back. And then the final stage is how do we integrate them back into normal life? Because they've obviously had to pace themselves.

When they go back to normal, like a job or whatever, once again, the nervous system is sensitive, so it starts overreacting. And we train a patient to recognize how they can go back into normal life, but not have those overreactions.

So that's the third step is teaching them those skills and those techniques. And it's all taught online through weekly webinars, daily live sessions on Zoom, a very loving and supportive community that we have and obviously the AI and a whole infrastructure.

The, our state will influence our immune system.

The Gupta Program and Its Three Rs

Interestingly, so I did, went to the Wim Hof training years ago and power of breath work alone and how you can influence immune function naturally to, to fight off infection.

This was remarkable. Some of the stuff that WIM did in the hospital setting in The Netherlands to be able to kind of starve off E. coli and flu like symptoms just from breathwork alone.

So certainly there's a huge overlap between immune integration, breath mindset. So you said there's webinars, it's calls. How does one, is it different from practitioners to patients?

Meaning like, this is something that practitioners can learn and then teach, or this more that they log onto your platform? Is it an app or is just the web-based webinars that follow?

And what is, give me an example maybe, so if patients or anyone in the community Wanted to start, what is the, is it a module that incorporates breath work?

Is it, um, you know, sometimes people listen to binaural beats, the meditation, all that. What is, it just kind of this guided. Are they, are you teaching someone to rethink, to find safety in their own experience?

What does, like give an example, I guess, concretely, if you can, What someone would expect from one of these sessions? Yes, so it's all of the above that you've mentioned.

So we like to give people a kind of menu and then you pick the things that are going to be most appropriate for the thing that's you're actually going put into practice.

Because I always say, we're not just in the industry of healthcare, were in industry habit formation. If people aren't getting into good healthy habits, it doesn't matter what healthcare you administer because eventually they will get ill again.

It's about what can someone practically integrate into their lives. And so when people attend these weekly webinars and they watch the videos, the first thing that they'll realize is that it is about regularity.

So what practices can they do each day that fit into their lifestyle? So certainly the breath work and meditation is the foundational piece. And if people can't meditate, we have other ways that people could relax the nervous system.

That daily breathwork and mediation is supremely important because what that does is we believe it's the quickest and easiest way to regulate the system longer term.

That's getting the ground ready for the rewiring, as it were. And then we give them a technique that they practice three to five times a day in one sitting.

So they do three, five rounds of this special seven step process. Then throughout the day, whenever they notice their brain is about to react, we them the knowledge of the triggers and then they create the seven-step process, which involves self-coaching, self awareness, pattern interrupts, visualisation and imagination as well.

So it's a number of different ingredients put into a specific recipe that mimics how we naturally create new neural pathways in the brain. And so people realize it's about the repetition of those tools and techniques daily that really makes the impact.

It's not about theory. We can have all the theory, but it is about practical implementation of these protocols. And in terms of practitioners, they can support their clients going through it.

But we have a specialized training program that if people want to become a qualified group to program coach, then they go through that program, learn how to be a coach and then support patients directly with these conditions.

But for the moment, what we encourage practitioners to do is just be fully aware of our program and just support patients and encourage patients to continue on.

Because the biggest critical factor in healing is actually commitment. When we're retraining the brain, it is literally like learning something new. Let's say something that we've all done, or most of us have done is learning to drive a car.

From the very first lesson or the second lesson, You thought, well, I'm trying to train my brain to use a steering wheel and use the gear stick and press the gas and the brake and I just can't seem to get the hang of it.

Forget it, right? That wouldn't make sense. We know that if we keep increasing the number of lessons we have, eventually we'll train our brain. And so it is with your rewiring that eventually your brain will get the message, but we don't know how many lessons it will take for it to become an automated and automatic response.

Like learning to play a musical instrument, you wouldn't try to learn it on a couple of lessons and give up. You keep going, keep doing until you learn how to pay that particular song.

And that is pretty much what we're doing here. We're creating new neural pathways. In fact, we letting go of old

neural, pathways, old ways of doing things and creating stronger neural.

Pathways that say this is now the truth about my being and about. So you're rewiring, which I understand in terms of the, let's go back to the function, the fibromyalgia patients, someone who is so kind of depleted.

Right. Challenge certainly creates change, but is it too challenging at that point? How slow does one start or is there the different levels and kind of pertaining to where you are in your health journey or recovery?

Definitely. So we have different level depending on where someone is and a person graduates from one level to the next when they're ready. It's definitely self-paced and our level one is this regulation of the nervous system.

And that is where the breath work for meditation, the relaxation exercises, and even some of the somatic techniques become very important. So we encourage patients that if they find that they are hyper aroused continuously, they found it very difficult to relax, then they stay at level one for as long as it takes for them to feel more regulated.

That is our definitely core foundational step. Once they graduate from that, we don't expect from level one to suddenly someone to be a Zen monk and be completely relaxed all of the time.

Of course not. But certainly that they are feeling a little more themselves. They have to have periods where they feel a bit more relaxed and they're learning how to regulate themselves, at least there's some improvement.

Not complete relaxation, but there is improvement in the regulation. And that second step is obviously, as we said, re-training the brain. So once they've learned that at their own pace, they can graduate and begin to learn then these brain retraining techniques specifically about recognizing these very subtle patterns on the periphery of consciousness.

And then they learn to retrain using the seven step process. that seven step process, there's a big twister board they put on the floor. Because we notice with patients that if they try to use, to paraphrase Einstein, the same thinking to solve a problem that created the problem, it can be very tricky because we're too much in it.

So we need to get out of our own bodies and imagine that we are retraining at a physiological level. So it's that somatic aspect of getting our bodies involved in the physical aspects of this.

That's where we have this big twister ball that people go through. The way the patients experience would be is they would attending those weekly webinars to understand how to use these techniques, as well as the streaming videos, and then putting things into practice.

Then they have some what we call fun work, so that's the activities they can do between sessions, then they come back on to our webinars, to learn more.

And a very important part of our webinars is community, so we also have breakout rooms where people get to discuss their challenges, how they're improving, and that creates a sense of camaraderie and community within our webinar as well.

So someone who's severely affected, let's say they've got very extreme fibromyalgia, extreme pain, we would always start them off with gentle breathwork, meditation and somatic techniques until they begin to start feeling better.

And in extreme cases, we've had people that for six months, that's all they've done, because that is all that they have been able to manage. And we have treated people who have bed bound, who've been wheelchair bound.

Who've pretty much been given up on by the medical profession. We've able heal them and get them well. especially with FND, so functional neurological disorder, where we've had patients who've been literally paralyzed, who have been able to gradually step by step retrain their bodies out of these defensive responses.

In terms of what you were going through with the myalgic encephalomyelitis or the chronic fatigue syndrome, was that the only thing you we're doing?

How Brain Retraining Works in Practice

It was just brain rewiring or did you integrate any sort of nutraceuticals or any other lifestyle modifications? particular time, it was mainly the brain retraining that I was doing.

I certainly was eating a bad diet at university, like many of us do. My favorite, I don't know if it's in the US, do you have pot noodles? Do you something called pot noodle?

It sounds like instant ramen. Yes, exactly. They are garbage. I was doing that on toast. My lunch would involve instant ramen noodles full of chemicals, putting them on a toast, and that was for me a lunch.

Certainly, as I healing and recovering, I eating a better diet, but there was no specific nutraceuticals or specific supplements that I would necessarily take.

And I focused on the brain retraining. And I do believe that, I think once again, it's an integrated process to get the body back to health. And if the buddy feels it is vulnerable, It will need more support nutritionally and with supplements and food in order to be able to handle its environment in this threat state.

But I also believe the bodies quite resilient. So if I look at people I know, and Daniel, we all know people like this, they eat bad diets, They drink, they smoke, They are not doing anything that we would probably encourage them to do.

And yet they seem to be living life completely normally, they seemed to have plenty of energy. They seem pretty good in, you know, dealing with the ups and downs of life and happy-go-lucky.

And I always wonder, if I behave like that, or what if my patients behave that way? They would have literally no energy whatsoever. So what is going on there?

And I do believe that our system is quite resilient, but there are emotional dangers the body experiences, physiological dangers, dietary dangers chemical dangers obviously viruses and bacteria, which all impact on the system.

But if the, system has trained itself to be more resilient to, be stronger, then it can have any incredible effect. And therefore that's why we know the number one factor for all cause mortality is not smoking or drinking.

It's loneliness, stress, anxiety, depression. These actually can double the chances of us getting an inflammatory disease. So our state, the physiology of our nervous and immune systems at their resting state and their normal default state is incredibly impactful on then the chances of getting us, of us getting an illness and then how our bodies can handle the kind of very bad lifestyle.

In terms of the breath work alone, can you provide an example? Is it like, you know, the Buteyko method or Fox breathing or what would one expect in one of these webinars or sessions?

What, what kind breathwork are you engaging in? Certainly it's probably not like I did once upon a time, similar to Kundalini or polytropic breath work with Wim Hof, but for the rewiring purpose and kind of relaxation, I guess, if you're trying to teach them the nervous system or retrain that things are okay.

What is a sample of that? We use a number of different breathwork type exercises. So for instance, there's deep diaphragmatic breathing. We believe that a lot of people with these conditions, they're shallow breathing from up here.

Because if the brain believes you are in danger, why would it want you to relax and be happy? Why would it want

you to sleep? Which is why so many circadian rhythms are upset as a result of these illnesses.

You're in a threat situation, why would you be able to relax? Your brain doesn't want to. So training the diaphragm to breathe more from the belly increases our oxygenation and actually signals and cues via the vagus nerve back to the brain that we are actually safe or we certainly safer.

So we emphasize deep diaphragmatic breathing as one technique and then also alternate nostril breathing. Out of all the different breathing techniques, there's a lot of research on the alternate nostril, breathing, and we find that a very, very powerful technique for many of our clients.

And we're now introducing another 20 different breathing techniques, not because we want to overwhelm people, but because, once again, we wants to give people variety.

And we believe that a lot of these breathing technique are doing something very similar, which is regulating our breathing to signal back to the brain that we are safe.

For entertainment purposes, I want say entertainment as a bit of a facetious word, in terms of entertaining the intellect, having variety makes the patient more likely to stick to it because they think, oh, this is new, let me try this now, or let we try that.

But ultimately, these breeding techniques are all doing a similar thing which is signaling back safety. And I think with those different types of breathing techniques combined with meditation afterwards.

So this is a very important part of regulation. Many of us are doing these things in isolation, which we either do some breath work or we do yoga or meditation.

But actually these ancient techniques that generally come from the Vedic tradition from India and the East, they were always never meant to be done in isolated.

There was this particular flow which was from outer physiology, so that would be physical exercise or yoga. Actually, the first step would always be physical exercises.

The next step will be yoga, that was the meditation for the body. Next step is breath work and then the next would be meditation. When that sequence is followed, what we then know is that the depth of the healing that occurs is far more powerful than doing any one of those things in isolation.

So we encourage our patients to, if they can't do physical exercise, that's fine. If they don't have the resources, but at the very least to do the breath work, then keeping the eyes closed, go straight into a 20 minute meditation.

And we call that the half an hour of power as it were. We know that combining those two things has a far more powerful physiological effect. And so therefore that's those types of techniques that we used.

And we're now about to launch another 20 different breathwork techniques. We're definitely hardwired for novelty. So I certainly agree there. In terms of the meditation, is it guided or are you guys providing someone speaking?

Is it a guided listening or is just trying to quiet the mind, receive thought, let thought release? What does this style look like? It's definitely guided.

Yes. Because when someone has a very anxious, busy mind. What we know is that for them, at the beginner's stage, it's very important to be guided, because if not, they can become overwhelmed by their own thoughts coming into their mind.

So we do guide people through it, and then over time, patients then are able to meditate more on their. And there are some patients who actually, when they meditate, that become more anxious.

This is because of a very interesting effect. We call it the pressure cooker effect, so when we have emotions and when have fear, as an example, These emotions, if they are not resolved, they build up in this pressure cooker of our mind and they're never processed or released.

So they built up the energy centers of the body, especially around the chest and the stomach area, which is why a lot of patients with anxiety they'll talk about heaviness in the chair, a tightness in their stomach, knots in stomach.

That's where the energies unfortunately then starts coagulating. And so when we meditate, it's like a pressure valve on the top of pressure cook releasing the steam.

When we first do that, we can meditate and be overwhelmed with a number of thoughts, the amount of steam that's trying to release itself. And therefore, if people find that very disconcerting, and we have other guided visualizations, which are not meditations, they can follow those and that is a more gentle introduction to these techniques.

But then over time, what we find is that patients then eventually can come back to the meditation and they could meditate effectively. And meditation is its own training of the brain, because what it's doing is, we know it reduces the reactivity of amygdala, it strengthens the prefrontal cortex, It can strengthen the thalamus, increase the size of hippocampus.

It has so many powerful effects. And what's happening there is the, brain is learning to strengthen, the aspects that indicate safety and to reduce the activity that indicates danger.

So there's actually, even the meditation as a form of brain retraining. and over time, that brain's learning, to be more reflective versus more reactive, and that's an important component of the brain retraining.

And we notice if people just do the brainy training without the breath work and meditation, then the Brainy Training itself is not as effective because once again, you're throwing someone out of a frying pan into the fire, into another state of overthinking, over cognition versus actually learning to regulate oneself and calm Yeah, the calming, self-regulation, internal, external.

You had said something early on, which certainly resonated. When I started the practice almost 10 years ago, people would come in with either sleep issues or gut issues, or both, and they were often intertwined.

And so when you said, you know, in terms of sleep, that body is not relaxed, calmer in a state where it's not, um, it sees danger present, right? So HRV is impacted, deep sleep is impact.

It's almost like starving for oxygen as well, then cortisol increases, weight sets up. The body wants to find a healthy homeostasis, but unfortunately we get stuck and we got in the way.

Yeah. And sometimes it's obviously this infectious state. So it was interesting when you had mentioned, you know, often enough the effect would be amplified or better if you worked on that, the upper part for which is kind of reframing, retraining the brain, which this is something I took away from my mentor almost a decade ago is.

almost everyone that comes into the door because 9 out of 10 patients are stuck in this cortisol resistant state, which is obviously impacting the brain and certainly sleep and detoxification and then the ability to ward off infection or some of these kind of chronic disease states.

So we would very, very effectively engage in a stress sleep reset to reset the circadian biology and teach the body that it is safe. We can now heal. Right.

But we were using that with nutraceuticals and therapeutic dosing specifically to help with promotes healthy sleep and balance the autonomic nervous system, which that nine out of 10 patients that came to us, that's how they kind of always started.

And we found that that. amplify the fact when we begin to go over or go after the infection. And so when you said, you know, order of operations or stacking, that's what we're doing now.

This is certainly a missing link that I'm eager to definitely get on board with. In terms of commencing, what is the cost? Is it a monthly? is there an app?

How does one start? Yes. So it is a yearly cost. It's a one year upfront cost, which is $500 or $499 for a year subscription.

Breathwork, Meditation, and Nervous System Regulation

And that gives you access to all of the content. So the weekly webinars, the daily sessions, et cetera. That comes with a one-year money back guarantee.

If patients use it and they have no improvement, they can return, program, no questions asked, get their money. People have It's very low risk for people and we really encourage people to try this out.

And included within that, as I'd mentioned, is those daily sessions. So we probably have, what, 200 daily session a year, two hundred, 250. Those are really the game changer because we have different clinicians presenting every day.

Once again, you say the novelty factor of someone new every, day keeps the brain engaged, keeps you engaged with these techniques and implementing them each day, And you'd mentioned the idea is around sleep and regulation.

So I don't know if you've seen that latest fibromyalgia study that we did, but there was a 54% reduction in fibromalgia scores compared to the control group, But a 63% in sleep disruption, which was huge shift.

And so I think that that's really telling, what it's telling us is that When the brain is retrained, a lot of these secondary issues naturally resolve themselves.

And don't get me wrong, I'm totally a supporter of also looking at nutraceuticals and supplements that can also improve sleep. As you say, it can be done that way around as well, where that naturally then makes someone feel better.

So they feel like, ah, am on the positive trajectory towards health because now my sleep is improved. And that positive virtuous cycle is a form of brain retraining as well, where then people feel they're on the road to recovery.

So there's, they are not in a danger response and that gets them towards healing as. Well, so I think once again, it's hitting it from all different directions at the same time that creates that cumulative effect that trains brain.

And I. In our studies, and now we've done seven clinical studies. I The summary that we found is that generally, Paul, in a clinical study, which is different to obviously people buying it for themselves, where the improvement rates are higher, when we did it on our own patients, two thirds of our patients reached a full recovery within a year and 92% of patients improved.

When we've generally looked at our independent clinical studies, and when I say our, these are independent universities and research organizations doing it, we generally found that with mode conditions, condition within three months, and within six months there can be a two-thirds improvement in the illness.

So as an example, we're in a middle of a mold study right now that was actually kicked off by Dr. Neil Nathan and Dr Joel Krista, who we were partnering with on this study.

And that mold-study, hot off the press, the results are showing that after three-months, there was a 34% reduction in mold in terms of patient experience.

And then after six months, it was a halving of mould, more than a halfing of mold. We see this pattern quite a lot in those types of clinical studies.

we've just done a study on long COVID and what that has found, once again, hot off the press, is not only did subjective measures improve, but objective measures improved as well.

So we saw a harving reflection of how inflamed the body is, and we saw a big jump in HRV compared to the control groups. So once again, as we get more objective data, we hope that this encourages clinicians and the mainstream medical profession to take this more seriously as what we see as a very powerful treatment for these unexplained syndromes and these inexplains conditions.

And our ultimate vision is to have large scale studies that eventually the mainstream medical profession can't ignore this because it would be unethical and actually for this to be available on prescription as part of insurance, that would our long-term aim.

And in fact, someone said to us, so that last study that we did on fibromyalgia was comparing Gupta program to progabalin or Lyrica as it's known in the US, which is the primary medication given for fibromyalgia.

And we were six times more effective than pro gablin at reducing symptoms. Someone said, if your treatment was a pill, it would be having tens of millions of dollars being thrown at it right now.

Because it is quite clearly showing massive effect sizes compared to traditional treatments out there. But because you are a program versus a pharmaceutical, It's so difficult to get funding.

So we hope that that shifts and changes and we're able to, get larger scale studies. This is the epitome of the show. Natural medicine, natural nutrients lifestyle medicine.

Retraining, reframing, rewiring. Certainly it's accessible. It's within our reach. I appreciate the depth of what you've gone through to be able to bring this to light.

And obviously now the clinical evidence in terms of efficacy, I'm a hundred percent all in. this is something, can you do this? Can I sit down, you know, with my family and do with kids?

I don't see any reason why not, right? You can just put on one of these things and just all do it together, yeah? Absolutely. We have clinicians generally, so you've seen this, clinicians themselves are some of those burnt out category of people that we see because clinicians, themselves, are so dedicated, their patients, they have a large roster of patients each day.

They don t have it a day off, like a teacher doesn't have day of a clinician often doesn t And often they're quite burnt out. So we encourage clinicians to use it for themselves just to improve their sense of wellbeing, their energy and safety.

Then when they see the results on themselves, they often then prescribe it to their patients. And absolutely the main brain retraining technique, it's agnostic in the sense it doesn't care what you're trying to use it for.

It's just an accelerated program of change. So we've had people use for eating disorders, addictions, OCD, and found it more powerful than any traditional therapies that they've been going through because it's a blueprint for accelerated change in the brain.

The reason it is very powerful for those things is because if we can retrain the brains out of a survival response, which is probably the most difficult response to change in the brain.

You're telling your brain, hey, I know you think we're in danger and you're protecting me, but actually we are not. If you can retrain that, you pretty much retrained anything.

That's why we were so excited to do more studies. We'd love to anorexia or on various things, which are very, very difficult to treat using mainstream psychotherapeutic interventions.

But actually, if we can find the right key to the lock, we could unlock so many different conditions. And that's what I think is exciting aspect of neuroplasticity.

We really believe that neuro plasticity combined with an integrative approach in terms of diets and supplements, combining these two will be the future of healthcare and the most exciting you know, kind of revolution.

I was just with, well, we had Neil Nathan on the podcast already. It was with Jill Christa at a medical conference a few days back. And so we were talking about some of these things too, and especially in terms of mold and prevalence.

and I just had Jill Carnahan on, on me a podcast as well. until we we're discussing how things had become more heightened. So this brain is constantly locked in a fight or flight now frozen state, which then drives eventually pain.

There's this inflammation heightened, so immune dysregulation. Immune system fights with inflammation. Inflammation creates tightness and now we have people raising their hands because they have physical pain in the body.

That's when you go get treated. But this has been occurring for so long. I say our immunity is a diagnosis of seven years. Unfortunately, people are reactive instead of preventative, which this is such an accessible tool that I genuinely look forward to engaging in.

So we'll have to do a round two somewhere between six to 12 months later because we're currently living in mold. Again, N of 1 is very, very relevant to what's happening in my existence and equally for my patients, so I empathize on a very high level.

I'm on an unrelenting mission to find anything that moves HRV very favorably, and very quickly. And something within reach is literally within us. So that's diaphragmatic breathing.

We do that with all of our patients. In case what that means, because if you look at a child and an infant, they do it automatically. At some point as we age, it's this vertical breath, which activates kind of the barrel receptors, the cortisol receptors that trigger this fight or flight sympathetic dominant state.

And so our goal is to kind retrain that first and foremost. The second is when you mentioned the nasal breathing, Is it just kind of like inhale through one from the diaphragm and then exhale slowly?

That's right. There's a specific way of doing it. And it's, um, uh, I'll definitely send you all the videos on this, but essentially what we do is we have the two fingers, so middle finger and ring finger, sorry, finger in four finger hovering, just touching the point between the eyebrows.

and Then our thumb closes our right nostril and our ring, and small finger closes, our left nostrils. We start with the left, nostrile, we breathe in from left.

On the diaphragm, hold the breath for a period that feels comfortable and then breathe out through the right nostril. And then we breathe in through right the nostrill and use our thumb to close our right.

Nostril, and the we breath out though the left nostrile. We breath in though left the nostriole. Hold for couple of seconds, swap, then breath through your right nstriol.

Yeah, and then we relax. And if people do that for just a few minutes, the research shows that there's a balance of the left and right hemispheres in terms of, we notice more integration, more balance.

We notice then more parasympathetic activity. So that technique is an ancient yogic technique. That alternate

nostril breathing is very, very powerful at bringing stillness and serenity to our synchronic program.

Do you see shiftable improvements immediately or anything else you're stacking with that potentially as well? Like I know these HRV devices, right? Which we can track through some of this tech.

Anything that you are, I understand the foundation of your work, which is essential to all of us, but anything that find is to enhance that. Yeah, so we believe that healing happens on five different levels.

So when people need to heal in the longer term, if we can work on all five levels, we will see a longer-term healing. And this is where it gets a little woo-woo.

Of course, at the physiological level, there are nutraceuticals. There are pharmaceuticals that can relax the nervous system. Those can be very important.

Things like magnesium, things like anti-inflammatories that are very natural to the system can very, very But then we also want to heal at the emotional level.

And so therefore someone's emotional states, their relationships, they're stresses in life. How do we support them in handling those? And that's where breath work and meditation is very powerful.

Then at a mental level, the cognitive level how are people responding to negative thoughts, rumination, challenges in their lives? So understanding their cognitive levels and how they can calm themselves from repetitive negative thought, which is once again the seven step process.

Clinical Results, Accessibility, and Getting Started

The somatic techniques helps with the emotion aspects. Then there's a spiritual aspect, which is how do they relate to themselves? How do their relate other people?

how did they relates to life? If they see themselves as this lonely person floating on this rock in the vast emptiness of space, that itself can create a tightness in a nervous system.

So having a philosophy on life, not that we direct people as to what that should be, but having philosophy of why we're here. Why is life the way that it is?

Why does bad stuff happen? If we don't have a reflection on that, then we're going to be in this siege mentality and therefore notice that we feel more anxious and in that anxious state as a result.

And then I think another level that look at is then the energetic level. So there's lots of aspects of our energy, which gets stuck as result of being in these different conditions and, therefore, raising our vibrational energy once again through the company we keep, food that eat, all of these things that impact on our So looking at all of those different layers can support healing.

And I think that one of the biggest changes that we see is when someone becomes aware of their own negative thought patterns as a result of that part.

So we use something called parts coaching, which is similar to Richard Schwartz work on internal family systems, but we used it in a slightly different way.

That parts coaching where we recognize these different parts of our personality, some of them being like the overachiever, the overall rescuer, inner critic, approval seeker or people pleaser.

All of these personality traits have an impact on our resting state of horary variability as an effect on ability to handle stress and our resilience comes from these parts about personality.

And when people recognize that, it's such an aha moment that I've been thinking that stress has been this external thing that impacts on me and I have no control over.

But I realized that I've been projecting my own traits onto the world around me and seeing the word in a more stressful way than it actually is, not seeing it objectively.

And when people recognize these traits and these personality styles, then what happens is it opens up a whole new ability to self-regulate no matter what is happening in their environment.

And you mentioned about the American culture, the overachievement, and the stress. I think this is such an important aspect where it's recognizing that we've grown up in a world of conditional love and a conditional approval.

You're only good enough if you are succeeding at school. If you have a high status job. And when we are in that kind of environment, it causes a background level of stress continuously in our nervous system, even once we have got a chronic illness.

actually gets work as a result of a chronic illness. But then social media and screens are magnifying the comparison effect to the point at which people's nervous systems are so jangled that we're all on the edge of burnout.

So I noticed time and time again, I don't know if you see this Daniel, that whether it be friends, whether be clients, colleagues, everyone's really living this life on edge burnout because they're never giving their nervous system time to regulate.

because the moment we have a difficult emotion or the moments that we had a spare moment, we are going back onto screens and social media as thinking that's a way of self-regulating or thinking it's the way relaxing, but actually that is re-stimulating our nervous system.

If there is a pandemic of dysregulation that's occurring as a result of social media and screens, and it's really all tragedy for society. But that is a whole other podcast that we could do.

Coming back to the point I'm trying to make, it is multifactorial approach to how we regulate our nervous system. The core of it, is practice, cognitive shifts, obviously the pharmaceutical and nutraceuticals, then lifestyle changes, as well as the spiritual aspect of how I was thinking the same thing in terms of a whole nother podcast, that dysregulation really leads to dysfunction, which then leads disease.

And we don't ever have the, we, don' give us the time to heal. The body needs that time, to recenter, rewire, refire, and certainly find that healthy nervous system shift.

and I find all our patients are dominant, they're stuck in this kind of. TH2, TH17, pro-inflammatory, immune system dysregulation, again, upregulates inflammation.

Now we have nervous system dysfunction, dysregation, disease. And I like what you had said before in terms of the physical activity. If someone doesn't have the resources, to me, as someone, I'm not trying to undermine what You had stated, but someone should always have resources with our wheelchair-bound patients.

All we're doing is pulsing the muscle. We're asking them to turn on their quad muscle, their calf muscle All we want to do is fire. And if they lost that input, well, when we're doing it with a tense unit, with electrical stimulation, we need that movement as medicine.

You don't use it, you lose it obviously. Then you kind of transition that into the yoga practice and then the breath work and the meditation. The projecting is interesting because that's what I was thinking we could do.

Even a whole other podcast on that alone is we don' realize how sometimes we are projecting in the environment

that conditions us. We all have What I say is we were like horses with blinders.

We're just kind of walking in sometimes existing and not recognizing the periphery or some of the propaganda that we're fed or not fed, the nutrients that take in or don't take, both from nutrition or just from information or lack of information, or where kind our mind goes and how we are configured.

since birth or preconception and transgenerational how things are passed on, especially the microbiome. So yes, it's multifaceted. Certainly, definitely interesting.

I am 100% all in to give this a try. This is something that I know that would benefit my entire patient population, certainly myself, family included.

Now, I have two questions left, because we're approaching time, but one is often enough you hear, and this feeds into this terrible cycle where we are constantly on the go.

We don't give ourselves enough time. But if someone's complaining, yeah. 30 minutes of meditation, that's crazy. I can't even find five, right? The breath work alone, it would be a chore enough, which again, to me that simple enough.

If someone has like a morning routine, whether they're doing it in a sauna, often now this cold plunge or whatever, I'm pretty sure that could stack probably well in the sauna.

That's something I engage in in the morning. I don't see why not, you tell me. In terms of what is kind of that low, I dislike even asking that, but it's like, what does the biggest amount you can get with kind the lowest effort, right?

What is the kind lowest. biggest reward with starting kind of with the most narrow window if someone is time-conscious. And certainly if we're traveling, we could probably do it on a plane, on train, or on the bus.

If we are driving, hopefully with self-drivers with cars, soon enough we can just do on our way to work. I don't know if that's the right environment though, because it's still stress.

We're moving, the brain is never kind disengaging. But is there like a little start with just five minutes a day and build that and green that new habit?

Definitely. Start with something. Absolutely. And if it's only five minutes, as we know from like the book, Atomic Habits by James Clear, you know, it starting with just even two minutes.

Five minutes as long as it beginning, You'll start seeing the benefits and want to continue. So we have a new project that's launching. I don't know where by the time you have this podcast release, but we're launching this new product called Just 10. and it feels great in 10 minutes which is this idea that micro-practices can be just as effective as a long-term exercise or meditation.

Just ten minutes can't be good enough to regulate our nervous system. So these are 10-minute micro-practices that happen 24 hours a day on Zoom. So you're doing it in community with others.

On the hour is 10 minutes of physical activity, so that could be yoga, physical exercise, cardio, strength training. Then 10 past the hours is ten minutes a breath work.

20 past hours, 10 minute of meditation, which you can stay on for longer. And 10 to the, hour's 10, minutes, of journaling for self-reflection. That is going on 24-hours a, day live on zoom.

It's called Just 10 and it's on an app. And that is our attempt to really give back to society and say, just do something. Do one thing for 10 minutes a day.

Just commit to yourself for the rest of your life. There's no point saying 21 days or 66 days is a regular habit. It's

just for ten minutes today, curing something, it's only 1% of you day curating that for your self-care and your wellbeing.

So that's something that we're launching to once again, give people easy, frictionless access to something fresh every day that they can do on their own.

And yes, so if people are finding it difficult to start, what should I do? We'd love for them to just jump on, even if it's just for a few minutes, jump a Zoom call.

Nothing you have to do is jump. We'll take care of you. Will give you the best access to science-backed resources that enable you to feel good about something.

And if not, it's just really recognizing that just a few minutes, start with that. That's it. You can do it today at a minimum. I love it when you work up, you can grain that habit and results certainly will follow.

This has been absolutely wonderful. I genuinely appreciate your time. More equally important, I appreciate the work that what you've been able to achieve.

And obviously I say this all the time, pain drives purpose. You're transforming the world, which I applaud. Where can people find you? Obviously the program, where can they purchase it?

How do they start yesterday? Sure. So they can come to our website, it's guptaprogram.com and there they watch lots of free videos. We've got lots patients and coaches think is very, very reasonable for the amount of content that we give and amount resources that give.

Cause we deliberately kept the costs low because we know people with chronic illness often haven't been working for many years and find it difficult. So it's a very reasonably priced program and it comes with that one year money back guarantee.

And you can go to app store or play store and just download, just search Gupta program, download the free app and get retraining straight Last question I end a great episode with is if you could have one superpower, what would it be?

If I could. One superpower. It would be to help people recognize their patterns. So this is maybe not a superpower for me, but a super power for everybody, which is when we suddenly go into that state of self-awareness, I think that is so, so powerful.

People can just in that moment be self aware and say, ah, that's why I'm doing what I am doing. And that type of superpower, I think, is something that we should have.

That's interesting, right? Because it's difficult to break free from our own shackles if we don't recognize. Again, my philosophy, as we're all hoarse with blinders, it is difficult assess our blind spots.

It's very difficult for us to step out of our skin and evaluate the decisions that make, the intention or lack of intention within our choices. that are sometimes either hurting us or healing us.

And so I appreciate that level of pattern recognition. So that's a very elegant answer. Again, thank you so much for your time. I encourage everyone to check out your work and certainly this is something that I'm going to engage with.

Definitely share this with all my patients. I appreciate again, the depth of what you've been able to achieve and to help patients heal. Again, I always say is my goal is to have someone heal faster and safer.

And this feels like it's both of it. So certainly this falls within that paradigm. Thank you again. I look forward to doing a round two to evaluate the progress in the new year.

Until then, for everyone tuning in, I hope you guys enjoyed this as much as I have. Please like, review, subscribe. Share this with someone who you think can benefit.

The message is definitely foundational. We have the power to heal. It is within us. Aisha Gupta, you are bringing this out of all of us, so thank you, again, and until next time, everyone, stay healthy, Thank you for tuning in to the TBD Fit Podcast on Dr.

Talks, where we unpack all things health and longevity. If you enjoy the show, like, review, and subscribe. This allows us to have a greater reach and help others on their health & wellness journey.