Introduction to Jim Gordon and Trauma

Well. Hey, everybody. Welcome back. We've got a wonderful, wonderful next segment for you here in the Anxiety and Depression Solutions. We brought on my friend, colleague and mentor, fellow psychiatrist Jim Gordon.

Jim, welcome to Doctor Talks. It's so great to be with you again my friend. Thank you drew. It's always, always good to be with you. We're talking about anxiety and depression and solutions that we can find our everyday lives through self-care.

And Doctor Gordon has really been one of the foundational influences and so many of us in the integrative mental health space, with his work through the Mind Center for Mind Body Medicine.

He's trained so many clinicians, so many of our heroes in this space. So what a treat to have you. And I want to get right into it, Jim, because so many of us, when we think about depression and anxiety, we don't think about trauma.

And so many of us have different types of trauma. Trauma sometimes isn't just, you know, necessarily a violent trauma. So, Jim, can you tell us about the different types of trauma that influence people with depression and anxiety?

Well, you know, the way I look at it, and I think this is an important perspective to take because, I don't I don't really like to become bogged down in distinguishing which is more severe or less severe.

The big the T and the little tears. Yeah. Yeah. I'm not I'm not crazy about big and little T's. What, what I'm more focused on is a perspective which we actually owed to our indigenous ancestors, which is the trauma comes to all human beings.

It's a part of life. We don't you don't get out of life without experiencing trauma of one kind or another, or perhaps many kinds. And I think we have need to move into that way of looking things to sort of move out of that, overly pathological perspective, which we do a lot of research center for mind Body Medicine on the effectiveness of our model of self-care and mutual support, with people who are traumatized.

That's the only time when we're concerned about diagnosing post-traumatic stress disorder. Otherwise, the approach that we that we've developed and I've developed the approach in my book, Transforming Trauma The Path to Hope and Healing.

It's really a way of living. It's a way of dealing with the trauma, the wounds, the injuries, whether they're physical, psychological or emotional, cognitive, social, economic, dealing with all those injuries that are bound to come to us in our lives.

And so that's what I'm really focused on, is saying, okay, whether it's a terribly overwhelming situation, like the death of a child or a spouse or a dear friend, or whether it's it's something that looks less serious in a way, but also has a major effect, like the loss of a job or a divorce.

I've seen very few divorces, although occasionally they trumpet them in some of the tabloids that are purely amicable. They're pretty traumatic, even if there's friendliness in them.

So I think it's more important that we look at, we look at our lives and we understand that the trauma is going to come our way. It's sort of like that reggae song by Jimmy Cliff.

Opposition will come your way, will it will and trauma will come your way. And the crucial thing of what interests me and what I focus on in training people and working with people at the center for Mind Body Medicine, as well as

individually, is how do you deal what what kind of program do we put together to deal with trauma, to deal with the anxiety and the depression that you mentioned at the beginning that come with trauma?

One of the things that I love about the work for the center for Mind-Body Medicine and Jim, also, how you've influenced me is helping to think about trauma and honor it.

And I'm sure everybody listening and watching this kind of felt that where, you know, not not being in any way dramatic and in some ways not even categorizing, but honoring that this is a part of life.

It's coming our way and moving through it and learning to move through it is absolutely essential for every human. It really helps us, think about it as something that we can, transcend and something that we can learn more about in terms of how we cope.

I want to get into some of the specifics that you teach, because I think everyone watching has symptoms. Jim, you and I have shared a lot about our own mental health.

I know you and I don't just talk about this stuff.

Self-Care Techniques for Anxiety and Depression

We really need it sometimes. We really need the extra self care sometimes. Can we talk nitty gritty? Some techniques, especially ones that you find useful for yourself and your patients around improving mood and decreasing worry.

Well, first of all, I just want to repeat or echo. What you said is that we needed some time to where it's not as if we just because we have MDS and lots of post-graduate education, as if we're that different from other human beings we go through.

We have the same kinds of challenges, the same kinds of trauma that other people have it. And that's a really important part of of the approach that I've developed.

And what I teach is that we're all in this together, and that in order for me to help anyone else deal with their trauma, I have to also be willing to look at and deal with my own trauma.

And just the kind of footnote that I know, you know, but perhaps not everybody either remembers or knows that's watching us. Is that the whole, root of psychiatry was in Freud dealing and Boyer and René, the late 19th, early 20th century psychiatrist dealing with trauma and dealing with the effects of trauma in childhood on adult life.

So this is the this is the sort of marrow, the bones and marrow and as well as the flesh and blood of our profession. And I think the way we start off by saying in this approach and again, in Transforming Trauma, I go through all the specifics of this approach, provide all the scientific evidence and tell people stories and give them the scripts for using these techniques.

The first thing is to say, as I said at the beginning, trauma comes to all of us. Hopefully that takes a little burden off people who are understandably feeling overwhelmed that you're not alone.

One of the worst things about trauma, and I've experienced this in my life, too, is, is this is feeling. It's happening to me and not to anybody else.

And that, that's true on a biologic basis. It's not purely psychological that when we are traumatized, we lose that capacity to connect as easily and completely with other people.

So the reminder everybody experiences trauma. That's important. The second piece is that it is possible. And you were alluding to this when you were introducing this section, is it is possible to move through and beyond trauma to experience post traumatic growth.

And incidentally, I think that's one of the contributions, one of the reasons I'm glad we're talking about trauma in the context of anxiety and depression, because our professions have come in the last 40 or so years to understand the trauma can open the door to a profound positive change.

Not that it's not overwhelming and difficult and destabilizing and, and, you know, even decimating at times, but that it is possible to move through and beyond trauma and to experience greater understanding, greater wisdom and greater compassion.

And that state that we can achieve is called post-traumatic growth. Now. I love that phrase, and I hope everybody watching and listening to sits with that for a moment, because we often we all we love to talk about disorders and symptoms.

And that's obviously important. But thinking about how the challenges in front of us and in the trauma that we all encounter is being a driver of our personal growth and our ability to transcend symptoms of depression and anxiety or better cope with them.

It's a very, very powerful way for us to, to and very, very powerful way. I hope this, this group of talks and these solutions are helping everyone. It's why Jim is just such a.

You've inspired me. I'm just thinking through different times in my life where I've met you and I visited, struggling with some aspect of a trauma and and had a training with you or had an experience or one at Kapalua where it was one of the first times I really was getting into not the type of meditation I'd always been talk through.

Clear your busy mind. Sit still. You know that monkey mind will settle down and I am okay at that, but not great. And where Jim got us moving and I remember there's one moment or Jim had a sort of jumping up and down, and I had for some reason, my eyes closed, and I had this experience of literally like jumping through the roof of the cathedral or Palu.

It was just this incredible, moment where a technique like the ones that you teach, the ones you talk about in your book and in your work, allows us to do something differently than just, talking about it or sitting alone with our suffering.

So, yeah. And what you're focusing on and sort of coming back to what you asked in the beginning is that those two techniques, slow, deep breathing and the active shaking and dancing, the movement techniques, those are the techniques that we once we've established the fact that trauma comes to everyone, that it's possible to move through and beyond it and that you're not alone.

Those two techniques restore the physiological and psychological imbalance that has been created by trauma. Slow, deep breathing is the basic antidote to the fight or flight response.

When we're traumatized, well, we're we're anxious, we're agitated. We're ready for a fight. We can't focus, we can't sleep, we can't concentrate or we are occupied with our thoughts.

Slow, deep breathing begins to bring, as you said, it begins to quiet, sort of calm and soothe that monkey mind sort of picture, stroking the skin of that monkey, stroking the fur.

Okay. It's okay. Calm down, calm down. Jim, are there mantras that you find help for? Things that you say to yourself? I was speaking to a patient about positive self-talk and they really looked at me like that.

They weren't quite sure what I meant. And when you're when you're particularly like, worried or particularly down, or are there things that that help you, that you say to yourself?

The mantras mantra is simply a Sanskrit word for sound, and they're a beautiful technique. As far as we know, they were first developed maybe 8000 years ago in the north of India, but we don't know for sure.

It's really, mantra can be something, a word or a sound. That's part of a particular sacred tradition. Ohm is the best known mantra. It could be saying a rosary is a mantra.

It could also be. And one of the ones that we use because we want to make it available to people from all different religious and spiritual traditions, is, we say, soft as we breathe in and belly as we breathe out.

So focusing on the words, but also reminding ourselves that when we breathe slowly and deeply and our belly softens and relaxes, that promotes that state of physiological balance, that antidote to fight or flight to mantra is beautiful thing to focus on.

And if you don't like that one, choose your own. You're working with the kids on the Pine Ridge Reservation in South Dakota. Very high level of of unemployment and poverty and abuse and the mantra of the sound the kids came up with as they breathe in.

They said, smelling roses and as they breathe out, they say to themselves, blowing out candles. And it works. So you choose your your own. You know, some tradition say you have to use this moon for you have to use that.

That's okay. But you can choose your own. It's just it's a device for focusing, for quieting that monkey mind. It's really helpful. I didn't know that mantras were sound for often.

For me, a kind of a low rumble or a growl. A little deeper than an alarm I find really centering and gratifying thing. And and I had not really thought about that as a mantra, but it really is.

It's not a it's not a word, but it's a sound.

Mantras, Breathing, and Movement Practices

It really works for me. I think also everyone, Jim's attitude, which I'm sure you all hear around exploration from being curious around Self-Experimentation not not in the way that off or talking about you know what you can stack on top of what at the at the festival.

But but self-experimentation of how am I feeling? How does my breath affect me? How did that a mantra affect of me differently than in another one of the exercises I love that Jim has us do is a project of drawings.

What was the last time so many of you watching? When was the last time you drew anything? Jim, I'm wondering if you give everyone a little homework of a just an example of a projective drawing, because I see how this lights people up when you do it in workshops.

Sure. Well, you know, I just want to say a word about the shaking and dancing first before we move on to. For sure, for sure. The other thing that can happen when you're really badly traumatized, you're overwhelmed, and the trauma seems inescapable as you shut down.

And what is technically called the freeze response, it's kind of the body collapses on itself and you put out endorphins to protect yourself against pain, and you remove yourself emotionally from the traumatizing event, whether it's physical or psychological.

Again, like fight or flight, it's a survival response. But when it continues for a long time, it produces the symptoms that we often see in traumatic stress, where people you can see their bodies are all tensed up, we're all hunched over and they're they're kind of remove their emotional distant and and they don't feel anything.

And it's hard to connect with other people. So the active techniques like shaking the body, which is what a dog will do after it had a confrontation with another dog.

Anybody who's watching us, you see your dog, it finishes the growling at the other dog. It'll go shake like that. Get rid of the tension. This is extraordinarily useful for us humans as well.

So we come into balance with slow, deep breathing. Then we do some shaking and we move our bodies freely so the shaking to get rid of the tension. And then something like we call it dance.

But just moving to music allows us to come back into balance and to feel that freedom for this. Part is great. People don't dance enough. There are, I'm sure, lots of folks who've watching.

So recently there was a large kind of meta analysis looking at all the different ways that we intervene with depression, and it found movement was really great, but in particular in the movement there is a signal around dance, the most effective, the largest effect size in terms of intervention and to help mood was dancing and yes.

And and I've had so I've been in a room with like 250 health care workers, everyone from executives to to, you know, folks, men in the E. R., all shaking and dancing with Jim.

And it's a really remarkable way that the theoretical stuff, man at this if you can find if through life. And so you're bringing into people to whom, you know, just as perhaps I brought it to you, you're bringing it to people for whom it's very foreign.

And there you're getting responses from them. And the idea is that we always say to people, what was it like? And amazingly, most people say, oh, I feel a little looser, a little more energy, but I feel the happier.

Was also that sense of curiosity and openness, because I think a lot of times, as you're noting, when we're in pain or in a freeze response, that's a very common response.

I have to trauma. We get a little stubborn. We don't want to be open. We don't want to be curious. We don't want to try new things. We and we don't in some ways, or at least I find a lot of folks, myself included.

Sometimes I have. I don't really want it to work. You know, I'm kind of already a little biased against it in some way that I may be ashamed to admit.

And so this curious, open stance where we don't think it's going to work perfectly, but we know how it did affect us, whether it's breathing or shaking or dancing or talking with somebody or another technique that you use or you learn during these series of talks and lectures about solutions and self care based solutions for anxiety and depression.

Well, you're you're right. It is hard, you know, when you have been traumatized or when when you're depressed. I was talking with a young woman last night who came to see me for a consultation, and I could see her body is so shut down.

And she had actually been a dancer. That was part of her career, but she wasn't dancing at all. And so, as she said, it's just it just feels like too much.

I said, well, come on, just move a little. And so she moved a little and she said, okay, but now I, you know, maybe I can do it. And you're right. It is.

It is hard at first, and I think we have to have compassion for it being difficult at first. And our job, you know, our job here as we're talking and our job as physicians and clinicians is to encourage people that to say, look, this is an experiment.

Give it a try. It's up to you. I can't I can't make it. Things change. But you have the capacity. We have the evidence and you have the capacity to make a change.

And that's why I think it's really important that you and I, when we're working with other people that we're doing it to. It's not just we're saying you do it.

You're saying if you're getting up in front of those doctors and nurses and social workers, that you're you're up

there and you're doing it as well. So, okay, you've given them permission, say, okay, well, here's a psychiatrist.

He's supposed to know what he's doing, and he's willing to be a little silly and he's willing to take the chance. Maybe I can do it too. So that's what that's what we're doing here, I think, is we're encouraging people to take the chance.

I love that you said playfulness and silliness because so often mental health challenges stripped that from us. We lose those parts of ourselves. I know it when I'm not doing as well or not engaged as much.

Self-care. I don't like make silly songs up. Or pick up an instrument. I'm not a great musician by any means, but I don't know. I love it when I'm in, better mood states and engage in those types of things.

So being playful, being silly. So that's something for us to get into a lot right now. But, I'm particularly wondering, Jim, about this, because I've seen you do things that make everybody uncomfortable.

And I just want to describe a quick scene, and I want you to tell us where. And most importantly, how how you, Jim Gordon, maintain playfulness and silliness in the face of the horrible things.

You see, I've seen Jim with people who have just encountered awful trauma, whether it's on the frontline in Ukraine, whether it's in the Israeli Gaza, you know, conflict, whether it is in Haiti all over the world.

And in the midst of that pain, you ask them to be playful, silly, move. And I'm wondering how you do that because it's so important we do that for ourselves as well.

But it's the really incongruent it feels. Well, we ask people to do it because we know it makes a difference.

Playfulness, Resistance, and Trauma Recovery

So right now, our team in Gaza, where people are dying every day, where there are bombs falling, our team is working in the shelters in Gaza. And they they know that doing these things that the shaking and dancing, for example, I was just talking with Jamil, who leads our program.

We've had a program, parallel programs in Gaza and Israel for 20 years now. And those programs continue, you know, talking with Jamil in Gaza. And he was saying, I saying, Jamil, what's most effective now?

He said, Jim, he said the shaking and dancing that is by far the most effective. Everybody is so shut down, so terrified, so angry, so worried that they're going to die today.

But I get them up doing it and me and my team, we do it and they look at us and they look like at us, like we're crazy. Just the way he said to me. Just the way I used to look at you like you were crazy.

I said, I remember Jamal, he said, but we get them to do it. And they they have some trust in us. So they do it and they feel the difference. They're able to feel their emotions.

They know they've been holding everything inside. So it's a matter of coming with conviction, coming. The conviction that comes not just out of the scientific research, but out of out of our own experience and sharing something and asking people to do it as an experiment and that it.

You're right, it does seem strange and perhaps counterintuitive to do this. And in the middle of combat, where they're literally you can hear the bombs falling outside, but it is what people discover very quickly if they're willing to take that leap and we're the ones who help them to take that leap, because we have taken that leap.

I've done it in the middle of combat. I was there and in Gaza during the civil war between Fatah and Hamas in 2007. And so, you know, I know it works, and I know it works in that situation.

So when I say it, I'm not saying it is a big shot standing up here. I'm saying it as somebody who does have the authority of a psychiatrist, but I also have the authority of somebody who has done it for myself.

And I do it here in situations where the trauma is less obvious. I know that when I'm shut down, something has gone wrong. I'm in an impasse with people I love or at work.

I know that if I shake and dance, it makes a difference so people will do it. I think that's our job is to really, the point of charisma, which is a word that the Greek word that goes back a couple thousand years, is not that I am a charismatic leader, that the charisma is because I'm able to communicate that capacity for self-awareness and self-expression, and the capacity to take charge of one's own life and trust one's own experience to other people.

That's what being charismatic is really about, not being a big shot. That way. Everybody fall in love with you. So I think that that's people will respond, we have to get over and I understand it.

We have to get over our own inhibitions, our own concern. And I've had this, for example, working with cops. We worked with the Capitol Police after, January 6th and they were all pretty shut down.

They're sitting around in a group. We're having a group with everybody sitting around with their arms crossed, wondering, what is this stuff you guys?

But as soon as but because it's sort of I was willing to kind of take the chance and say, look, give it a try, check it out, see what's happening. All of a sudden they start doing, you know, and they really were very traumatized by January 6th.

Very angry, very scared, very shut down in many ways. They began to move their bodies and feel better. And then even the guys who were most resistant would say, hey, you know, I like that too.

So I think it's a question that we have to overcome or own socially conditioned sense that this is not something you do. Indigenous people, many places when warriors came back from combat, they would do techniques like the shaking and dancing to get rid of all the all the anger and all the fear and all the grief and sadness that they were carrying around with them.

So this is this is part of our human heritage, and we're just reviving it. Oh, that that sense of celebration when we think about some primal, you know, dancing and celebrating that there's a trauma prevention piece of that, that they're discharging in a certain way, that the nervous system is releasing some of it.

So release and then celebrate, release and celebrate because you're still alive. I mean, we might as well celebrate you're and you're here and you celebrate what you have left.

I don't know if I told you the story before about the girls in Haiti. No. This is, after the earthquake in Haiti, maybe ten months afterwards, and there were a couple hundred thousand people killed.

And, I was doing leading a workshop for about 100 nursing students in port au Prince, and they were all girls, as it happened, 17, 18, 19 years old. And 90 of those, 90 of the nursing students had been killed when the building collapsed.

And the girls who were killed were the sisters, the biological sisters, as well as the good friends of the girls who were in the workshop with me. Ten months later and I did a, you know, did it began the workshop, and I talked about fight or flight and freeze response and the physiology and the psychology and taught them soft belly breathing.

And they're all very different. They're listening very carefully and very respectful, thoughtful, very serious. And then I got them up shaking and dancing and, about two minutes into the shaking, half of the girls were weeping, weeping, weeping, weeping.

And then more started weeping. And then we paused. In the three parts, the first part is shaking, and there's a brief pause of kind of paying attention to the breath in the body.

And then I put on some music. I put on Bob Marley's Three Little Birds, which is one of my favorites. So the girls are now crying and dancing and laughing, and then comes to a close and I said, what was that like?

It's always important to if you're doing these techniques to help take a little time afterwards to reflect. What was it like to do soft belly breathing?

What was it like to do shaking and dancing? You can talk about the drawings later. What was it like to do the drawings? Whatever they've done. And I asked the girls what was that like?

And they said to me, it was so good to be able to cry. We haven't cried since the earthquake. We've been so sad. But we have. We're nurses. We have to be strong for our little brothers and sisters, for our family, for everyone and it was so good to let go and cry.

And then some other girls said, and it was great to laugh. We haven't laughed. We're supposed to be so serious and so many people died. But so we've been serious all the time, and it was just great to be able to laugh and great to be able to dance.

We have a danced. We're 18 year old girls and we to take this. And then one of the girls stands up and she shakes her finger at me and she says, and Jim, we love Bob.

Bob Marley. But we are Haitian girls. We have very good Haitian music. And I thought, fantastic, she's back. She's a teenage girl. She's giving me the business.

And I said, great. From now on, we use Haitian music in Haiti, and you got to tell me what music to use. So this is the shift from what we conventionally think.

We think something terrible has happened and we're supposed to be in misery all the time. Well, if we look at some of the traditions, whether it's an Irish wake or juice sitting shiver after someone has died, yes, there's tears, there's grief.

Maybe there's anger, but there are also stories and people are laughing and they're having a drink. And we need to remember that life.

Global Trauma Work and Post-Traumatic Growth

Life is there and it goes on and we need to celebrate the people who have gone, as well as our own lives. Thank you so much for that, Jim. I think there's so many pieces of that, and I'm sure everyone watching and listening, is really resonating with the one that strikes me is how quick we are to judge how something is affecting us and how how quick we want to have something work quickly in that circle.

And things I love about your work is it shows us that that's possible. One of the, we're going to be talking a little bit about psychedelic medicine with some of the experts and in this group of talks.

But one of the things I love about your work is it feels very psychedelic to me in terms of its ability to disrupt patterns, to reveal and release emotion, to reveal really powerful lessons for us from the universe without any medicine.

Medicine's great, you know, in the right hands, you know, very powerful. But I love this notion and this, idea that you emphasize that there's a lot we can do with ourselves, with each other in terms of music and movement and dancing and then observing how it affects that.

We can really engage in powerful, powerful, self-healing. Absolutely. And and, you know, psychedelics is the word

means mind manifesting. And this work is to manifesting.

It's, sometimes we call psychedelics and theologians finding finding God or finding a higher power or finding something beyond us. And the work of mind body medicine also in its own way, does those those, those, accomplishes those goals, creates that kind of process.

And I also think it's very interesting and potentially very important to combine our approach of mind body medicine with the use of psychedelic. And actually, drew, I haven't even had a chance to tell you this.

I it looks like we're going to be doing a study, using ketamine and combining it with our group model with people with, substance abuse and alcoholism problems.

So that's, I think, going to be I'll know more about it in a few weeks, but it looks like we're going to be training people to use our group model, people who are psychedelic therapists, and then working with them to create, sort of an exemplary approach to combining the two.

It. Jim, I also had to come in on, have you on, just as an example for all of us. You've been through so much, you've seen so much, and to have you here, at the stage in your life, getting stoked about combining of what you've known and researched with this new idea of, powerful medicines and, and really, you're one of the best people to be doing that type of work around groups.

I mean, in the sense of how many, just thousands and thousands of groups you and your team has led. The center for Mind-Body medicine, their motto? I think it is for a long time.

There's, training thousands to heal. Millions, I believe so it's raised and and it's, a way that I hope this talk is reaching you. I hope the the depth of Jim's wisdom, and his words are reaching you in a powerful way to help you in your journey.

Wherever you are thinking about depression, thinking about, anxiety and how there's more that we all can do in our everyday lives. Not to overwhelm anyone, but there's more that we all can do.

There are more techniques I went through med school, residency, all that stuff before I was shaking and dancing with Jim, and it was wonderful. And so, keeping, our chin up and reaching out and we'll have lots of great resources.

Jim's book, some free downloads from his organization. They have trainings throughout the year for individuals who are both care providers, which is, if you're feeling burned out, a wonderful way to engage with this in Jim's book.

Or also, I just find a really comfortable thing when I'm feeling particularly traumatized. Now I just pick up one of Jim's books and I. I feel like I've got a great, a great guide and someone who's got his arm around me is Jim has had his arm around me, helping me know that, you know, no matter what, none of us are alone in this.

Doctor Jim Gordon, thank you so much, my friend. It's a treat. To be with you is a treat to hear a little bit about your techniques and and mostly to feel your wisdom and your enthusiasm when it comes to really encouraging us to take better care of our minds and our moods and our worries.

It's a treat to be with you. So. Yeah, just if people want to take a look, this is the book Transforming Trauma the Path of Hope and healing. Can order it as they say.

Go to your neighborhood bookstore if you have one, or you can order it on Amazon. And there are 16 techniques, including the drawings. Another time we'll have to talk about the drugs.

Maybe next time we'll do the drawings and show people what they're like. Well, that would be a wonderful, a wonderful thing to do with you, to capture drawing, to capture a little, supper.

You know, one thing that takes a few minutes just to really drive the point home and improve this to everybody, and I just. Jim, if you if you would indulge just for another just couple of minutes.

I thought we should leave this talk with the opportunity for everyone to have a guided soft belly meditation for a few minutes. If you have it with you.

And the reason I want to do that is when you're with someone like Dexter Gordon, who has guided literally tens of thousands of people in settling down their nervous system, there's there's just a belief in a power in it that that I want to share with everyone.

Would you give us the treat? And everybody makes sure if you're driving, don't don't get in this part until you're home. Would you mind. Absolutely. Drew, it's really great, a great idea.

We do this to you. This is a concentrated meditation. There are three basic types. There are thousands of specific meditations, three basic types concentrate of mindfulness and expressive.

This is concentrated. We're concentrating on the breath coming in through the nose and out through the mouth on the belly, relaxing and softening, and on the words soft as we breathe in and belly as we breathe out.

And remember, this is designed to be the antidote to the fight or flight response to quiet our body. Calm fear and anger in our mind. Enhance our capacity to think more clearly and to be more self-aware and be more compassionate.

So all you need to do is sit comfortably so you may want to change your position. I'm changing my position just a little bit. And allow your breathing to deepen.

I'm. I'm, embarrassed. I'm a button in my pants a little bit. If you're in an appropriate setting. And us and I just say that's a weird thing to say in a talk like this, but let's just be honest and just really, whatever you can do with inappropriate setting it, just settle down.

Thank you. Jim. So sit comfortably and if you feel comfortable, let your eyes closed because that removes a great deal of external stimulation. And become aware of yourself breathing in through your nose.

And out through your mouth with your belly. Soft and relaxed. And feel yourself relaxing a little more with each exhalation.

Guided Soft Belly Breathing Meditation

And knowing that as you breathe this way, more air is going to the bottom of your lungs and moving into your bloodstream. Greater quantities of oxygen, feeding all the organs and all the cells and all bodies.

And as we continue to breathe this way, we're activating the vagus nerve. That's vagus Vegas, meaning wandering and letting in. This big nerve wanders up from our valley, through our chest, back to our central nervous system, to our brain.

It quiets our body, lowers blood pressure, slows heart rate, relaxes the big muscles, improves digestion. And as we continue to breathe this way, we quiet fear and anger and the amygdala and large a larger portion of the emotional brain responsible for fear and anger.

And we had this activity in the upper part of our cerebral cortex. So we think more clearly, can make better decisions, can connect more easily with other people, and have compassion for ourselves as moments.

All this, but breathing slowly and deeply. In through the nose and out through the mouth with the very soft and relaxed. The thoughts come, let them come.

They will come. Notice them. Let them go. Slowly, gently. Bring your mind back to so. Really? We just do this for about a minute more. Breathing slowly and deeply.

Relaxing a little more with each sedation. Just a few more slow, deep breaths. Slowly, gently. Open your eyes. Bring your attention back in the room. Notice how you feel.

I always love that with you, Jim. Because I always travel to some place. Always feels like the same place when I dream. Or maybe when I'm on psychedelic journeys, you know, some place vast and expansive and calm.

And I always love how with a few breaths I get, there is such a gift that you and the center for Mind-Body medicine and in general, just the the all of the individuals who've been interested in this throughout the years and throughout the centuries. Oh, and I love how the moments kind of creep, the little ideas creep in.

And the thought I worried about a patient, and I worried about whether or people are going to be watching this on two times speed and just skip over. And if that happened to you, I hope you go back and just sit just a few minutes, okay.

Thank you so much. So such a pleasure to be with you. This good way to conclude. Thank you for suggesting it. Everybody. Thank you for your time. Thank you for thinking about solutions to anxiety and depression.

This has been a wonderful, wonderful time with a powerful, powerful healer, a wonderful psychiatrist, and a good friend and mentor to me, Doctor James Gordon.

Check out his books, check out his trainings, and most importantly, take the sense of relaxation and the settling down of our vagus nerve that we all just got, and take it and use it for your healing.

We'll see you in the next episode. Thanks so much.