Vision & Brain Health: How Your Eyes Reveal Cognitive Decline Transcript

(Transcripts are generated by AI and may contain errors)

Summit Introduction and Guest Welcome

Hello and welcome to another very special interview for the Reversing Alzheimer's Summit. I am your summit co-host, Doctor Christine Burke, and over the last decade, I've helped many patients reverse their cognitive decline.

And that is why I have co-founded tuner, a brain health software designed around preventing and reversing neurodegeneration to help both patients and practitioners be extraordinarily successful in this work.

In this summit, I'm bringing you interviews with thought leaders who can help you understand the pillars of brain health and the root causes of cognitive decline.

I want you to know what you need to know to prevent and reverse cognitive decline and Alzheimer's disease for yourself and your loved ones. I am very pleased today to introduce you to my friend and my eye doctor, who is the absolute best doctor, Bryce Applebaum.

Doctor Bryce is a neuro optometrist and speaker, founder and CEO of My Vision. First, a private practice specializing in diagnosing and treating vision problems for all ages, he has become the trusted authority for functional vision through vision performance Training, his screen Fit virtual vision training program and neuro optometric rehab services.

Doctor Bryce has supported thousands of patients to optimize their vision, improve brain functioning, heal post concussive syndrome, and engage with life through a fresh lens no matter their circumstances.

Doctor Bryce knows that 2020 eyesight does not mean perfect vision and recognizes that while humans are not meant to stare at screens all day, we can train our eyes and our brains to have the appropriate foundation to thrive in this digital world.

Today, Doctor Bryce is going to reveal how we can take action to ensure our eyes and brains work harmoniously in a world where everything is trying to overwhelm our visual symptoms.

A very warm welcome to you, doctor Bryce. Thank you so much for being here. It is such a pleasure to be here. I'm so excited to, to chat and to educate, empower the audience here about what we can do for our functional vision.

There is so much to learn in this arena. So much that I have learned from you. Why don't we? Maybe we start off by talking about the difference between eyesight and vision, because I know that was a little bit novel to me.

And it's such a crucial distinction that once you get this, a lot of this other stuff makes a ton more sense. So eyesight really is just a symptom, and it's letters on a letter chart, Street signs, and it's kind of what the teacher writes on the board if you're a child.

And that's what we have glasses for and I say matters. But vision is far more complex. Vision is how our eyes move together and converge and track and focus and process information, and really how we derive meaning from the world around us and then direct the appropriate action.

Eyesight vs. Vision Explained

So really, eye sight is glasses, vision is brain and vision problems are brain problems. And there's a fix and a solution for so many of these brain problems with vision performance training, vision therapy, lots of treatments that are out there that can teach people how to use their eyes to rewire the software of their brain to change how they're using vision.

Yeah, it's so fascinating how much the neuroplasticity, the ability of the brain to change alters the way we can perceive things through our vision. I know that was really eye opening.

Not no pun, pun not intended, but kind of funny. It was really eye opening for me when we did my assessment, just to realize that there were things that I wasn't even aware of, that my eyes were doing, or that my vision my brain was doing or not doing.

Maybe talk a little bit about how we can rewire our brain through vision training and how how that happens. So neuroplasticity exists for every brain at every age.

And so many people think that cognitive decline happens as we age and vision decline happens as we age. But although that happens, that's not normal. That's just common, right?

I mean, there's actionable things we can do to slow down and not allow that to to be a thing. When I was in school and every doctor currently in school, we're taught that there's this critical period for vision development and that you blow out the candles on your eighth birthday, and then all of a sudden what you see is what you get.

And neuroplasticity for vision ends, which is so crazy to think about, but literally, that's the wrong interpretation of old research. And it's talking about vision lost, not vision gained.

So if you or I were to cover one of our eyes for six months with an eye patch and take it off, you know, I would be sensitive to light, but we would still be able to see.

But if you did that same thing with a six year old, and had he or she wear an eye patch for six months, take it off, they would have been eyesight lost because that's a critical period for a developing vision.

But any brain at any age can be rewired in terms of new neuronal connections, new pathways are accessing areas of the brain that we're bypassing or not tapping into, with the right work, with the right motivation and with the right compliance.

And so, you know, most of the patients I work with are here from, you know, stress from the environment and having adaptations that occur because of that or visual developmental delays.

But more than half of my practice is concussion and traumatic brain injury rehab, because we can tap back in and reestablish function when there's all of this disorder, especially when there's an acute event like that.

It's so fascinating how you can take the assessment of how your brain is processing information and then create that specific rehab protocol that helps to retrain those parts of your brain.

And it just it, it really emphasizes how much, how much control really power we have over what happens with our brain processing in vision here, but also in neurodegenerative disease and how much we can really do that we thought wasn't possible before 100%.

And it really all stems from this proactive approach, right? When we know what we can do versus is having a challenge already occur and then just playing, playing defense, I mean, at all of health care is on a reactive approach.

We're starting to shift, but especially with with vision and with the eyes. I know I'm biased, but there's more of a disconnect with the eyes than any other area of the body.

And anyone who's anyone, everyone goes to the eye doctor, and you're seeing these tiny letters far away across the across the room. And apparently that's the be all end all.

But we're not looking at the functional skills associated with near and with depth perception and with eye coordination and with focusing. And, you know, all the critical skills that we need to to navigate through space and

live a fulfilling life.

But yet we get blurred vision. We get things not as clear as they used to be. And then all of a sudden, and it's okay, you need stronger lenses or stronger contacts.

Neuroplasticity and Vision Training

And really that's taking a symptom and just feeding the symptom rather than uncovering the root cause, which may be a focusing stamina problem or an eye coordination problem, or focusing flexibility problem where far away is blurry, let's say because of a near problem, because of too much screen time, because of too much near stress.

Well, if we don't address the problem, then it's here's what something stronger that becomes you. In New Normal, you go down the same vicious cycle and your prescription is changing indefinitely versus stopping the train in its tracks and saying, okay, well, well, let's develop the proper use of the inside and outside muscle systems of the eyes and get the brain to respond to that information appropriately.

And then the need for a symptom to shift, like clarity no longer is there and sometimes can even be reversed. So so much can be done when we're looking at the person behind the eyes, not just the eyes.

And really recognizing that that these vision problems, our brain problems. One of the things that you explained to me that made it feel more, I guess, attainable or reachable that you could make a difference in how your, how your brain perceives what your, what your eyes are seeing is talking about the, the muscles that are controlling our eyes that are moving, moving the lens and creating our focus and that, like you said, we think about that as being just the eyesight part.

And the only fix for that is glasses and changing our glasses. But talk a little bit about some of the things that we can do that can help us to keep those muscles strong, to not lose their ability to create sharp vision for us.

Absolutely. So the two main muscle systems are the inside muscles and the outside muscles of the eyes. So the inside muscles control our focusing system.

That's our accommodate the system that allows us to make something clear, keeping it clear. That's really letting us know what something is. Outside muscles controls the eye coordination system, the eye pointing that lets us know where something is.

And in a normal, healthy brain, those two systems, the what and the where provide the same feedback so that things that are single and clear for us. Yet life takes place in the dynamic fashion, right?

So if our focusing system is like an old school camera lens stuck on manual focus, we're relying on glasses or adjusting our body to compensate. But if we can get that muscle system to be on an auto focus like an old camera lens, that does it all on its own, unconsciously, then we have the ability to make things clear at all distances and keep them clear.

Now, everybody, as we age, the those inside muscles of the eyes and the lens inside of the eye become a little bit more rigid, a little bit more inflexible.

And usually in the mid 40s or so you'll be there in a couple decades. Christine. But when you, you start to hold things farther away like this and your arms are out long enough, and then it's like, all right, let me go grab reading glasses.

And really, the equivalent of that is kind of like saying, my knee hurts, I'm going to go jump into a wheelchair, right? I mean, you don't just give up.

You figure out what caused the issue and you work your way backwards and solve those problems. And that's really what's occurring with our focusing system.

You know, as we age, it does become less robust. However, just like any muscle in our body, if we stop using it, we lose voluntary control. So doing specific eye exercises and specific things, depending on somebody's problems or what their goals are, can allow us to keep what we have for longer and at a minimum, prolong the need to increase near glasses or readers in many cases, avoid the need.

Some cases even make it so you go back ones you don't even need them anymore, but you got to do the work. And so, you know, I always the people who always say that eye exercises don't work, I always say they're the same people that are sharing that normal exercise doesn't work.

It works. You just got to do it. So, you know, if you're not going to do the work and you're going to be on screens all day long, and you're not going to get outside and you're going to have a sedentary lifestyle, then likely your visual system is going to adapt to try and meet those demands, just like your body would adapt if it's under stress.

Yeah, it is really true. And we spend so much time in front of screens and not enough time practicing the other part. I know that was the part because of my work, because of what I do.

That was the part that was hard for me, because I'm in front of a computer screen most of the day and I and so proportionately, I spend so much time focusing close and so little time focusing on the distance.

And it was really remarkable the amount of change, the improvement that we got in my clarity for distance, which was I thought that was really amazing.

Yeah. So screen time requires different eye movements than reading a printed page or doing anything in the distance.

Eye Muscle Systems and Screen Strain

There's more of them. They're less less organized. There's the contrast, there's the brightness, there's the glare, there's the 2D versus the 3D. But I think one of the clearest.

Takeaways from all of this is if we were to squeeze out this as hard as you can, after a few seconds, your hand starts to hurt. But if you just squeeze and like, go and squeeze and like, oh, you could kind of do that forever. Almost.

Our focusing muscles are these sphincter circular muscles behind our pupil. So when we look close they lock in. When we look far, they relax. When we're on screens, they're literally locked in under tension.

Over time. And if you're trying to lift weights and get back tension over time is a good thing. But if you're trying to be productive and engage your screens, tension over time is what contributes to headaches and eyestrain and fatigue and dryness and light sensitivity.

And then faraway, starting to get blurry as a result of this near demand. And so something as simple as just taking vision breaks. I know that's seems almost too easy, but if you think about it, I know when you're plowing through all your work for true neuro, you could probably look at your watch and realize, well, like it's it's evening time right now, right?

Because you're so locked in, if you even set an alarm and every 20 minutes, let's say, take a break for 20s and look 20ft away. 20 2020 rule. You're allowing that that that system to disengage.

Interesting to come back. And that's really the longest we should go before looking away is 20 minutes. It could be as often as possible. But the more breaks you take and especially movement breaks and even getting outside and getting natural light, the more you can function better for longer at the level that you're at.

But again, if we're so myopic and so locked in on the screen, that's creating additional stress an the environment that most of us don't have the foundation in place to support, we're not visually ready for screens yet with the right

work, with the right motivation, you can get to a place where screens don't cause damage to the eyes in the brain other than, you know, what comes from certain neurotransmitter release.

If you're messing around and doing, you know, certain, pleasure seeking activities on a screen, let's say. Yeah, yeah, I mean, one of the things I did in my, in my new office is I set it up so that my computer screen is by a window, and so I can just look up now, gaze at the distance out the window to create that break in, in my visual focus.

And it's such an easy thing, like, that's such a great take home action point. Like, that's a very easy thing to be able to do for anybody that spends a lot of time in front of a screen and just have that, have that break in, look, look into the distance for a bit.

Can I add one more easy win? Yeah, yeah. So the average person blinks about 15 times in a minute. And when we look at screens it goes down to about three times a minute, which means we're literally blinking less fresh tears are going over the front surface less.

The windshield wipers are cleaning off debris, less the brain then sends a signal. My eyes are dry, release more tears, but then the tears come out more in the water fashion, in less in an oily fashion.

So your own tears actually evaporate faster than they would and drain quicker. And we go on this negative feedback loop and then inflammation steps in and you know all about inflammation.

And so as simple as this also sounds blink more take blinking breaks or remember to just look away and look out that window that you so intentionally set up for your for your new set up.

But blinking is something that we, you know, we almost take for granted. And now dry eye syndrome and digital vision disorder are now diagnoses that weren't around that, you know, too long ago because of what's now occurring for our society from from all these screens.

Yeah. It really is I mean it's just the way, it's the way of life now. But we didn't, we created that way of life without being intentional about the protection side that we need to have as well, which is what I love about these really practical, practical tips.

What do you think? What do you think is happening in the Alzheimer's brain that also contributes to impact on the the vision, the visual processing of the brain?

And are there any specific things that you think people who are either early in the cognitive decline process or at risk because of family history or further along, like what are what are the things that we need to be paying attention to, or maybe even early warning signs?

I'm sorry I peppered you with like five questions there. So come on, come on, take them all. So having problems navigating through space and in our environment is one of the earliest, easiest signs of Alzheimer's disease, where it's not normal behavior, something's different.

And it's almost like you're lost in space. And you know, those visual spatial, functional vision issues that occur, they make it really hard to feel safe.

And they can lead to confusion and they can lead to disorder. And all the mental health that comes with that. And, you know, I think when that happens, we're using our brain in different way than it's wired.

We're allowing mal adaptations or bad habits to manifest. One of the most common visual consequences that we see is our depth perception drops, or we start to have this kind of competition over sensory input, where our brain starts to pick one eye rather than using both together, and then it starts to suppress or ignore input from one eye.

And then all of a sudden the world goes from 3D to 2D. But it often does that in different pockets of space or in

different positions. And you don't really realize it because your other eye that's acting more dominant is taking over.

Vision, Alzheimer's, and Early Warning Signs

But then all of a sudden you're reaching for a glass and you're not visually guiding the motor control the entire way, because you reach for a glass a thousand times, and then you knock the glass over because there's a mismatch of where you think it is and where it is, or when we're driving.

We're not able to react to information in the periphery or in front of us at the same rate, or with the same accuracy as we could previously, because again, our brain stop using our eyes together as a team in certain scenarios.

You know, that can also lead to, misperceptions and mis identifications. So the misperceptions are really what are the most commonly talked about as I related with Alzheimer's, because it's usually damage involving the occipital lobe, the back of the brain.

And if there is damage there, that could make looking at like a dark carpet seem like it's a whole, because your brain is literally perceiving it differently than what it is, or with the misidentification, you know, maybe that's the temporal lobes or the parietal lobes that are more for kind of understanding where and navigation, you know, that can be not interpreting what you're seeing accurately in terms of where it is or when it's arriving at you.

And again, that just leads to this insecurity in our environment and our surroundings, which can be really, really scary. And I have a patient currently that, you know, said this was one of the best things that happened to him because it forced him to get rid of all clutter, because he could never find his keys when he'd come in, because there was just stuff everywhere.

And so when you got rid of all the clutter and he knew my keys go in the key bowl, then every time he came in, it became so habitual that he stopped losing them, but otherwise he couldn't.

He could look for the keys here and here and here, but couldn't open up periphery to see the whole space, to then localize accurately. So I think those are some of the most common ones functionally.

And then there's definitely changes that occur structurally where the eyes can be one of the most that one of the best early detection sites for changes with certain types of, protein deposits.

I mean, even as early as, like the 2000s, you know, there were these beta amyloid proteins found in our lens inside of our eyes, and they look very different when a cataract develops there.

Or a deposit forms there different from normal. You know, this is something that we need to get, you know, do more testing or research on or, in the retina, the inner layer of the eye that's responsible for allowing us to have the image focus there for our brain to that interpret.

It changes to the retina very often mirror the same changes that happen to the brain with the Alzheimer's population. And, you know, that's better than anybody.

So, you know, I think being on top of your health and being on top of your awareness is, is really the best advice, because when you start to notice things different, we got to figure out the why behind it.

Yeah, I think that's such an important point that we accept so many things as just consequences of aging. Like you said earlier. And really, they're all warning signs.

They're telling us something has changed and it's not necessarily something horrendous or something really, really bad. But it does mean that things are shifting.

And I and as I was listening to you in that last segment, I was thinking, it's like it's like other things that we do in neurodegenerative change with brain retraining where what what often happens as we get older is that we just fall

into patterns, right?

We do things in the same way or in a similar way, like, you know, you get up, you go in your kitchen, you make your cup of coffee, you and you kind of just follow this exact same pattern.

And, and you and I know that, that neurons that fire together wire together, meaning that the more you drive that same pathway, it's kind of like ruts in a dirt road.

The deeper those ruts get and the harder it is to do something else. And so I'm just thinking with our vision, just like with other things, we need to be challenging it to do different things and to not just do the same things over and over again.

So fascinating. It really is. And our brains are brilliant in terms of what they're capable of. And I mean all day, every day in my practice with our vision training, we are arranging the conditions to raise the somebodies awareness, what their eyes are doing, where they're pointing so they can know what it feels like, what it looks like, and the depth that ensues when the brain turns on to that information, when we're tapping into those visual centers and then reproducing that as we're adding movement and balance and cognition and vestibular input, because vision doesn't operate in isolation of these other systems.

So, you know, with a really thorough evaluation, you know, exactly where the areas of opportunity for improvement are. But then with the right brain training protocol and in this case, visual brain training, I mean, we can allow somebody to recognize I can tell immediately if my brain is shutting off input from one of my eyes, or if the world becomes flatter than it normally is.

Or I can tell immediately, if I start to lose fusion and things split into two, I can very quickly pull them back in or if things become blurry, that's a sign to me that I've done too much or I ate the wrong food, or I need to take the right supplement or medication and vision as our dominant sensory system should be what is guiding and leading and providing a safety and feedback for all the other sensory systems.

But very often when it's not, it can be so daunting and so scary because you know, you're you're not trusting what you're seeing. And that's really the root cause of so many people as we age, you know, avoiding stairs or escalators or curbs or, you know, having falls that would have been avoided had they had vision guiding movement appropriately.

And yet this is not standard of care yet where somebody who shows cognitive decline or even, you know, signs of, of, of not just even decline but just it inconsistencies.

Well and even just prevent tively. Right. Like right. Saying this should just be part of our eye health care.

Protecting Vision with Lifestyle and Nutrition

It shouldn't be something that, that we have to seek out separately because it's so important. It's really it's, it's really crazy that this isn't just part of common practice.

And I know that that's part of your mission for sure. Oh, yeah. I, I, I'm trying to raise as much awareness as possible because, you know, there's we're at this tipping point as a society now where we've talked about screens being everywhere, but they're kind of the new pandemic that we're all dealing with.

The average American is seven hours and four minutes a day on a screen. The average 8 to 10 year old is six hours a day on a screen. And these are average numbers, which means there's people that have significantly more than that.

And, you know, we see what it's doing to for kids at least cognitive development, social development, emotional development, but now visual development.

And then we're seeing with adults this sedentary lifestyle that, you know, becomes a lot easier to stay inside and be stuck with this machine blasting, this high energy, short wavelength light to our brains and our eyes, which are not meant to be able to withstand that stress for that long.

Yeah. I mean it's a whole and we haven't even seen the full outcome of all of that screen time because that's really only been in like the last 25 years that it's been more significant.

You know you mentioned a little earlier supplements and other lifestyle changes. What are some of the other things that people can or maybe even should be doing to help protect their vision?

So supplement wise and nutrition wise, literally anything that is great for brain health is great for our health. The eyes are part of the brain. They emerge from the brain in utero.

They're brain tissue. And so, you know, anything that we want, anything that's going to maximize his health, vitality and function for our brain is going to do the same for our visual system and for our eyes, specifically for the eyes.

There's green leafy vegetables and specific lutein and zeaxanthin, which are great for the sweet spot of your eyesight for your macula. Omega threes are great for so many aspects of cognition and brain health, but really for visual function as well, and for our tear film to be more viscous so that our own tears don't evaporate as quickly as they would otherwise.

But then also, you know, there's a lot with light that has become really popular. And, blue lights kind of become the new gluten, where that's all everybody's talking about.

And blue light is not bad for us, but it's actually really good for us. But we want natural blue light from the sun to help set our circadian rhythms.

But artificial blue light, especially from screens, that's blasting our eyes and brains all day long. We now know that there's a correlation with metabolic disease and even some cancers when our circadian rhythms are are messed up because the sleep wake signal is not being sent at the right fashion, because the cells in the back of our eye whose sole job is to respond to light, they're overstimulated all, all day long.

So melatonin just keeps firing all day long. So blocking blue light, you know, is can be helpful. But really it's the junk light. It's the light from our environment that causes, this fight or flight response or this autonomic dysfunction.

And some people are way, way more sensitive than others. I have, probably 50 patients currently who literally can't walk through, any type of environment with LED lighting without immediately wanting to retreat, because the pain and the discomfort and the symptoms are so terrible that they just they need to pull away.

And we have plenty of patients who, you know, do everything they can, and their brains are still that hypersensitive to certain wavelengths of light and to certain, stress around environment.

So having the right types of glasses to, to block blue light for certain people can be life changing. We're big proponents of what we call digital performance lenses, which are glasses specifically designed for screen engagement and performance over time.

So they're not glasses that are compensatory. They don't do the work for you. They're therapies, and that they give the brain the best opportunity for the eyes to work together, whether it's a low amount of balanced magnification or a low amount of prism, whatever it would be, you know, customized for that person.

But to make it so that the brain can use the eyes and the inside and outside muscles more efficiently without allowing these, these mal adaptations to emerge.

So I think the right optical setup, the right nutrition, the right supplements, but then also really lifestyle, I mean, getting, getting up and moving and being active and, you know, if you think about vision as a system that was

intended to guide movement and to scan the horizon for, for dinner and for for danger, right?

We're now having those same eye movements on a screen. So we really need to maintain flexibility and get outside and move more. And there's really great information coming out now about how protective even 90 minutes a day can be outside for kids in terms of slowing down the progression of nearsightedness.

Oh, wow. That's really fascinating. Do you wanna hear some stats on nearsightedness that are incredibly alarming so far away? We're getting blurry because of near.

Yeah, right. When we landed on the moon in 1969, about a fourth of America was nearsighted. Today, it's about 43% of America. And it's estimated that by 2050, 50% of the world will be nearsighted.

And that's because of three things not enough time outside, prolonged near work in the dark, and too much excessive screen time. So all of these we have control over genetics.

We don't always have control over. But genetics only play somewhat of a role in that environment, plays much more of a dominant role in terms of that progression, in terms of severity and onset.

Wow. That is that is definitely a startling statistic, but cool that we have the ability to change it. We just have to know about it. Absolutely. And there's even FDA approved protocols and many protocols not approved by the FDA that slow down the progression.

And almost there's a something called ortho care allergy, which are contact lenses you sleep in at night that change the shape of your cornea, kind of like a retainer for your eyes instead of for your teeth.

It's essentially a reversible laser. You take them off all day long. As you crystal clear, you put them back on at night. And one of the best ways to slow down the progression of nearsightedness, especially in kids.

Oh, that's really interesting too. You have so many cool factoids to share. The eyes are awesome. Nobody knows about them and they're just like hidden from from the world.

It is. It really is. And it's and it has been so focused just on the eye chart. Right.

Screen Fit Offer and Closing Remarks

It hasn't the whole integration, the whole visual integration hasn't really been explored before, but 40% of of sit in a dark room and see how far away you can see something which literally has 20 times the magnification up close to that it does far away or 20 times the demand.

And yet still we're not even looking at most of the near task. So anyone who's listening who has a ten minute eye exam at Costco, I'm sorry, but we need to be doing more testing and we need to have a more thorough, evaluation to best identify what's best for a person and what they need.

And nothing against doctors at Costco. But, you know, we need to be looking at eye health, eye sight and vision and vision and a really thorough nature that's making sure we have the right foundation in place for reading, for screens, for driving, for sports, for all areas of life that require careful use of the eyes, brain and body as a team.

Yeah. Wow, that sounds like an amazing place for us to to pull this together, because I could just keep talking to you about this for a long time. Well, I mean, we spent a week together and never ran out of things to talk about.

Absolutely. I think, you know, this has been such a valuable information, not only just factually valuable, but in expanding what we think about is possible for the brain, because in the same ways that you're accomplishing amazing transformation for vision, right?

That's the type of thing that we're accomplishing with reversing, preventing hopefully ideally and reversing cognitive

decline. And I think that parallels with what we're doing are just super fascinating.

And they're they're so similar in terms of catching stuff before there's a problem identifying when there is a problem, how do you slow down and even reverse it with the right work, but then also knowing we can all do better so let's be proactive and unlock so much of our potential and live live long and die strong in terms of how we're we're using our brains.

Exactly, exactly. And you've given us such really practical tips for things that we can easily do, which I really appreciate too. Now I know you have a very active practice because I've been treated there, but you have a special offer for our viewers today.

Yes, because they are in your tribe and so, so focused on brain health. We have a online vision training program called Screen Fit, and this is a revolutionary program that's designed to teach you specific eye exercises needed for screen engagement to help reduce symptoms and promote a healthy, mindful, visual foundation to do what we're doing right now staring at screens.

So it's 3030 lessons in each course. And what we're offering for everyone listening, with code ad Summit is $200 off the enrollment. So the enrollment enrollments normally $497 and with code 87, and you'll get $200 off.

So it's almost silly not to do this, and you can do the work, but view this as kind of like body weight work instead of going to the gym. If you do the right body weight work and you do it, you can get into better shape and you can start moving.

You can start seeing the results immediately. And so this is a great way to make this more accessible to everybody. That's really awesome. And I know in just five days I have had remarkably noticeable improvement.

So it really it's worth the effort because you get the results. You really do get the results for people who would like to know maybe how else to get in touch with you, or how they might be able to work with you and your team.

Find out how you might be able to help them. Where can they find you? You're so sweet. Thank you. So, my vision first.com is our website. I'm. I'm in Maryland, right outside Washington, D. C.

we've got offices in Bethesda and Annapolis, Maryland. And then you can find Screen Fit on there, but also screen fit is its own entity screen fit.com.

And then social media. Instagram is probably our best, best platform. And it's at doctor Bryce Applebaum. But it's Applebaum is spelled L instead of LA because my ancestors wanted to make life difficult for us.

So, make sure you find it there. But, thank you so much. And it's such an honor to be here and talking with you and empowering everyone. Listening. Yeah.

This has been excellent. Thank you so much for joining us today. Appreciate you having me. So for you, my viewers, if you have enjoyed this discussion today and I don't know how you couldn't have, please join us for some of our other sessions where we continue to dive into my passion solving the root causes of cognitive decline and leading you to better brain health.

Thanks.