Introduction and Kirtan Kriya Study

study that I did in Dementia Kyrgyz 20 years ago, the first one, Kirtankriya, for stress, where we discovered that a 12-minute yogic meditation, chanting meditation for 12 minutes a day for eight weeks, completely rewired the brain, improved mental health, resilience, cognition, which was unexpected, and also reversed aging.

I actually went to my yoga teachers then and I said, now I can prove that yogis don't get old. And they said now they do. So a warm welcome to the Evolution of Medicine podcast for the first time, Dr.

Helen Lubretzky. Welcome, doctor. Thank you so much for having me here. I'm really excited to connect with you and to be able to bring your message to this platform.

Over the years, we've talked a lot about integrated mental health. We've talk about brain health, talking about Alzheimer's and reversing cognitive decline.

And your career is unique in that you've straddled all of these different areas. So how does one take a journey and a path towards the journey that you've taken?

Well, with twists and turns at certain points and being willing to go in this unknown path, unlikely path of development, which was Kundalini Yoga for me when I turned 45, all of a sudden I took this turn and it's paying off finally, you know, so it It's been a 20-year journey of discovery, self-discovery and discovery for others of mind-body practices, value for brain health and the concept of resilience and brain-health.

I spent some time there studying that. And now it's all kind of coming together in the same venue. Most importantly, the world is now responding, which was not the case 20 years ago.

Yeah, absolutely. So take us back to those early days when you're sort of making this awareness for yourself, but you are also a professor at UCLA and I'd imagine quite a conservative specialty, right?

Very conservative, interestingly, psychiatry, which should be more malleable because we're paying attention to social factors. It's biological and social, but not so, you know, especially in the ivory tower of academic medicine.

So I did experience some pushback initially. When I decided to study effects of yoga on brain and body, and shortly after I became very successful in developing new paradigms on how do you study the effects yoga, on.

Brain and cognition and mind and mental health and resilience. It's basically applying the best of neuroscience tools. to the study of yoga. It's no different than drugs, for instance, studying effects of drugs and making it comparable.

And in many cases, demonstrating that yoga practice surpasses standard treatments like drug or psychotherapy. Yeah, that's really interesting. And I'm sure once you've experienced it, it's easy to talk about it.

But ultimately, you know, for psychiatrists who haven't experienced, It probably sounds unlikely or otherwise.

From Psychiatry to Integrative Brain Health

So what was some of the, have there been some breakthrough moments where you feel like your colleagues really started to buy into it? Or has that been more recent?

It did take some time, about five years of mostly accumulating scientific evidence, publishing papers, giving presentations, creating this evidence. So also I found myself in studying more than one modality.

It wasn't just yoga, it was also Tai Chi and Qi Gong and meditation and art exposure. all of which had very similar kind of findings. So I basically summarized the field.

I wasn't a crazy, passionate follower of one thing, which is usually the case. And that's why there is a mistrust. In yoga community, when people come together who are practicing different types of yoga, they start arguing very passionately to the war state between them whose yoga is better.

And in my mind, the best yoga is what you practice. If you're practicing it, then it's going to be valuable for you. if you are not practicing, there's no point of arguing about it.

Yeah, I could certainly see that. Well, that's such a great foundation. I know you've written a number of books over time. integrated mental health and so forth.

But your latest book was the thing that really caught my attention and I wanted to go a little bit deeper into that. It's called Living from the Soul, the Neuroscience of Spiritual Awakening.

And, you know, ultimately I would say if I come back to the reason why Gabe and i started the Evolution of Medicine 12 years ago, was because we recognize that something very special occurs in the relationship between the patient and the practitioner, where there's sort of like a potential for an awakening within both parties, but particularly the patients.

And ultimately, I would love to get your views on this because it's unlikely, for a psychiatrist to go into these areas. I'd love your thoughts on what is the neuroscience of spiritual awakening and why is it so relevant today?

So I just want to take a minute to talk about the incredible mission partners that we have here at the Evolution of Medicine that have made this possible.

So first and foremost, a lot of thank. Fullscript and FullscrpT Journeys. Foolscript has been an amazing partner for 10 years. We only pick partners, that can help us achieve our vision and help you achieve your practice vision.

And Fulescript have been incredible partner, for a decade, but their new offering Journies, this is why we called it the evolution of medicine journeys, is allowing practitioners to combine, relationships that they have with the newest technology to sell direct-to-consumer lab testing and use it as a funnel to bring into your practice and it's a game changer for the whole industry.

So go to goevomed.com slash journeys and you can get started on building the journeys for your practices an optimal way into practice. We're going to have some conversations about it.

This is a Game Changer. Next, Jenova. Janova have been fans of the Evolution of Medicine for a long time. We're big fans with them and they now have a lot more specialty testing.

They have lot of more tools and it's a key part of understanding the body ecologically. So go to goeome.com slash Jonova to find out more. Come on over here and I want to show you about the other mission partners.

If you've been following us for a while, you know that these are organizations that we trust, that add a lot of value. Freedom Practice Coaching, I have been supported by them since the beginning.

And so many of the issues that practitioners face in building a successful practice, scaling a success practice come down to having the right support with people who have being there and done that.

Go to goevomed.com slash FPC. Big boost marketing. Uli and his team are the best in the business when it comes to really understanding how to market your functional medicine practice.

Go to goevomed.com slash big boost and see how they can help you. And then what you're going to be hearing a lot about is the formation of clinical networks.

Evidence for Yoga, Meditation, and Resilience

Ultimately, True Neura is our first effort at that, which is to build an integrated clinical network combining independent practices from across the country into a network that can reverse cognitive decline.

And if you go to goevomed.com slash True Neura, you can get a demo. You can see what it means to be part of an integrative clinical networks. That's mentorship, that's software, and that is making it easier for you to get incredible outcomes in a disease state where there are no other options.

So thanks to our mission partners. Let's get back to the content. You know, the premise of the book is that it works for you. It's very beneficial if you decide to know your soul, you know.

Get to Know Your Soul and it stamps. The name of book comes from the meditation that I actually teach in my clinic. And to date, I've taught it to hundreds of people, starting with dementia caregivers in the first Kirtan Kriya study, and then progressing to just in clinic, people who are open to it and the requirement prerequisite for that.

is being open to the existence of soul, not even believing, but being opened to that. And in my clinic, it's about 95% of patients because they come for integrative medicine, integrate of psychology.

So that's something they are seeking. Normally in the US, about 85% percent of people, 80-85, claim that they're either spiritual and or religious. And so that's a substantial, I mean, the likelihood of you getting patients who are spiritual and want you to know about it is very high.

It's higher than in other developed countries. So, except we never ask about. The approach of integrative medicine is where I find comfort. Really, it resonates with me because it perceives a doctor-patient relationship as partnership in healing.

And so it's very much unlike Western medicine. In fact, I stopped my geriatric psychiatric clinic years before and only right before the pandemic I started Integrative Psychiatric Clinic, which is the model I really enjoy practicing where I am partnering, you know, soul to soul, heart to heart, basically.

I'm just assisting. patients on their journey on, their soul evolution journey. And I have the tools, I know the tool, s I'm offering to teach the to the patient.

It's up to them to select them. But once they selected them, to their liking, typically go for joy, if the activities are joyous, the likelihood of them actually doing them is much higher than when I try to impose, which is how Western medicine does things.

You are to do this, that, and the other thing, guess what? Nobody's doing it. If they're enjoying it, if they generated the idea, they selected, I asked for three to five tools and there are two bots.

How to deal with stress, how to improve your sleep, what to for cognition and brain health. Once they selected three to five tools, they have to practice them.

And then when they come back for their appointment, They are reporting how well they're doing and maybe they are practicing one tool and then they expanding to the second tool.

But it's like this journey, you know, back and forth, it is partnership. Yeah. How do you deal with the juxtaposition? And maybe you don't deal because people search for you, but I think on one hand, you have these kind of tools becoming much more popular amongst the general public, right?

So there's that sort of desire for people to go and search out new tools, the growth of meditation, you know, all this area. But on the other side, you have, really, like kind of what I said, the conservative specialty of psychiatry, where it's not that outside of going to integrated medicine for mental health or reading your textbook or training with some of the leaders in this space, The majority of Psychiatry is not really integrating these tools in any meaningful way,

as far as I see.

That's very true. I just gave grand rounds to my own department and they're all psyched about the content, you know? It's kind of unbelievable. And I've been in the same department for almost 30 years and I'm doing my work in that department.

Nobody really knows exactly what I am doing, which works for me. But in end, they are kind-of surprised at the evidence I show they can't argue with. It is well-published.

I'm the leader, a thought leader. I am on these brain health commissions everywhere. It's finally paying off. And what is exciting for me is that study that I did in dementia care, it was 20 years ago, the first one, kirtankriya, for stress, where we discovered that a 12-minute yogic meditation, chanting meditation for 12 minutes a day for eight weeks, completely rewired the brain.

improved mental health, resilience, cognition, which was unexpected, and also reversed aging. I actually went to my yoga teachers then and I said, now I can prove that yogis don't get old.

Spiritual Awakening and the Soul in Clinical Practice

And they said no, they do, you know, because they were in their 60s and they had aches and pains. So, you know, but that's to show that, even in my own department, I'm no, at this point they're listening.

What did help to this promotion is pandemic and the mass disaster du jour. We're constantly bombarded by this cortisol producing mass disasters that nobody can escape.

There's not a safe place on the planet. So the two phenomena that I am an expert in is aging, aging of the population. And, you know, unless we create caregiver robots in 20, 30 years, we're going to lose the number of caregivers because there are no children being born.

You know the birth rates are really down and we just cross past people over 65 are going like this, children under five are doing like there's no caregivers.

It's either we live longer and well, independently and preserve our memory and brain health, or we create robot caregivers who are going to take care of all of us.

That's interesting. We've talked a lot in True NeuroMastermind about this idea of cognitive interdependence, right? We're all inter-dependent on each other for caregiving and support, and actually there's an onus on all us to maintain our own.

cognitive independence because without it, we sort of put a lot of pressure on friends, family, paid resources and other rules. And so, you know, I think that everyone is, is realizing that they don't want to put that pressure.

On each other and that, yeah, it's exciting to see that even though, what we say neurology and psychiatry has not really evolved, there's a of good news in that people are sort getting it taking action and the incidents I believe of cognitive decline on an individual level is falling.

It is true. There are a number of things that are responsible for that. One, the current aging. So, you know, we're living in a very strange time of five generations, generational cohorts living together.

Never happened. Though we have the Second World War silent generation, still alive, mostly dying off. Then baby boomers, then X, millennials, Zs and Alphas living.

They're very different from each other. The most resilient cohort is actually silent generation, second world war. One, there are survivors and two, they experienced a lot of upheaval, a of events in their lives.

So they're more resilient. Followed by, so every subsequent cohort, is less resilient And Gen Z is like resilience at a zero. So something that I teach about that we have to teach our children how to be resilient.

And mind-body therapy is one thing that could teach early in childhood where they learn it as a skill and it's a lifelong skill of dealing with chronic stress and preparing them to deal with adversity, which is abundant on the planet right now.

That's part of prevention, taking a life-long view of it. The second thing is that younger generations are much more proactive about their brain and mental health.

So they want things done. They're aware, they're talking about it. It's no longer as stigmatized as in older days. And although we blame social media for all sorts of damage, the information is abandoned.

You could ask Dr. Google and get an answer to your question, how to deal with this problem. Sometimes it's a wrong question. I mean, the wrong answer.

But, you know, it is up to the parents, for instance, or young children to be aware of this, but also consulting mental health professionals. That's coming, Dr.

Google is here to stay. And AI therapists are being trained how to become less agreeable therapists, which is, being an agree-able therapist is not useful.

So, you know, it's coming here to stay. It's not perfect right now. So it is hard to anticipate. In the process, damage is being done. Like for example, CHAT GPT advises people to commit suicide, but it has been perfected and in the end it will be a combination of things.

The other factor is cardiovascular diseases treated more actively, cardiovascular risk factors. I'm actually working with the American Heart Association quite actively for several years, and they're bored with heart health.

Now they want to own brain health, so they are very gung-ho on brain-health and how to deal with that. At the moment, we're working on a commission of identifying the role of cardiologists in brain health.

And that's a more productive line of intervention, prevention at the cardiologist level. The next level would be primary care physicians. Yeah. Well, that a big, big area.

You know, I've been very interested in that because the vascular system is actually, you know one of the drivers. You know who probably listen to this podcast, you know, they're very familiar with like maybe the gut as the part of the vascular system.

But you got the blood brain barrier, the heart all made out of that same tissue. And so, any strategies that can help heal. that part of the body can be very helpful for brain health and that's the whole body brain, health that I think is, you know, the next generation.

So it makes a lot of sense for the American Heart Association to want to be in on it. And I'm very excited to hear that. You know when we first spoke, when I when, we connected you felt like we were coming into a very special moment and I'd love for you to share your thoughts on that because I agree, I feel like community is sort of preparing for something spectacular but it was something about the way that you described it or the that way you understand it that I would love to you share with our audience.

Right. So, you know, for the past 20 years, I've personally experienced the growth of interest in public, in general public in yoga practitioners, and in spiritual communities.

Initially, it was like 50 people max, 100 people, 200 people. Now it's several thousands at a time on conference calls at the conferences. Really, the pandemic spurred that interest in breathing practices, self-regulation, because we just don't have enough practitioners at any level.

to take care of this many people who are aging and need have needs. So, you know, people are now understanding this and looking for tools of self-regulation to learn.

In my view, breathing practices is like the simplest, less controversial, least controversial. tool to adhere to and also has visible effects. Once you get to coherent breaths of 3-second inhale, 3 second hold, activating vagus nerve, the vagal system, parasympathetic nervous system with blood pressure and heart rate dropping, inflammation lessening, and you feel like you're creating the space not being reactive or in fear, then, you know, that's a more comfortable place to deal with adversity and disasters.

I'll give you an example, I was teaching a breathing, six-hour breathing workshop on January AIDS of 2025, which was LA fires. They like this apocalyptic picture and sirens are everywhere, clouds of fumes and red sun and all the apocalyptic picture.

People are running, evacuation, evacuation. We're breathing for six hours. I can't leave because I'm teaching the workshop. So I am completely stone-cold in the end, very calm.

And I come home and we have to evacuate. My husband is running around. not doing anything. And I just put together a couple of suitcases and we left. But also at this workshop, which was international, we were calmly reporting about what the LA fires are doing.

Not being involved, it was like removed of you from above at what's going on, but also being able to stay calm, collected, centered, and being to make rational decisions.

Yeah, that's really interesting. So do you think there's like, how would you describe the time that we're coming in to the practitioners on the front line that are educated in community that, you know, supporting people and taking new healthy behaviors, whether it be specifically for mental health or, more broadly for building function or complex chronic illness.

Is there something that practitioners need to know about the times that were about to arrive into? Yes. Yes, so that's why I wrote the book exactly for this time for people who are awakening to this bigger awareness of why they're on a planet, who they really are, and who the really is their authentic soul steeped of the outside influences from their families, schools, government, whoever outside of themselves, not knowing where to go for the truth because media is really confusing the flow of information.

and resorting to their own wisdom. For that, they have to go within and look out without, you know, living in a bubble. So, a lot of people have physical manifestation of awakening, and sometimes it's very unpleasant.

And I'm describing my own experiences and my patients. where it's physically very demanding, not something that we've ever dealt with, and people are confused.

Typically go to doctors, doctors have no clue, they diagnose it with neurological, psychiatric illness. People are labeled and they are thrown in the hospital, are given medications, it is actually a spiritual emergence or awakening, spiritual awakening that has this profound manifestation.

Brain Health, Aging, and the Exposome

So the book is for to raise the awareness of those who are awakening and teaching how to take care of the symptoms, but also to teach the tools of how do to move beyond and how create their own reality from their authentic self.

That's what the book is about. What would be the top symptoms that you might see in patients that are in the middle of a spiritual awakening? Oh my God, I actually give a lecture.

There's a whole chapter on it. So, once I became known like this weird da, psychiatrist, no subtle energies. I got referred neurological patients and psychiatric patients with really severe debilitating symptoms of frank psychosis or

many inability to sleep.

My own symptoms were not sleeping for six months, maybe one hour of very superficial sleep and that was disabling and I didn't know how to deal with that.

And it's very common really being over-energized. Popularity of yoga practices can lead to that because Kundalini rising or Kundalin syndrome, overactive chi is something that is a known phenomena.

in bodies who are overdoing it, not properly doing it and don't know when to stop and how to deal with this. So it's quite prominent. It can present as an anxiety, psychosis, mania, depression, spiritual crisis of a sort.

In the end, suicide because people are so unable to do with the symptoms. I've seen patients with, Frank, what looks like a paralysis. or severe pains throughout the body, brain shots, like electric shots through the brain, through body.

Very uncomfortable feelings. Yeah. Well, I'm sure, obviously, if you're seeing patients like that every day, you are seeing it regularly. Is there something about this moment in time that is conducive to the mass spiritual awakening?

Yeah, we're basically what's going on on the planet. Solar activity, Earth activity. The resonance of the Earth is shooting up. And our bodies are really, there is five elements in the body that are, you know, Eastern healing practices.

Debalance, five-elements, same five element in Earth. Whatever is going around the earth, in earth like earthquakes, which we just witnessed humongous 7.2, 7,4 around world, Japan.

Latin America everywhere, and volcanic eruptions also quite a bit, fires and floods in the United States. All of this unsettles and prepares us to explode, basically.

It's a very explosive energy. And because our bodies are of the same nature, they're responsive to this explosive and might explode in that fashion. But also we are pressed by this energetic flow and, you know, a photonic belt we're going through and all of this other phenomena, but also rise in the questioning of the formal government and mainstream medicine ever since pandemic, that drove people to search for other sources, alternative sources of information.

And that also leads to a greater awareness questioning. Some of it is true, some of is false, but just, you know, the overall trend is to trust mainstream anything.

Yeah. Well, that's interesting timing. Well look, I wanted to pivot a little bit into something that I actually heard about through you on LinkedIn. It was the first time I came across it.

I wrote some blogs on it as someone who came to this work through economics and really seeing sort of like the fiscal cliff that we were going to fall off if we kept on going in the same direction.

You know, you were the person that connected me to this new brain health, the sort of Brain Health for Economic Resilience Commission, and ultimately that was on the front page of Nature, really looking at brains as infrastructure.

And I'd love for you to jump into that because the connection between brain health and mental health is fascinating. And I certainly feel that some of the work that's being done in our community right now is at the forefront of actually really understanding how we keep brains healthy.

Some of that might affect dementia and cognitive decline. Some of that will affect mental health and some of it will effect all kinds of other conditions but I'd love to get your perspective on this project and how you see it rolling out and where you the value is for our community to understand it better.

Right, so this is something I've been working on all 20 years and people who worked with me in my lab now are leading some of the other directions. I'm partnering with other organizations, I am a past president, recently past President of American Association.

for geriatric psychiatry. So I've been at this leadership position where I was able to navigate this in that direction, but it's also, you know, other organizations like American Academy of Neurology, ARP, American Heart Association, Us Against Alzheimer's are coming together.

We are introducing, I just held UCLA summit on brain health that brought together really all sorts of specialists across specialties, economists as well, and policymakers in the same room.

Never happens. Also stakeholders like patients and caregivers all together. And that's what we are trying to do. And it's getting the traction finally.

There are actually, psychiatry and neurology never talk to each other, but we'll take care of this really small space over here. You know, we're sharing disorders that have similar genetics, similar predispositions, and similar risk factors.

It's across lifespan. So what we came away with from the Brain Health Summit, where Dan Gashwin, who's like a luminary in neurodevelopment and neurodegenerative condition, said that neurodegeneration is a neuro-developmental disorder.

You can't separate it. So we're trying to unsilo all the specialties to own the entire brain, neuropsychiatry, psychoneurology, whatever, neurosurgery is enhanced.

And pinpoint exposome exposure factors that are risk factors for all of this. And interestingly, of course, and not surprisingly, it's one brain, one life.

You can really divide it in child psychiatry or geriatric psychiaty. It's the result of child psychiatry that is geriatric psychiatric, you know. So we're coming to this understanding.

And to my excitement, everybody's getting on this train that it's brain health across lifespan, starting from conception on. In fact, Ben Gershwin made an argument, he's a geneticist really and knows neurodevelopment really well.

that some of the risks are preconception, you know, like rare genetic mutation that determine size of their brain structures, that determines neurodevelopmental or neurodegenerative disorders.

And to me as a yoga teacher, which I am a certified yoga, teacher that's also very exciting because what was eliminating for me was that practice of conscious conception couple comes together and intends to have this high level soul and they do meditations to invite that high vibrational soul.

And then a mom and me and mom, the entire pregnancy yoga and Mom and Me zero to two years of age, two to five and five to 15 is all this conscious development with teaching of the tools how to become a conscious creator of your life.

So, I got the idea from the yoga actually, but it's now being bought into. So how do you implement it? It would require complete restructuring of how we practice medicine.

The other thing is, like you said, and I came to it in the 90s, that the governments will run out of money. before everybody ages, you know, that there's not enough money or resources to take care of this aging population that is a tsunami that's here, with chronic disease and dementia burden and caregiving and whatever else is involved.

So it's best to prevent anything than trying to treat an aged brain at the age of 80. Absolutely. You mentioned the exposome. What are some of the key exposomes ingredients that you believe are the most critical to tackle for

these range of brain illnesses?

Well, you know, any kind of adversity in utero and early age is a part of modifiable variables, risk factors for dementia that if addressed early could be alleviated.

you know, could be treated. So then exposure to drugs and toxicities and their climate-based toxicity is off the charts. Like after LA fires, concentration of heavy metals in the ground is like exceeding in Los Angeles and also in air.

Brain Health as a Public Health and Economic Priority

Air pollution is another factor for dementia that is also affecting neurodevelopmental disorders across. We're finally able to agree with neuro-development.

This is a point of agreement. that we share all these exposure factors that could, we could start focusing on trying to prevent the results, you know, the gene expression changes over time.

The other thing, they example I usually give, and that would be a conscious attention to your risk factors cultivated in families who are raising children with existing risk factor.

For instance, if we know that the family carries Alzheimer's risk genes like ApoE4, which is also cardiovascular and cholesterol risk, You would not send a son or a daughter with this APOE-4 for which you have to test them early to play football, for instance, because a combination of APE4 carrier and head trauma is detrimental.

First of all, outcomes of head traumas are worse, but also combination would lead to later development of dementia. Yeah. I just saw a statistic today saying they had looked at the brains of historical football players and saw like 97% maybe with the structure of CTE.

So I totally get that. I grew up playing rugby, which is not quite as bad because you don't have the same sort of head-to-head collision. But certainly in the UK, there's been a lot of conversations about motor neurone disease and that kind of thing.

I guess the one thing that I would love to ask is, are you seeing any interest or openness to talk about the iatrogenic side of brain injury, or is that still the third rail of psychiatry?

Well, just, you know, what are the long-term outcomes from children being on psychotropic medication? Well, you know, this is not well-studied, but I'm a geriatric psychiatrist.

I don't know if anybody's studying risks of exposure in children, But I have an example about that. When SSRIs came to life, what was it, 1980s, I would say, it took about 15 to 20 years for the field, and not all of the fields, part of field that was paying attention, to recognize that long-term exposure to SSRIs in older people where you could track it very easily, decreases dopamine production.

It down-regulates dopamine reduction and results in extra-pyramidal side effects like tardio-dyskinesia or Parkinson's disease or apathy, syndrome of apothy, when people just don't care.

And that is because of this long-term effect of SSRIs. And so I started noticing it when practicing in nursing homes when people were agitated, I would put them on SSI and they become basically not respond, very apathetic, not involved, and engaged.

And that's a common, you know, You could observe it and older people, when you prescribe it to older People, it's easier to detect side effects because they're more invisible.

I don't know if anybody, if child psychiatry is conscious enough to study itself, Yeah, well I know there's an area of the reproductive psychiatry which is extremely niche and we've had a lot of content over the years on those sort of

ideas but I do think that that is something that should be looked at more because ultimately you can see that the long-term use of drugs that are designed for short- term use has unknown effects that are probably not, you know, not good for function and physiology.

But I'm glad that there's still some areas that we can work into. Doctor, I just wanted to share, ultimately I feel like I've had kind of a good pulse on the integrative psychiatry world for the last 12 years.

and I'd never come across your work. And then now that I have come cross it, I guess I just want to say that it is heartwarming and very validating to see that someone who I haven't come a cross in my work is doing such exceptional work, not only putting the word out there to individuals through the books and those efforts, but like infecting the UCLA department with these ideas, you know, Department of Psychiatry and having more of an impact at the brain level, at economic level at individual level of the community level.

And so I just wanted to share, my thoughts and appreciation for You know, being on the front lines for all these years and to making a real change, you know in the period of your lifetime.

I really do feel that we're coming into an era where massive transformation is really possible and that there's like hunger and interest in it. And I want to just share my appreciation for being there at the Front End and doing the work and having an impact.

Yes. I'm overjoyed. In fact, when I gave my grand rounds just on Tuesday, I said, you know, it's a rare case when someone, a scientist lives long enough.

And I mean, It's just 20 years of my life, but the timing was right. You know? When I caught this upsurge, and it was in the beginning of it, then now I am seeing the productivity.

The next event we're hosting, by the way, is all the big employers in this state of California are coming to discuss it. And that's a big opportunity.

And everybody's interested because of this AI issue pushing the workforce and also aging of the work force. The conversation is about participating in brain economy as a company, as an industry, but also protecting the workplace.

That's where we get the interest from the governments of entire countries and also some states in the United States, like the state of Texas just passed a bill and it's now law recognizing brain health, establishing Brain Health Institute of state Texas and throwing three billion to establish that.

also state of Philadelphia is interested, California is getting online, but the interest countries of Spain, France and Switzerland and some others are getting involved in producing government regulations for protection of workforce.

I'm giving a testimony twice to the UN commission on human rights about brain health as human right in older adults. So there's our different aspects that bring this brain health as a common language and tend where we could meet and negotiate the terms, you know, and new strategies.

Absolutely. Yeah. That sounds, sounds right on time. Well, that's the next phase. I mean, ultimately in order to get to everyone you need to. You know, be in all these areas, right?

You need to understand the pediatric side because that's setting the foundation for the rest of life. There's opportunities in the employer, you know.

Opportunity to create a spiritual awakening so much so that people wouldn't need, to be on, Lakanomab in their older years, that they would be able to live with healthy brains throughout their life Yeah, this is very validating.

I had a intuitive moment. So, you know, I have never been the guy who had my own illness that drove me towards integrated medicine. And I just, yeah, came to it from an economic point of view and also just sort of an intuitive

point-of-view.

But when my father had cognitive decline that was really from a very clear, obvious expo zone, like in this case, Mold, and I realized that, that I've just had an intuition moment that this you know, really where the future is and you are living at that cross-section.

I'm really grateful to meet you, to connect with you and to hopefully, you now, introduce more people to your book and your work. Thanks so much for being part of the Evolution of Medicine podcast.

Thank you so Well, this is the Evolution of Medicine podcast. I'm your host, James Maskell. We've been with Helen Lavretsky. She's an integrative and geriatric psychiatrist, neuroscientist, professor of psychiatry at UCLA.

And we'll be sharing a little bit more about her in the show notes, how you can get involved with the work and some of the things that we've spoken about today.

Thanks so much for tuning in and we will see you next time. So we are here asking practitioners about their practitioner journeys. The reason why is because Journeys is a new product from Fullscript.

Journeys allows you to set up your own lab offerings as the top of the funnel. Give the patients what they want. They want to know about themselves and it's the easiest way to bring them into your practice.

We have all types of practices from across the country that are building their own unique lab panels for their unique practices, selling them to their community and acting as a great funnel into their practice is a massive innovation.

I think this will accelerate the evolution of medicine. You can go to goevomed.com slash journeys to find out more, set up your own journeys in half an hour and transform the health of your community.

Go get it. So that was the podcast. What an epic session. Thank you so much for tuning in to the Evolution of Medicine podcast, we'll be back again next week.

And thanks so