Introduction and Speaker Background

I just urge people to go really, really slow. You can always build up tremor times, and certainly if there's any trauma, maybe work with somebody. And if you have really severe trauma or some severe depression, bipolar, something like that, you know, may be work for a TRE provider who is also has their licensed mental health professional.

The most bang for the buck for me is T. R. E. It may not be everything in all things for all men, but yeah, it's a really great tool. This is Doctor Talks.

Well, welcome back everyone to the Medicine of Mindset, our summit stage, Dr. Eric Robbins, and I'm excited to hear what Dr Robins has to share with us today.

We actually have a common colleague and friend, Deanna Hansen, who is also featured on this summit. It's amazing once you start getting to know like-minded people how your network just drastically expands and so I'm excited to have both of them on the summit and we get a chance to spend some time with Dr.

Eric today. Let me introduce him to you and then I am going to turn things over to him. So he is an internationally renowned expert in mind body medicine.

Featured in the New York Times best-selling series, The Tapping Solution, and in Soul Medicine, Awakening Your Inner Blueprint for Abundant Health and Energy.

He is the author of the forward to many books and maybe some of you have these books in your own library, including The tapping solution for pain relief, Tap into Balance, tapping transform your world the secret language of feelings life is the perfect system oh my gosh and i love this one super brain yoga miracles through pranic healing really you know flowing zen the list goes on and on this amazing human being has done a lot for society already he is a co-author of the highly acclaimed books your hands can heal you and the power of prana and a contributing author of both Dr.

David Bercelli's book Shake It Off Naturally and Dr Dawson Church's The Heart of Healing. I'm actually right now reading Dr Churche's Book Blissbrain, so I am excited about that.

Dr Robbins is a board certified urologist in private practice and affiliated with a major hospital in the Los Angeles area. He sees patients regionally for chronic pelvic pain and other refractory and functional disorders.

And he really does his best to integrate both allopathic medicine as well as complementary healing modalities. We're going to get into this a little bit today.

He received his MD from Baylor College of Medicine in 1989, his BA in biology from the University of Texas in Austin, and he completed his urology training at LA County USC Medical Center in 1995. He's put in the time, ladies and gentlemen.

He is an expert and he knows his stuff. And Dr. Eric, thank you so much for being here. I'm going to turn the virtual stage over to you. We've got a PowerPoint that really is going set the stage for the conversation that we're going get into after.

Jana, thanks so much for having me. And when you sent me the invite, just the topic of this sounds so amazing. As you know, there's so many folks out there that just aren't really being helped with the standard allopathic approach.

So it's nice to have, like you said, a bigger toolbox and some out of the box ways to approach things. The other thing I always say is that you don't become a mind, body, healing expert if you've had an easy life.

So some of my early challenges kind of propelled me into this. As you mentioned, I have a slideshow and I'll just launch into that. If I could get this to advance.

So a little bit about my background. As you said, I'm a board-certified urologist, and I am also a chronic pelvic pain specialist. I see cases referred to me regionally from all throughout Southern California.

And it's not just about chronic pain. You know, when people kind of started seeing me get results with some of these very challenging patients, they'd send me the chronic fatigues and fibromyalges.

Every medical center has these patients that are frequent flyers that are hospitalized for days and weeks at a time and have million dollar workups and nobody can really figure out what's going on.

And so a lot of those end up making it my way. I like to combine the best of allopathic medicine. When folks come to me, of course we always do the medical standard of care.

The challenge is that a lotta folks are sent to that have already seen really good physicians and they've checked off all the boxes. So at that point we kinda have to do something else for them.

I had to get good at this stuff and it's really because my life depended on it, as I'll share with you. I grew up in a family where my mother was kind of sick in bed from my earliest recollections.

Personal Health Collapse and Mind-Body Awakening

She had what we'd probably call now chronic fatigue and fibromyalgia and my younger sister had all those as well. Um, I have chronic fatigues in them for at least 30, 35 years.

and really bad brain fog. I remember we'd start these 36-hour on-call shifts in residency. We'd come in at seven in the morning and you'd be there all day and all night and most of the next day.

At 10 a.m. on the first day, I was already just exhausted. It took every bit of will I had just to keep my eyelids open. You know, and then in about 1997, I just kind of collapsed.

Like I hit a wall in my, was that in practice now and I, just, wasn't moving forward in life and my relationships and job and health. And I remember seeing this famous bio energetic psychologist and he said, Eric, you're getting by on 3%. And I can look back now and say that absolutely is true.

I mean, 97% of my, whatever you want to call it, life force was locked up, blocked up. And so I was kind of looking for ways to help myself. Um, I tried some things that helped then, but not enough.

In 2014. 24-2 is interesting because I had about the six-month period of these worsening neurologic symptoms. I mean, I have weird twitches of my body and I couldn't feel the hot water in my hands.

And I started having actually really significant cognitive things going on. Like I just was having trouble thinking and my mind was kind of a sieve. Uh, that was of course very worrisome.

And then, um, I noticed that I had, it was starting, had to have like GI symptoms, like at like eight after 7 PM. I'd wake up the next morning, the food would still be undigested on my stomach.

and then the straw that broke the camel's back was I was in the office one day and my heart started just racing at 220 beats a minute. It was getting dizzy and lightheaded and got taken to the ER for that.

Um, as in a hospital and I. almost non-functional at that point, really thinking like, how can I continue working? And the hospitals came by my room and he said something, and I can assure you it was not like one 10,000th of the clarity that I now understand this stuff, but I kind of got the idea, I'm stuck in a fight, flight, freeze stress state.

My physiology is stuck there. And then I immediately had the intuition. It's like even though we say the body tends to heal itself, it does not heal very well when we're stuck into chronic stress physiology.

And I knew because I'm kind of in the business that there's not really much we can do in standard medicine to get folks out of that. And so I was fervently looking for answers and praying, and I came across some stuff that, well, that's why I'm here with you today.

But because I had to study so much of this stuff to literally save my own life, I've kind of developed this series of mind-body principles that helped me and have helped a lot of my patients.

So I want to share some of those with the audience today, mind body principle, my body healing principle number one is this, when we experience events in our lives that are stressful or terrifying or too overwhelming to deal with at the time, will lock those memories and emotions into our muscles in the fashion, literally hold them in a body, and it's a protective mechanism.

It holds the traumas inside and prevents these uncomfortable feelings and memories from coming up to our conscious awareness to bother us. One of Sigmund Freud's most famous students was a guy named Wilhelm Reich, he studied the body and body energies and he called this muscular armoring Uh, or another name for it was character structure.

And, uh, it, was really interesting. So let's talk about this Reiki and armoring for a minute. Again, its one wage. What's one major way that traumatic memories are repressed and held outside of conscious awareness.

They're held in the body and these chronically tensed areas in body can of course cause pain and rigidity, and they just use up a lot of our bandwidth.

You know, they, use a part of her energy. In my opinion, these areas of myofascial constriction of the body are the major cause of blocked energy pathways and meridians in our body.

And, you know, it's so interesting because people go to an energy healer and they might use their hands or reiki therapist to try and unblock the energy.

Or of course, people got an acupuncturist and the put needles in the meridian to trying to get the to flow. That's fantastic. The higher level question to me was always, why are those pathways blocked to begin with?

And I think it's these traumas that are held in the in them out of fashion that account for a huge proportion of that. These myofascial contractions, they live in our mental and emotional range and expression and kind of the size of our container.

People talk about a stress bucket or something and we'll talk that later, but they affect all those things. Okay. Now what's interesting is that when we start to release these areas of chronic myofascial contraction and armoring, what may come up to our conscious awareness are the same uncomfortable memories, emotions, and sensations that caused us to freeze to begin with.

So I want to share an interesting story. I had, again, I see pelvic pain a lot. I have two different young women that came in at various times, maybe in their twenties.

One woman had severe vaginismus and for your audience, that means the pelvic floor and vaginal muscles are tense and tight and spastic. It's hard to introduce anything in the vagina, whether a tampon or sexual intercourse.

The other woman, her pelvic for was so tight. she'd sit on the toilet and it would take five to 10 to 15 minutes for that muscle to relax enough where she could urinate.

And if you can imagine trying to work or go to school, that was like a big taking up a lot of her time. So, and neither patient, I asked them, really had any idea what might have happened to cause this problem and asked him

repeatedly.

And so I taught them a technique called TRE, stands for tension and trauma release exercises. We'll talk a little more about this a bit later, but it induces a shaking, shivering, tremoring in the body, in muscles and it gets these muscles to relax and unfreeze.

And both of them after a very short terry session, all of a sudden the cause of why these muscles were tight came up to their conscious awareness. It was amazing because I had just asked them about it.

So one woman remembered a date rape that somehow she never could remember before. And the other one remembered something kind of that happened with her dad that You know, you can kind of guess what happened there.

So, and then as we learn to handle those, the emotional content of what came up, The muscles were able to stay relaxed and it's magnificent work. As we learned to kind to navigate this, release the myofascia, be able deal with what comes up emotionally as a result of that, we really get a lot more freedom in our lives and our neurologic stress threshold gets larger.

I studied a little bit of somatic experiencing that was developed by Dr. Peter Levine and it's interesting because I did some of their training. It's great and read a bunch of his books and really if you were to distill a lot of what he says in the one line, which he does, he said the key is uncoupling fear from raw sensation.

Because a lot of times we'll release the myofascia and it may just be there's a feeling inside. I don't like it's making me anxious. There may not even be much content to it.

And if we can learn to be with those sensations and uncouple fear from them, there is a tremendous amount of healing that can happen there. All right.

Mind-body healing principle number two. So I assume most of your audiences familiar with the ACE study, and if not, I'll just give a brief introduction.

Muscular Armoring, Trauma Storage, and TRE

ACE stands for Adverse Childhood Experiences. There was a big study in 1997 showing that the more adverse childhood experiences someone had, the disease and early death and heart disease, lung disease liver disease cancer and depression and anxiety and addictive behaviors folks had.

And so if you understand that the ACE study was true, it's accurate, that's actually something that happens. And then you reverse engineer it and say, how is it possible that these early childhood stressors affect our health later on?

There's some understandings that come from that. And by the way, there's I think been 2000 or 3000 papers written about the A study since then. So it really is a thing.

This is what we know. We know that early childhood stressors essentially program how our physiology is going to run, sometimes for the rest of our lives.

It programs how the physiology's going run. A big part of this is something called limbic system dysfunction. And it means that we, you know, the limb system is kind of like the fear center of our brain.

So if there's limb systems dysfunction, it's as if we get easily triggered into a fight-flight-free stress state. For many of us, that's almost like it is running on autopilot.

That's definitely what was happening to me back in 2014. I would say that most of the cases of complex chronic illnesses have some component of limbic system dysfunction and we're talking about things like chronic fatigue and

fibromyalgia and chronic Lyme infection and now post-COVID is a big one.

A lot of the autoimmune diseases, a lot the gut things and irritable bowel syndromes and dysautonomies and POTS. There's a big component of limbic system dysfunction.

By the way, I'm going to say something. It's my opinion. I think it's probably going turn out to be accurate. These areas of myofascial constriction and contraction in our body, our mind is constantly reading our bodies.

Those are going be a trigger to keep our limbic system stuck going in a dysfunctional state. Like our mind's checking in, oh God, this person's tense, his hair is tense.

We're not safe. Well, we better stay in our fight or flight state and it's interesting as I said before, even though we say the body tends to heal itself, it really does not heal very well when we're locked in chronic stress physiology.

Okay. Some of your audience may have seen this. This is the Porges Polyvagal model. I love this slide and hopefully we'll have that here in a few minutes explaining it.

You will too. So, Stefan Porgis came up with something called the Polyvagal Model and this thing explained so much. So basically, if you can see my mouse down here, this green area in the bottom, it says social engagement.

Most of you have heard that when we're in a kind of a healthy state, its a ventral vagal state. It's a parasympathetic state it's arrest and digest and restore state and that's really where the body heals the best.

Its a health physiology. By the way, when we're in this state, they also call it a state of social engagement. That's kind of interesting because it kind means that how we act around others and how were feeling is kind reflective of our underlying physiology.

When we are in a stage of engagement, we might feel emotions like joy and feeling very present and grounded and there's a sense of curiosity and openness and compassion and mindfulness.

And conversely, if people aren't feeling those things, we probably know that their physiology is not in this state most of the time. As a quick aside, I always laugh because sometimes you see these motivational speakers get up.

They say, just have a sense of curiosity. And it sounds great and it probably is good. But if your physiology somewhere else, it's really hard to actually in real life have that childlike curiosity.

Okay, now take a look here at my mouse so you can see it, my cursor. This says arousal increases, and if you just change that word to stress, we're going to see what happens as the stress increases.

We may go into a fight or flight state, which is a sympathetic nervous system state. And even here, you know, fight and flight are kind of two different things.

Like if I'm, if i'm fighting, maybe I moving towards the threat, I am angry and rage. I want to fight you. If i am fleeing, i kind trying to get away from the thread.

And that may be more of the emotions of like fear and anxiety and worry and concern. Okay. Some people spent a lot of their time in the sympathetic state.

and our curve is going up here. So as the stress increases more and you see this word overwhelmed, if we get to a place where we're just overwhelmed like something's happening, maybe something has happened to little kid and they may not be able to fight or flee, sometimes we'll freeze.

Now, freeze is back to parasympathetic state. Down, social engagement down here is a ventral vagal. Freeze is dorsal vagus. It's another branch of the vagis nerve.

And that's really what one of things that Porridge has pointed out. I think most med students don't really even get this physiology. it's very factual, but I don' think they really understand it in a useful way.

Now, when we're in a dorsal vagal state, some of the emotions that are associated with that, are things like people might be disassociated, a brain fog, numbness, depression, helpless, hopeless.

Shame, we're shut down, prepared for death. We feel trapped. So this is where I spent 30 years of my life in freeze. I know it really well. Okay. Now, this very interesting.

Look at this slide. so we are in the freeze and we want to unfreeze. It's bad to be stuck in a physiologic freeze, bad, you're sick, it doesn't feel good.

As we start to un-freeze, and we start coming down this curve, unfortunately, we don't magically go from freeze to social engagement. We have to come back through fight or flight.

And that can be a challenge because as people are frozen and then we started to unfreeze them, they may start having some kind of strong emotions come up.

There may be anger or rage. It might be, a lot of fear and anxiety. Unless you can step back and look at our map and say, actually, I'm on the right track.

You know, sometimes people freeze again. That's kind of what happens with PTSD. Folks start to unfreeze, these strong emotions come up and they may freeze.

But if we can stick with it and go slow and have someone maybe work with us and hold a safe neurologic container for us, and we could make it down through here and then uncouple fear from sensation, we end up back more often than not in this ventral vagal state.

And that's where the healing happens. literally physically and emotionally. And so I love this pictorial. Have you seen that one before by the way, Jenna?

You know, I had not, and I love, obviously the pieces of it makes so much sense, the way it's put together. And I hope our audience can understand that I don't want to oversimplify what it depicts because when you're in the middle of, it it like the sky is crumbling, right?

Yet it shows such a clear way out. It doesn't mean it a get out of jail, a hall pass or in Monopoly, get at a jail free car. There is work that has to happen to get back into that parasympathetic, but I appreciate how you presented that.

Thank you. Yeah. I thank you, yeah. And so the porges polyvagal model, kind of exactly like you said, it kind provides a map for folks to know where they are now and what stages they need to go through.

You're exactly right. When you're in the middle of it. It doesn't feel good for sure, but at least to be able to stand back and say, you know, I'm in the right direction.

It may not seem that way or feel that, way but I am, can be really helpful. Interestingly, talking about the vagus nerve, the science shows that 80% of vagal fibers are afferent, meaning they're coming from the body and sending a message to the brain.

And only about 20%of vagals fibers or efferant, which is the braintelling the bod what to do. So I think so often, so I so have to say that a large percentage of our thoughts and emotions and mindset are coming from the body and the physiology.

And I think this is just kind of one way of saying that. You know, so much of how we think and feel is our interception. We may not be aware that someone asks us, hey, do you want to go hang out with me and have

coffee tonight?

In the middle of a second, our brain goes down, checks our body, check the gut, checked the heart, the pelvic brain, and checks the status of the myofascia and all that and then gives you an answer.

and you may not be aware you did all that, but yeah, people are intercepting, they're going and checking inside their body and then deciding an answer to whatever.

ACE Study, Limbic Dysfunction, and Polyvagal Theory

So, I kind of wanted to take… Can I interrupt you for a second there? Yes. I think it's really important here what you have said and I want our audience to understand that that, I mean, whether you call it your gut feeling, your intuition, i love that you brought this up because i think for so long we've discounted that and we got stuck in what is going on in the brain.

What do I think versus what do i feel? And what you're saying here is 80% of those, you know, the vagus nerve, that cranial nerve that goes from the Brain to all of our organs, is going from the body up to the brain versus 20 from brain down like that.

That's another really cool way of the classic 80-20 rule that you kind of just flipped on its head. So, thank you for bringing that up. Yeah, well, I think the science is gonna show us that more and more.

I was presenting this type of stuff at a medical school last week. Med students are obviously very bright, but you know, all of us, I mean, doctors were in our head and thinking logical and there definitely there's a role for that.

And there is also a roll for coming back to our body and trusting our gut and our intuition. You know this whole, this summit you're hosting is all that mindset.

I really do think to think better, feel better. We need to start shifting our physiology. That's at least a big part of it. There's certainly a merit to top down approaches as well as bottom up approaches.

All right. My body healing principle number three, and I want to give credit to one of my mentors, Bill Harris, for this. Bill started some company called CenterPoint and they developed this binaural beat technology and the products called Holosync.

That, for me, was really life-changing. In fact, I'd say at the time that I was getting by on 3%, and I probably got five times better, which meant I now was operating on 15%. That may not seem like a lot, but going from 3% to 50%, I felt like Superman.

Anyway, Bill was a genius at taking complex ideas and topics and simplifying them and maybe turning them into a metaphor. Again, even if I'm teaching When I speak to the doctors or students, I love just talking metaphors because people will remember this stuff for a long time.

So Bill came up with the plate theory and what it means is this, you know, all of us have heard that expression, my plate is full, right? And so the idea of it is that for all us, our nervous systems are like a cup or plate and we can only handle so much stuff It's a great word, coming at us from life before we get, the cover plate gets too full.

When our plate is too, when our nervous system gets pushed over this threshold, it kind of creates a generic stress or anxiety reaction. And then we all learn to cope with this differently depending on how we learn how to respond as kids.

So for example, some people isolate themselves when they just be left alone. Some people are angry or anxious or depressed. Many of us probably engage in any one of a number of addictive behaviors.

But the bottom line is all these reactions are secondary to being pushed over threshold. That's number one. The

second thing, and I think the science backs this up, is that traumas, and particularly early traumAs, heck, even the stresses we pick up when we're in utero in the womb for mom stress, these traumAS literally affect the development of our nervous systems in such a way that we can have very small plates.

So one of the reasons I'm good at this is that I was walking around my whole life and my plate was like the size of a thimble. You can imagine how that is and you can be a smart person and a nice person, good heart.

But listen, if you're walking at a stress threshold, the sides of thamble, life is going to push you over really, really easily and quickly. Um, another one of my mentors, a guy named Gay Hendrix, he's a body centered psychotherapist, also came up with something called the upper limits problem, which is, you know, we all get how bad things and negative things, and stresses fill up our plate for sure.

But the gay said, if you have a small plate, then even seemingly good or positive things can feel bad and we may self-sabotage. You know? And he used to give some examples like, uh, couple's going to go away on a romantic three-day weekend and right before they leave.

fight breaks out. And on one level of truth, she could say, yeah, he was being blah, blah blah. He could she was saying this and that, but probably at a higher level truth we'd say the fight had to break out to kind of limit the amount of positive energy or like someone gets sick before going on a vacation.

So those are examples of that. How do we help folks to heal? All right. The paradigm shift is, you know, what we gave folks a bigger plate, a larger neurologic stress threshold so they could handle more stuff coming at them from life without being triggered into a stress physiology.

Like what would have, you know, I was able to get my thimble from this big to a 64 ounce big gulp. You can function a lot better in life like that. And so we get a big plate using both a top down and bottoms up approaches.

I'm going to talk a little bit about that now. Top down approaches, And by the way, some of these things I'm listing probably actually are bottoms up too.

So there's, there is not clear-cut categories, but basically tapping, you know, meridian tapping is a big one. There's a lot of studies behind that showing its efficacy.

You know? I always think like if someone's heck, if your plate's small to begin with and there are all these big, highly emotionally charged memories that are still in you, in your system and your musculature or whatever, and you start clearing the charge off those with something like tapping.

It's fantastic. Okay. I'm actually, one of my proudest claims to fame is I think I was the first Western physician to endorse EMT back in the day. Tapas acupressure technique.

It should say acu-pressure. TAPAS acupuncture technique, T-A-T, is another big one. I use that a lot in my office. If I know there's a trauma to start diffusing the emotional charge off that and kind of just freeing up the energy for folks.

EMDR, you know, eye movement desensitization. is really good and I think is pretty evidence-based now. There's a lot of talk about limbic system training.

Folks like Joe Dispenza talked about it. My recent experience has been that folks that are really chronically sick, we said earlier, folks who are chronical sick probably have some limb system dysfunction and there's ways to retrain that.

There are several different schools. One school that just I personally am enamored with and I'm studying right now is Dr. Kathleen King's Primal Trust.

She's physical therapist. she herself was very sick in bed for 10 or 15 years. You know, one, if she's inhaled one

mold spore, I mean, she'd be, you know bedridden for another day and she managed to heal herself.

She had studied a lot of functional neurology as part of her PhD program and kind of didn't think it applied to her until she realized that it did. But she actually, her school involves a lots of top down and bottoms up.

So that's just something I personally have used and like a Internal family systems is great. I personally had some of those therapies myself and found them helpful.

Of course, mindfulness and meditation are great, lately I've kind of been playing around with Scott Killaby's repression inquiries and have been very impressed with those as well.

Okay, as far as bottoms-up approaches, starting with the body, there's the fields of somatic psychotherapy. There's Qigong. Interestingly, Peter Levine and Bessel van der Kolk, of course Bessell wrote How the Body Keeps the Score.

I think it's been on like the number one lit book at Amazon forever and ever. They both say Qiggong is great. Bioenergetics and Reikian breath work are good and they help kind of break down that muscular armoring.

Of course, you can more directly go in and get myofascial release. I think Jana yourself and myself both like block therapy a lot as a novel. Yeah, there's your block there.

There's you're block. Very briefly, if I have very limited space in my suitcase when I'm traveling, And it's like, you know, leave something behind. The block travels with me in my suitcase.

And, it used to be whenever I'd go through, uh, go to the extreme machine at the airport, the TSA agents thought it was a block of, I don't know cocaine or whatever.

and they'd always look at it. Lately I've been to airport and these guys recognize the block now. So I say, no. I had the same experience in the early days and I tried to explain it a few times.

And then, you know what I started doing? Funny, not funny. I starting saying, it's what use to release my pelvic floor.

The Nervous System Plate Metaphor and Healing Approaches

Then nobody said any other questions. They're like, okay, and then they put it back in my carry on. Like, we don't want to know about your women's health stuff, lady.

Keep on walking. So yeah, I agree. The block is a must tool while traveling. Yes, yes, love it. Love it, it really helps get it in deeply and release the stuff.

It releases stuff that you didn't even know was there too. That's probably in your experience too, yeah. Yeah. Very much so. Yeah, so, you know, other bottoms-up approaches are things like yoga, dance, hana semantics, et cetera.

I saved, in my opinion, one of the best for last, and that's TRE, which is the tension and trauma release exercises. They were developed by Dr. David Burcelli.

Gianna, have you done T. E. R. I. before? No, can you? I was going to ask. So are you going, are going kind of digress a little bit here? Yes, yes, I definitely am.

All right. Just to be clear, the TREs are what cured me. They are, what cure me of the chronic fatigue. I'm going to say something a little esoteric here, but I also had something that I think might've been akin to like a Kundalini syndrome.

That's a weird spiritual thing, where there's, a lot of energy flowing and it's getting stuck and had that for a number of years and tried everything and TRIs helped me It not helped me, they cured that as well.

So at any rate, Terry, so I'll tell you a little bit about them. Usually I just kind of share with you how I explain in the office. And by the way, usually I'm explaining this to folks in office who see me.

They've got some chronic condition that's not healing despite the best we can do in allopathic medicine. It kind seems to me that their physiology is probably stuck in a chronic fight, flight, free stress state.

And it ain't going to heal that well unless we undo that. So I usually say something like, you know, have you ever seen on TV or YouTube the lion chasing the gazelle?

And most people, of course, can relate to that and say, the Gazelle is literally running for its life. Its body's in a high level of fight or flight, obviously.

But what's interesting is that the Gazelle escapes and gets to a safe place and it won't do this unless it feels safe. The gazelles will shake and shiver and tremor.

And they found out that every animal and every mammal and all of us have this built-in shaking, shivering, tremoring mechanism that seems to do two things.

Okay. Number one, it seems turn down or, you know, normalize the fight, flight, freeze, stress response. Again, that sentence kind of sounds, yeah, he said it, but actually if you're stuck and you are sick and realize there's nothing in standard medicine, including really medications that seem to that, I mean, I think this discovery by itself literally ought to get the Nobel Prize at some point.

If you really understand the implication, it's shifting folks out of a chronic fight, flight, free stress physiology. Now the gazelle will shake, shiver and tremor and a few minutes later will go back and just hang with the herd and graze and take care of its young.

And it doesn't have PTSD really. Okay. The second thing, again, as I explained to patients this, you can imagine one minute the gazelle's eating the grass and grazing, and then this cheetah's creeping up, then bam, in a half a second the Gazelle is running three miles per hour and zigzagging, there's a lot of charge and survival energy building up in its musculature.

An example I give is like if I have a can of soda and you shake the can vigorously and then there's a lot of pressure in the cam. Now, obviously, you don't want to just pull the lid off and spray diet soda over my room.

But what we do is just start cracking that lid and go. we start to slowly, safely depressurize the can. So when someone has a lot of survival energy, fight or flight energy built up in their musculature, if you don't release it, it's these areas that tend to keep clamping up and not letting go.

Like we all have the experience, you go to a great massage therapist and they massage you and dig their elbow in and the muscles release. But then like a day or two later, You go back to your life and muscles lock up again.

That's a chronic myofascial tension and bracing pattern. what these TRE tremors seem to do over time, you know, it's not a one-time cure. As the tremor moves through the body, they start to unwind and release these tension-abrasing patterns.

Sometimes you do have to go slowly and safely if someone has a lot of trauma because you don't want too much trauma released up to our conscious awareness too Okay.

But over time, these TRE seem to give us a much bigger copper plate or container. They do it both on shifting us out of that fight-flight-free stress state and that diagram I showed of the polyvagal curve, they start to unfreeze the physiology.

It, as I said, it healed me of 30 years of chronic fatigue. I have people write to me all the time. that just have tried everything and nothing seems to help.

And a lot of these people, they do TRE and it is the missing link for them. Honestly, it just makes sense. It's not me as some great brewing and dude who's healing them, but what I am doing is teaching them how to down-regulate their physiology, and then I know the body's going to tend to heal itself.

And I that as we do that, we might have some little hiccups in the road and having to deal with some emotions that are not that comfortable. But yeah, it's fabulous.

At the bottom of the slide, I've got the web address. It's traumaprevention.com. And I've got several YouTube videos that you can watch and just look under my name.

One is called TRE and Me. It's kind of a lot of the story that your heard today. The other is how I do T-R-E with sensitive and fragile clients. And again, it kind explains much of what we talked about today, the porges curve and the need to go slow for folks that are really locked up and traumatized.

That is my presentation, Ms. Janna. So I'm going to get out of this slideshow if that's okay with you. All right. Okay, that was great. And I think it laid a very solid foundation for our audience to start to understand that these diagnoses or these chronic pain experiences that we have that often become who we are, they become our personality, and we don't even remember our life before them, or we can't visualize what life could be in the future without them.

You know, the porges curve, your analogy of the lion and the gazelle, I hope it's landing. It's almost like you're layering and layering this foundation for us.

And I know you've said it, and I also know that this week, as people are here at the Medicine of Mindset Summit, they're like sponges. They're absorbing and absorbing, so what would you say to someone if they're like, okay, I get it.

What's my one inspired action that I can do today to start this process? Would it be watching that YouTube video? What would you say is a good place to star?

Yeah. So the TRE organization, Dr. Bricelli actually put out a video on YouTube that teaches how to do it, Another guy named Richmond Heath who runs Terry Australia has a really nice course for free.

They can find it on the internet. I would just caution folks that one of the challenges with Terry is not that it doesn't work. it's that it can work very well at unfreezing the physiology.

It's just my bias because of the kind of cohort of folks that I see in the office all day long are these sensitive and fragile types. I just urge people to go really, really slow.

You can always build up tremor times. Certainly, if there's any trauma, maybe work with somebody. And if you have really severe trauma or some severe depression, bipolar, or something like that, you know, work maybe with a TRE provider who also has their licensed mental health professional.

But yeah, I think the most bang for the buck for me is T. R. E. It may not be everything in all things for all men, but yeah it's a really great tool. I want to loop back to something that you said earlier, that when you were in your state of chronic fatigue and you're in medical school doing these long hours in residency and at 3%, how is this?

So you use your TRE, like you say, if you 5x'd it at 15, I mean, you could 5X anything, right? Your health, your wealth, thats pretty good. Is this a practice that you've had to have?

Like, it's not a, I've reached the destination, therefore I am. How do you, is there like a maintenance program? Once someone starts to unravel the big ball of yarn, maybe doing TRE, doing some myofascial, whatever it might

be.

Yeah. Just become part of your lifestyle to ensure that you don't end back up in that FFF situation. Yeah. You know, I think it's important for all of us to have some sort of self-care thing, whether that's TRE, Whether it is tapping.

I mean, Nick Ortner has the Tapping Solution website and there's a bunch of just tapping meditations one can go through. Whether its a yoga or Qigong practice, but it just finding something and I I think as we evolve and clear trauma, I got to say, do believe that there's like a light at the end of the tunnel, that it's not just stuck in this and drowning and, drowning.

I, think that, there was a, light, at, the, end, of, a tunnel. Um, in my case, and I probably tremor at this point, once, every one or two weeks, just don't need it as much.

TRE Practice, Safety, and Going Slow

You know, way, more functional now. But yeah, it, pick a self-care tool. Having a care tool is probably a lifelong thing and you may evolve. You know, your needs may evolve over time.

So when you work with your clients and you kind of ebb and flow them through this journey, how do you notice, because we're here at the Medicine and Mindset Summit, How do you or what do most notice when it comes to mindset?

Are you noticing the way they speak? The way carry them? What's changing about them as you take them through this process from a mindset perspective? I'm a doctor, so I can't put that aside.

So I am actually noticing their physiology. I notice, I know kind of where all those people are on that gorgeous polyvagal curve at any time. And I also notice as they're down regulating their some of these they said they're just there you notice like voice prosody and they talking very monotone or their ups and down is their facial movement because when we're you know in that ventral vagal state it goes to our facial muscles and we are much more you present with folks and wanting to be with people so those are some the things I listen to folks will tell me very very commonly after TRE practice first of all before we actually do the TRI I'll say scan your body and just notice where you're at now And again, just even getting people like out of here and into their body is kind of a big thing.

Notice what you notice. I don't care what they're noticing. They say, I'm having the worst anxiety, the worse pain of my life. And I say good, notice where you feel that inside.

Noticed those raw physical sensations. Can you allow them to be there because they are there right now anyway? And then we'll do that. A lot of times just people being with the stuff they hate and don t like.

Even being with that junk, they take a deep breath. No one's ever asked them to do that before. They're constantly pushing it away. Then what I want to see next ties into something very important you said a minute ago.

I'll ask them, can you notice a part of your body that feels the opposite? It feels calm, relaxed, safe in this moment, no pain free in his moment. You know, so many of our clients get stuck in these mindsets or you could also another way of saying it is he's kind of well-developed neural pathways and we're all really good at having deep ingrained neural pathway for feeling bad.

Like my chronic pain folks, you know are like a fibromyalgia patient. I might say, find a part of your body that doesn't hurt. And they're like, what are you talking about?

All of me hurts. So I'm like no. Let's sit here until you find a part that doesn't hurt. Now, after five minutes of them scanning themselves, they might realize it's the little toe in the right foot that does not hurt, but you know what?

I will take that. That's a huge start. I want them to start developing new neural pathways for feeling different and

better, and the only way you do that is by focusing on what feels different or better.

And it may be only 1% of your body or something like that, and I want them to start shifting their awareness and attention to the part that doesn't. Shifting attention back and forth.

Now a lot of times people are like, why would I wanna shift away from the pain? How is it ever gonna get better if I take my attention away? They realize what you focus on keeps making that kind of a deeper scratch in the record.

So you wanna feel different and better, spend some time focusing on things that make you feel better. It can feel very unnatural at first, but that is actually a key to the mindset.

I think, yeah, that's an absolute key is spend some time. It can be a gratitude practice, spend sometime focusing on things that make you feel happy, expansive, gracious, and it can feel very natural, but it's a amazing practice to do.

And I think the other thing that I want to kind of pull from what you're saying is all of these suggestions and these tools involve choice. Right? We have to, as the doctor, you can prescribe them and you know, tell your metaphors and share stories of successes.

But until we go within to take that inspired action, it's hard to move in that direction. So for those, again, I keep referring to for people who are here today listening to this, It's not a coincidence that you carved out the time for this specific interview.

And on one of my earlier interviews, one the docs defined a miracle. He said, do you know what the definition of miracle is? And I was like the dictionary definition.

And he said a miracles is just something that happens that's unexpected, right? So if you're sitting here and you are feeling like, what am I hearing?

Or it's resonating for you. Maybe you feeling something in your gut. Or maybe you getting a little bit hot or sweaty. Just listen to the fact that you can.

You can make these changes. Listen to your body. I think the body's a brilliant communicator. We didn't come with instructions on how to listen to it.

And what you've presented today is fantastic. So I want to know, based on your years of training and expertise and probably by now the tens of thousands of lives that you've impacted.

What do you feel is not being talked about enough when it comes to, you know, your practice and where you draw your line and ascend? Yeah. So what I think is important, well, there's a few things that are important.

I Think as you just said, it's really important to spend a little bit of time every day, no matter how difficult it is. focusing on something that helps us make new neural pathways for feeling different and better and happy and grateful, you know, that is enormously helpful.

I would say that, it's interesting when we used to teach these before the pandemic, we teach this big TRE classes at my medical center. There were doctors and nurses and some patients that show up.

And the most common word people had to describe what was happening as a result of the T-R-E was the word hope. And so it just, it shifted people enough, like they knew like, they new, maybe they didn't know how, but something felt different.

Mindset Maintenance, Daily Practices, and Closing Remarks

It allowed that little, as you said, that miracle, the little slip in their consciousness, a slip somewhere that allowed them to start seeing and feeling like that they could do something different, and again, I just keep going back to

And we shift our physiology that I think it makes it easier for a lot of us to have to kind of set our mindset and set that direction a little bit easier.

Hmm. I love it. And so I've been asking this next question of all of our guests on the Medicine and Mindset Summit. Would you allow us access into your own, some of the personal, you know, obviously you shared that TRE is still a part after all these years.

It's a tried and true tool for you. What are some other, mindset or the choices you make to nurture your mindset? Yeah. A few things just in no specific order.

I meditate pretty regularly. Um, I do Qigong pretty, regularly I'm studying with a school called flowing Zen at QIGONG, but I think it's kind of a nice, a, nice trauma-informed QI Gong school.

um, do block therapy. You know, we both do that. What else would it, you know? I walk pretty and do some other, uh, kind workout stuff and, um. Yeah. Well, another one that's a biggie for me that I love after having written a couple of books on co-authored a a book on energy healing.

What I'd love, love and love is the Donna Eden five minute in the morning energy routine. That thing is, is awesome. Um, it just resets kind of the body's energy and, and I loved that.

And I will ground. I'm a big fan of grounding. We live in Southern California, so fortunately, most of the months of that year, I can just go outside in the grass and just stand there.

And, um, i'll tell you, really feel the effects of. Well, first of all, our whole hospital's on, you know, it's computerized now and the ORs have so much equipment and EMFs and, the grounding has been really helpful for that too.

So that's kind of a nutshell of this stuff that I do. Sorry, did you say, can you tell me, it was Donna, E-A-T-O-N or EDEN? No, I'm Donna Eden. It's E D E N.

Okay, perfect. And it's the five minute, her five-minute in the morning routine. You can find it on YouTube and her website and stuff, but yeah, that's fabulous.

Oh, Dr. Eric, this has been so fascinating. I love how you, you know, set the stage with the content and how shared it was so you made it available, I think, to, a regular person like me that doesn't have the MD letters behind their name.

So I first want to thank you for that. And if, if people want. To connect with you with your, with, your work, how where's the best place to do that? Yeah.

I mean, honestly, you know, I think some of the… I don't really have any products or services that I sell. As you, know I'm just kind of in there in the trenches doing the work.

Yeah, um, i'm not really seeing private clients now. i've got some YouTube videos. Those are a good place to start. Got a website, which is, oh heck, it's Dr.

Eric Robbins, but it got got, some contact information. But yeah, I don't know, maybe someday I'll form a big organization and have some of that. And the other way, Gang, those of you that are here, if you go to, we have all the bios of our speakers, all right, linked through the Medicine of Mindset page.

So just go there. There's a lot of the books that Dr. Eric has written or has co-authored. If you love what you experienced over these past 60 minutes, dive into some of his work that way as well.

I think that's another really great way to connect. Yeah, for sure. Okay, this was so fantastic. Thank you for, again, thanks for saying yes to this project, for showing up the way you did today, and for leaving us with all of this amazing information.

Diana, thank you so much for having me. Yeah, it was a privilege. Ah, you're welcome. Okay, ladies and gentlemen, it is time for, we're gonna wrap this call.

It's time a little bit of a stretch break, get your body moving, gets some diaphragmatic breathing going, and we'll see you back here on the next episode at the Medicine and Mindset Summit.

Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health. Each day is a new opportunity to make choices that empower your well-being.

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