Combat Trauma and the Blackhawk Trigger

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And their response was absolutely beat me in half at the middle, almost like a I used to have a big old dog that would have epileptic seizures. That's kind of what I felt like.

Oh my, my muscles kind of all contracted. I bent forward and it was as if my subconscious did not know whether to run away from the birds or run towards them.

Obviously those aircraft had nothing to do with me, but for the first time my subconscious did not know that my subconscious, those aircraft, had everything to do with me and from that moment on, even to this day, I continued to have a visceral response.

Welcome back to the show. Today we're having a wonderful and powerful, heartfelt conversation about healing, not just the kind that happens in hospitals or therapy rooms, but the kind that reaches deep into the soul.

Today we have a special guest who is a combat veteran who has served with courage and came home carrying experiences that many of us really can't fully imagine.

so many veterans, he's faced invisible wounds the kinds that don't show up on a scan but are felt every day in this episode. And we want to explore his journey with ketamine assisted therapy, a treatment that's been offering new hope for those living with trauma, depression, and chronic pain, anxiety and the like.

But this isn't just about a medicine, it's about what truly heals connection. The honesty that it takes to do this work, the courage and the willingness to try something new.

So whether you're a veteran, a clinician, or someone who is on your own healing path, or simply curious about the power of these conversations, we invite you to listen with an open heart.

Let's dive in. Tim A is here today, and I've known Tim since 2024, when he first came to our center and came in for treatment for, as I said, ketamine assisted therapy.

As a person who showed up at our door, and I always tell patients that it takes a lot of courage to show up through those doors and to really seek the help that you need and trusting the process.

Can you tell us a little bit about yourself, Tim, and how did you first hear about ketamine? What brought you in through those doors? Yeah, well, thanks, doctor man.

Yeah. My name's Tim Hall, retired from the Army in 2012. I spent most of my career in special operations, started my career in the Ranger Battalion, and had a myriad of different experiences peacetime and combat.

I think I was affected physically and emotionally, peacetime and combat. I'm not even sure which was more of the brunt, but I know after I retired I went on a long time.

I would not have said I had PTSD. I would not have said that I was affected at all.

Finding PTSD and Seeking Help

I knew I drank too much. I knew that there was a struggle, but I wouldn't have put it towards my time in the service.

In fact, I thought I was probably more resilient than most Rangers that I served with the real visceral response to things going on around me in the community.

didn't actually begin or didn't become totally evident to me until right when Covid happened and when Covid happened, people drew in to their buildings, and law enforcement kind of took a step out.

And what I began to notice was America looked like a war torn countries that I had been in, and we looked like a kind of a country under siege. And at least that's what my well, my confidence, but definitely my subconscious was picking up on.

I was working on an airfield at the time and had been for quite a while, with no ill effect. And one afternoon I stepped around the building and there happened to be a couple of Blackhawks that had been flying in the local training area and oh, about three, probably 300m off.

There were two Blackhawks sitting down with the rotors turning, just sitting on the ground and when I came round I heard them from looked at them and my body just went into to a visceral response.

And their response was absolutely beat me in half at the middle, almost like a I used to have a big old dog that would have epileptic seizures. That's kind of what I felt like.

Oh my, my muscles kind of all contracted. I bent forward and it was as if my subconscious did not know whether to run away from the birds or run towards them.

Obviously those aircraft had nothing to do with me, but for the first time my subconscious did not know that my subconscious, those aircraft, had everything to do with me and from that moment on, even to this day, I continued to have a visceral response.

It's improved quite a bit, but for a long time it was just that it would fold me in half and it would take everything out of me, and it maybe keep me there for, well, quite a long period of time.

Often until the birds would lift and take away and get out of my earshot. At that time, I called a buddy of mine that had more combat experience than me, quite a bit more, but had grown up with me as a young ranger back way years previous, and explained to him what had happened to me was not an easy phone call to make.

And he didn't Pooh Pooh it. He he he told me that that it was it was normal. And not only was it normal, but he went down the roster of people that I served with and went name by name of people that I had grown up with as a young ranger.

And because he was more connected that I had been, he told me each person's story of where they were and what their response was. And each one was totally different, but equally extreme.

And his theory was it wasn't the amount of times that you'd been through the door, but it was the training that we did to be comfortable to go through the door even one time or a few times, and put me in connection with some guys that had non-profits.

And I began to to seek information, and I began a journey to just try to get better. I was in a marriage at the time that did not survive. I don't think it would have survived anyway, but this certainly didn't help.

Things. I had another buddy that was taking ketamine infusions in Virginia. The the VA does not recognize, you know, ketamine infusions as a modality for, for health or for my condition.

So my only choice was to come out of pocket for it. And it was very expensive, though at the time I was making pretty good money and really hadn't tried anything at the time because my existence had just overnight become unbearable.

Probably the only thing I did right is I didn't take a drink, but I did go and receive ketamine therapy. However, in Virginia, their idea of ketamine therapy was just put me in a room.

You pick your music, you come in with whatever music you wanted on your iPhone or whatever, put your headphones on, and they hooked you up to what we call the spank machine and put diodes on me and and left me in the room by myself.

They would occasionally come in and check, but there was no therapy. There was no Satan setting. There was no conversations before. There were no conversations afterwards.

You just you got what you got. And I was encouraged from the doctor that it's not what you see when you're out there on the medicine. It's it's today's following.

It's the health benefit that comes afterwards. And the. New neural pathways that could be developed. And nobody promised me anything, but it might work.

And I hadn't done really anything for a maybe at that point.

Ketamine Treatment Without Therapy

So when you and I'm going to just kind of really reflect on what you just said about the visceral reaction and this subconscious part of you that seemed to know something was wrong, and also your initial denial, I guess, of that there was anything wrong with that.

You had PTSD. How did you put this all together? You know that this is PTSD. This was a visceral reaction that was so incapacitating. Around the time of Covid, you sought out help from a colleague who kind of then helped you guide you through this, where he was the one that helped me piece it together and basically said, hey, you know, you got it.

And so do all these other people. And when he went name by name of people that I, you know, had a lot and spent a lot of time with, and these are, you know, these were some of the toughest guys on planet Earth, you know, who were really struggling.

And the guy that I was on the phone with, you know, I, I trusted him wholly and he knew me when I first come in before I was ever even, I guess, indoctrinated into the regiment.

He knew me. So he he knew who I was, and he also knew who I'd become. So that was that was probably the the biggest help is for him to say, hey, like it or not, you know, sounds like you got this.

Just like all the rest of us. So that's really what flipped the switch in my head, because up to that point, if somebody would have offered that, that's what I had, I'd probably taken offense to it.

Well, I mean, I know I would have it would have been offensive for me to think that, you know, I was not more resilient than that. You know, we trained to be resilient. Yeah.

And the fact was, I had went for ten years not having those visceral responses. Now, as I look back and look at the way I was living my life, yeah, I was definitely self-medicating.

It was definitely covering up some of those responses or prolonging them. But you know that the way we exercised our jobs was, you know, we would do things we, we we training or not, we were not allowed to come home and talk about it.

We had things we could talk about and things that we couldn't talk about and the things that we couldn't talk about. We didn't talk about their families and we didn't talk about it with each other.

And it wasn't till, you know, I started well, later on in my recovery, I began kind of writing some of these, these things out just for myself, just to take to go through them and, and that was a big, big game changer.

That and the Academy, even though there wasn't a therapist involved, it did start to open me up for, you know, just a different way of thinking, a different a different, you know, I would say, well, you know, maybe that is maybe instead of being just so cut and dried and in my ways, ketamine really the beginning of it, it really kind of let me look at things in a different way, in ways that I would've never looked at before.

And I found it to be a more accurate way of looking at things. Did that way of looking at things. How did that emerge? I believe through the process of the Academy.

Like I said, even though there wasn't a therapist there, it did begin to kind of cap on the window and crack. The team meant that I had just covered, covered and covered, you know, there was events that took place I just cemented over and kept going, you know, and that's kind of the way we got through it.

It worked short term. But, you know, at some point that stuff, it all comes out. And for me, it came out, it came out sideways in the form of terrifying fear.

And that fear came out. I would disguise the fear and it would come out in the form of anger. And then the anger gave way to just real childlike fear.

A lot of a lot of weeping. A lot of, you know, I would and I never knew when that would come on. And when it came on, I couldn't do nothing about it. It would come on in grocery stores, driving down the road, church services a lot, and in grocery stores, and certainly every time a helicopter went, flew overhead.

What was the support or the treatments that helped you during this initial time? You mentioned writing. You mentioned talking to your friend. I had a friend that was that was just really initial.

I had been given as a process. Like I mentioned earlier, I hadn't had a drink since 2011, and I, I go to a 12 step program for that, and I am sponsored.

And at the time I had a sponsor who gave me the gift of writing and with the writing, you know, I'd write three pages a day every morning. And with that writing, I began to piece together these.

Were you know, these are letters, letters to God and letters that I would read to my sponsor. And it would give my sponsor three pages of information about how I was doing that particular day.

And it was really a kind of a failsafe on to, to keep my sponsor informed, but to keep me on the right side of the road. And, you know, I when I say I didn't have therapy with the ketamine, I didn't where I was receiving the ketamine treatment.

But I did have a therapist, through that other, you know, 12 step program in the form of a sponsor. You know that program, they say if you have outside troubles, you know, seek outside help. And that's what I was doing.

But I did find that each program, kind of helped out the other. Now, once I came to California, what ended up happening is I ended up having to leave that job because there was so much activity with the aircraft.

I was in a metal building and I would just when they would fly over, what would happen is my employer would lose a good man for and I didn't know how long it sometimes it would be 20 minutes, sometimes it'd be an hour and a half, sometimes it would be for the entire rest of the day.

I was just I would sit there exhausted. I would have, I would sweat, I would just I would soak my shirt. The visceral response wasn't just physical and bending over.

I mean, I would, I'd be soaking wet. It was a terrible thing. And, you know, I was I was carrying that by myself, but I

knew I was missing huge things on work.

So I actually had to pull the the heads of state in and let them know that, that I was not doing the job I thought that they thought I was doing. I wasn't doing the great job they thought I was doing, and they oh no, no, no, you're.

And I said, no, I'm not. I miss them a lot. And that was probably the hardest conversation that I'd ever had, is I'm telling those guys that I was no longer the guy that that they had hired to do that job, and it was it would have been irresponsible for me to continue.

Very irresponsible, because I knew that I was missing big things and and they didn't know that. So I had that conversation and they tried to get me to stay, and I had to convince them that, no, it was much worse than they thought.

You know, most of the time I was alone on the job, so nobody knew what what I was going through except me and the one guy that I'd called on the phone who had nothing to do with my my work.

So they finally got the point that that, you know, really something had happened along the way. Something had mechanically slipped in my mind, in my mind, you know, I called my brain housing group.

I mean, something had definitely slipped and I was no longer able to do the job. So and it was a great job. It was. I was making really good money, wasn't working too terribly hard.

It was a great job. And it was. And I felt like I was, you know, really making a difference.

Writing, Sponsorship, and Early Recovery

So having that conversation, like I said, that was the toughest conversation I had ever had. But I knew I needed to have it, and I got a guy in there and was able to get him trained up best I could.

And then, you know, I found my own backfill, and I moved to California. When I moved to California, I was I immediately plugged in with the VA. I knew I couldn't work because it had become a safety issue.

You know, I just, you know, I'm an old roofer, but, I mean, I certainly couldn't be hanging on the top of the ladder somewhere and have one of these things, you know, happened because I just I didn't know how my body was going to respond.

So I got with the VA, and I had heard a rumor that the VA out here was recognizing ketamine therapy as modality for guys like me and what I'd been diagnosed with.

I'm 100% VA disabled, and a big part of that 100% is PTSD. A complex PTSD, which is multiple events and severe depression as a result of the PTSD. So I plugged myself in immediately with the VA, and I had done everything that the VA had to offer in Virginia except for taking meds.

Well, I had had had some meds, I tried the meds and I knew that's not the route I wanted. I did not want to go that route, but as far as I did narrative processing, I did a group therapy.

Here, I can't think. But anyway, whatever they had to offer, I did it in Virginia and I came out to California and, you know, they looked at my records and I was interested in what else could I do?

My buddy who I initially called, who, like I said, had a lot more experiences with this than me, said, you know, Tim, the VA can't help you. He said, we're 1%.

That's 1% of vets did. But you and I did. And and to be honest with you, the VA has no idea what to even do with you, he said. But there are outside treatments and he was talking about ketamine.

He was talking about some even more bizarre stuff down that was going on down in Mexico, which I wasn't really I was I wasn't to I wasn't considering that as a modality for me anyway.

And but anyway, I found out that ketamine was offered and it was considered as a modality for health. I had to there was one person in the bed that I had to convince that I was a candidate for it, and what that was to to be a candidate, I had to have ruled out all the different medications, the, the types of SSRI or whatever.

I, I can't remember now, but there's different kinds of medications and they were able to look back in my records and see, yep, he did try those. And as soon as soon as she was able to identify that, that opened the door for me.

And through just a while. I don't believe in coincidences, but that's what it looked like through someone that my girlfriend knew. I found out about shamans, and I actually went to the VA with Sean minds as kind of the the target place for where I wanted to go on just because I had heard good things.

And and the rest is, you know, that that's kind of how it happened. Once I got there, of course, I found out it was a therapist. It's you. Can you take your healing now?

And, you know, from here to it really went at a steep angle for me. Yeah. And, you know, I continue, you know, I can definitely hear so much courage, so much agency, even as you're thinking back about the things that you needed and the ownership that you took in something that is often stigmatized in health care.

Right? Mental health, being incapacitated, being unable to do the things that you wanted to do. There's so much stigma around that. And yet your awareness and your motivation to really heal really showed up very early.

You know, from from what it sounds like you really went through and struggled, but definitely, you know, you went through the process, which is not a lot of people can do that.

And I really want to give you that, that credit for the work that you did even before you showed up finding those resources, that and really just acknowledging where you were at the time and the impact it was having on you in your in your life at that time, especially around Covid, right?

Which is where a lot of things showed up in, in the in the health care setting as a physician, really mental health just took a downward spiral and all we saw was in any setting was the impact that that mental illness had with Covid and with the impact of that access and the loss of access had to health care.

So I really want to give you a lot of credit for navigating through through all that. Yeah. If you remember right, there was there was a call that went out and said that, you know, if you weren't priority, they they didn't even want you to leave your house.

And I was considered a priority. So I was driving those streets. That used to be, you know, so much more filled with people and and it it really a hometown USA where I lived there really began to look like an occupied country because that's what happens in occupied country.

They tell civilians to stay in and you'll see the police force kind of come out. And that's exactly what happened. So that I think that was the big trigger.

That and walking into places not having a mask and getting, you know, the hand in the face, hey, you can't come in here. That was that was terribly hard for me.

Or like I said, at least from my subconscious, like, you know, something? Some definitely triggered for sure. What was your mindset like? You know, for a lot of people who don't haven't done ketamine or anything like this, because ketamine is and I say this to patients, it's not it's it's only a tool.

It's not a medicine that's going to suppress your symptoms. It's not the medicine that's going to cure you is a tool to get you to where you need to go if you're open and trust that process.

But coming into it, would you be able to kind of give us a little bit of a an idea of what that first session was like when you did it in Virginia versus the session that you had with therapy?

Moving to California and VA Approval

When I first came into Virginia, I remember I was I was tearful and I was terrified not of the medicine, not of the trip, not any of that. You know, I'd I pretty much field tested my body and all kind of stuff.

When I was younger. I was terrified that I wasn't going to get any better. I was terrified that they were going to throw everything they had at me, and it wasn't going to work.

And that was my biggest fears that, all right, here I am. I mean, I, I've literally done anything. I had tried anything. And at this point I figured, okay, this is this is pretty heavy duty medicine.

And of course, you know, I thought I was special, that I was different, that my case was worse than the next guy. Would that not that not to be true, but yeah, I was terrified that that it wasn't going to work as opposed to my came to California.

The other thing was the difference, you know, you got to remember I was coming out of pocket out there. So I would I would go for, you know, I did the initial battery of maybe I think maybe 8 to 10 infusions pretty, pretty quick back to back.

And they wanted to see me about every month. Well that was starting to get pretty expensive, especially after they to ten initials and you know, at first it was it was easy to hit every month.

But after that it was getting kind of expensive. So I would I would try to stretch those months and boy, it would, it would come back on me like, like a wet wool blanket.

Just when I'd get too far away from from those infusions. And like I said, this was without therapy. That was Virginia when I came here. There was no fear.

Well, the fear I had was I wasn't going to be able to convince that doctor that VA doctor on a zoom call. She was in Reno. I was in California. I was not going to convince her that I was a candidate, you know, and she was or she someone had already kind of give me a hint that probably wasn't going to be a big fan of this.

So basically, I, I needed to to really let her know what can be done for me, you know, and, and what not being on the medicine was beginning to do to me because my, the demons were coming back.

So anyway, when I, when I was approved and when I first walked in and saw you guys there, there certainly wasn't any fear. It was all just I was just so well, I was excited to that one.

I was understood, right? Because everybody wants to be understood. I really wanted to be understood because I didn't understand it. I didn't understand me, you know?

I didn't understand what had taken place in my mind. So to walk in there and be understood, to have a therapist. To have a doctor that that was that was the night and day difference, you know.

And and I can remember my first couple treatment, you know, I, you know, of course I had the therapist there with me, but I also had follow up zoom calls with the therapist In the end, the psychologist, Doctor Smith, if you remember, you know, my treat.

Yeah. It's like, you know, everybody, everybody got it. You know, they got it. And I remember telling him, hey, doc, you know, ketamine is great, but the symptoms do come back, you know, maybe not as strong, but they come back and and he got it.

You know, he got it. And he advocated for me. So there was no fear like I had. There was no fear that it that it wasn't going to work because I knew I already knew it was going to work.

And if it worked in the in the spank machine room, like we called it, then I it was certainly going to work. Having the therapist and and putting some emphasis on sight and setting and you know, it was it was just it was a night and day experience.

And I knew that when I walked into the building, even before we got started, when I first walked into the building, it was so night and day compared. I mean, when I was walking into Virginia, it was it was like a methadone clinic.

It was it was just night and day, different, different experience. So no fear. Just relieved that, you know, these people seemed to get me real. You know, they got me. They understood.

And that's really important that you say that because everybody's different and everybody's and process and everybody's experience in in their condition is so unique.

And in narrative medicine really talk about the story in the context of conditions. Right. What is that context or that story that that person lives in and experiences on a day to day basis that they know best?

No one can know that other than you. And there is a lot of humility that has to be there for, I think, in health care to really acknowledge that, that there is something that we don't know as physicians and we really have to learn as you experience and share to that process as it unfolds in treatment.

So I really want to acknowledge that that is an important part of, of this work is that the answers are not there and there is so much more that's revealed as as people process through that trauma and then an illness, you know, and it was fairly early on in, you'll remember this and you know, this, but for the for the benefit of the, of the audience, you know, I know it was after my initial battery and it was one of my infusions where you actually came in the room and, and I was in the twilight.

I mean, I was just barely I don't think I'd even had the, the, the, the, the little bit of food there. What do we call it? The Nourish bowl. The Nourish Bowl.

I hadn't even got to the point where I could even wrap my hands around eating the nourishment bowl yet. And you walked in. But I could hear your words, and I could.

I could hear your words and I could process with my mind. But I really wasn't moving well yet. And this kind of still. And you walked in and you said, hey, this is this is an exercise I like to do when patients are in the what we call the twilight state.

And you had a printout, photocopy of two anatomical bodies, male bodies anatomically standing there, one on the left and one on the right, exactly the same.

And a huge bowl of chalk. And it and in that bowl was, I don't know, 30 or 40 different colors of chalk. And you told me two with the man on the left do the best I could to pick colors from the ball.

You said colors from the ball and draw that man the way he felt prior to the infusion. And when I was done with that, I think you gave me all the instructions up front.

I think you said when you're done with that, I want to to take a look at the man on the right and draw him with, again with colors of your choice on what you feel like.

Now post ketamine after the infusion and and it was on a clipboard. And the reason why I know it was on a clipboard because of the pressure I was applying.

And I grabbed the ad, all those colors and it wasn't me. It was my subconscious because I remember my arm just

kind of shot out there and it grabbed the brightest color red piece of chalk that I could see in there, brick red.

Therapeutic Ketamine and Body Mapping

And I grab that piece of chalk, and my hand just started whipping across that paper and. You just thought that I was just scribbling. And you said, okay.

And I did that for a while, and I can remember not even really kind of looking at the paper coming out of the corner of my eyes. But I was kind of immobilized.

But my arm was it, and it was just carrying on like it was, you know, a graph reading lie detector test or a meter reading, an earthquake. You know? Yeah.

And was just going and I remember the chalk was crumbling under the weight. I was really applying pressure. And that chalk was just breaking and tears were flowing down my face.

And it was almost like there was pain, anger, angst, fear, trauma was being extracted from my body through that, these movements. And then you said, okay, and I was done, and you said, okay, now I want you to go to the next one, and this one's after how you feel now.

And I grabbed the coolest, lightest color, light blue piece of chalk in there. And I very carefully and slowly kind of colored them all in blue. Stayed in the lines.

Well, when I did come out of the twilight and I did get back into my body, I did have my nourishment bowl and I, you know, ten fingers, ten toes and all that, and everything came back, and I was there, ready for my ride home, walking and talking and moving.

You showed me that piece of paper. And the guy on the left, I had drawn very accurately a line across the top of the left ankle where I had to tip the brake.

I had drawn red on my both feet, or I have chronic plantar fasciitis. My knees. I had colored in red and stayed between the lines, the knees ed colored in red, my hips, which are littered with arthritis from, you know, 100 plus low level static line jumps on ground I'd never seen before in the middle of the night, you know, hard landings, shoulders that I was having trouble with everywhere.

I was having trouble telling my heart I drew red in my brain, I drew red, and it was my subconscious that very accurately drew out every injury and every portion of pain in my body in red. That was my first indication that, oh, man, we're we're really onto something here.

And I thought, this woman, she's you know, I mean, she sees it in this. This is she's really got something going on here. And, I really, you know, I knew that, you know, God had me in the right place for sure.

And, you know, we've looked at that picture a couple times since then and, and reflected on that. And it is the accuracy in that is, is, is actually mind blowing.

And for anybody that didn't believe and in this work, I mean, I, I feel like it, I feel like I can take that picture and go on and I don't know David Letterman show if he's still around, I don't know.

I mean, that that was amazing to me. That really was amazing to me. And any, any doubt I had about, you know, a therapy assistant had him in and, having a therapist in the room and some people that really knew what they were doing that I had no doubt.

I mean, that that was actually that was the most powerful experience that I think I've had in my recovery. And I've, you know, I've done a lot for my recovery.

I was a that was pretty mind blowing. And I guess you've done that with other people. But and, and I will say your process was truly what you what people each person extract, what they present, what they feel, what they how they see themselves, how they see their body, how they disconnect and how connect did they feel to their to that body, to feeling body map.

It has been used in different somatic therapies. And as well as looking at the body right. The feeling body met everybody's sense of emotion. That visceral emotion that the body carries is is in the cells of the body.

It's in every part. It's a memory that the body holds and has to do in times of fear, in times of stress and turmoil, the body has to respond, but then it becomes so dysregulated.

When it loses its loses, it's indicative of why it's there. And I want to highlight also your subconscious and conscious knowing, because this really comes to Carl Jung's work of what the conscious and unconscious mind does, and easily Carl Jung says, until you can make the unconscious conscious, it will direct your life and you will call it fate.

Yeah. And by making something that was so subconscious to you, so conscious, you were able to really see it, visualize it, represent it in so many different ways as even in the exercise and even as a visual and even in that emotional state, that twilight state, as you described.

Because that's the ideal, that's the window where we really see so much opportunity to really engage with the dissolving of the ego gets in the way of treatment.

Right? When the ego is there, the access to that true self is, is going to be overshadowed by that ego. And in that twilight state, we are actually we shed a little bit of our ego and really are able to access ourselves with creativity, with imagination, with reflection.

So really is a place of discovery and which is what you did. You discovered yourself in in ways that not many people can do. And are willing to do. And I think that willingness is really where you show up.

And I've heard in recovery that ego stands for edging God out, that it's a good edging God out. Well, true to, you know, and like you said, not able to get any work done because ego standing up present up front running the show.

Yeah, yeah. And I will share that picture. I was trying to pull up your picture, but I do have it. And I will for the audience, you know, really put that in the show notes.

If you are okay with that. Oh, yeah. I think it's I think it's powerful and just just knowing that, you know, really my, my arms going a hundred miles an hour, there was chalk dust flying everywhere and broken bits.

But if you look at the drawing, it looked like I really put some time into it. And each each mark on there is actual. And it's an injury. Yeah it is. I remember your hand was trembling.

We did it as a four minute exercise and you, you did the first part of it in within a minute or so and you said okay, I'm done. And I said, do you want to then reflect on the other part?

And then he noticed it and he said, yeah, okay. You continued on with the blue. Yeah. With the blue. Right. So it's really the the bridging, the integration of, of yourself.

Right. Of the part of you that was really hurting and the part of you that wanted to heal on the part of you that was really, truly you and where you are now.

You're powerful. Yeah. There is a difference also to what physicians thinks. When patients are healed, they'll say, okay, you're all cured now you're healed.

And to when the patient feels healed, when does when the patient feel healed is not necessarily the same time that when the doctor says you're healed, what would you say for yourself?

What healed for you? And when did that really happen? Well, what my experience too has been, you know, each level of healing, you know, it's like peeling back an onion.

I find another level that needs attention. The one monitor I had, the introduced me to write in three page letters each morning, explained it to me like this.

I was told, look, you know, you're pretty sick and you can get well, you can get healthy. You're not bad trying to get good, but but you are sick and you can't get healthy.

You can get well. But it was explained like, you know, I arrived to the party. I arrived to recovery. A 55 gallon drum of milk, and each day I write a letter.

Each. Ketamine infusion. Each time I go to group therapy, each time I have a conversation with my maker, I take a teaspoon of that milk and that 55 gallon drum, and I take it out of the drum, and I throw it on the ground, and I take a teaspoon of clear water, and I put it in the drum.

And over a lifetime I every day I go and I maybe twice a day I take two teaspoons of milk and I pull it out of the 55 gallon drum, and then I take a teaspoon to clear water, and I dump it in the drum.

Over time, that milk's going to get thinner, thinner, thinner. But it's going to be white for a long, long time, probably for life. Although it's going to be very thin.

It's not going to taste like milk any more months. It's going to be quite watered down. And I think why they say dying when they say kicking the bucket is that's, you know, you kick the bucket over, spill it and and that's it.

So I feel like I got, you know, I'm 56 years old and it took me 56 years to get where I am. And it makes sense that that it's going to take at least that to to climb back out.

And sometimes as I fall through the tar and get to my sixth point, some self-induced and some through no fault of my own situational, you know, areas in my life where I found myself in situations that added to my sickness.

But anyway, the further I go down that muck down that bucket of tar.

What Healing Means Over Time

Now as I become healthy, I got to come back through it. And sometimes getting healthy feels like you're going insane because you're passing through those same areas, you know, coming back towards, towards health.

And and that's kind of the way I look at it. I don't expect to be done by next Tuesday. I would like that to be the case. But I know that's not the reality.

And by by putting myself in that kind of a time constraint that's unhealthy in itself. You know, I just it's not realistic. I think I'm going to be at this for a long time.

I think I got to surround myself with good people. I got to have relationships with people that, you know, are people that I can trust. And, you know, I just, I, I work on making better decisions every day, you know.

I don't know, I mean, I, I think, I think if I think for someone to sit back and cross their arms and say, okay, I've arrived, I think they're really cutting themselves short.

Thank you for bringing in that metaphor and that analogy of something that really gives a lot of understanding and in a very creative way, about what healing feels like and how, you know, there's a lot of myths and misconceptions about healing.

Right? And that it is a it's a daily thing. It's a process that that requires so much more than just the medicine. It is

that connection to, to yourself.

It's that connection to people around you. And I see this also that when, when that shift happens from where you were to where you are now, there's always that fear of going back and falling back.

And then it's and then there's that who am I now? And everybody else, you know, there's another metaphor that comes up, which has to do with Plato's Allegory of the cave when the when and it's an it's an allegory to story around this man.

Yeah. Along with other prisoners. And they're chained to the wall of a cave. And behind the wall of that cave is a walkway. But there's a fire behind the wall, and the people walking back and forth behind that wall makes like shadows on the wall facing the prisoners who are chained.

You know, to to the wall that they cannot see behind that wall. They can only see the shadows that are made on that wall. And they live there and they live in this dark world.

All they see is the shadows. And they believe that to be the world that is what they see is what is real for them. And to one day, when one of the prisoners leaves the cave, is able to escape.

He's able to leave the cave and step out into the light, and he sees everything of the world outside its brightest people. There's things happening, and he's like, wow, this is the world!

So what I was seeing was something else. And what it what is real is something else. And excited, you know, he comes back into the cave to tell the the other prisoners who are still chained to the, to the wall.

And as he comes back into that dark cave, of course, now he can't see in the dark anymore, you know. And so he's rubbing his eyes and he's trying to tell them, those prisoners that, you know, I have to tell you about the world.

This is not the world you're seeing. And he's rubbing me, and he looks kind of crazy to them. And they look at him like, what's wrong with you? You've lost. You can't see anymore. And he's.

No, no, no, you have to understand. This is my what? What you're seeing is not real. What? The world is out there and but they don't believe him. And they stay attached to the wall, knowing that they could still be free.

But they they believe this is the reality, that they they accept that they are fixed to. And this goes to, you know, what happens when people heal too, and you know that this the perceptions change, the world changes, their views change.

And coming back to something that was so familiar isn't so much more different. And in that May involved, you know, how they used to be with their family or how they and how they're seen now and to, you know, the effect of what we really are attached to, right?

Social media, you know, people believe that the world is in what they see in their phones, and they believe that to be true. But it can only change can only happen when one is able to say, I can see things differently, I can see things broadly, I can.

And this is also where ketamine and medicines like this, when people are really doing the work, are able to open and shift into a broader understanding of themselves and the world that they live in.

So I just wanted to share that with you. Is is, as I see this among so many patients. So what are the things that you would tell somebody, whether it be a veteran or a person you saw on the street, or a friend, just like the friend that you talked to?

What would you tell them about ketamine treatments, trauma and ways of healing? I would encourage, you know, those who are suffering depression, PTSD, suicide ideologies, it's a game changer.

I think there's there's there's work that can go along with it that can enhance it. I think for me, it's writing. But even my writing has improved since that, since the Academy, you know, my writing goes a little bit deeper.

It's a little more clear. It just for me, it's been a game changer for vets that I know that have done it. It's been a game changer. I think if they're on the fence, it's probably a lot of fear.

I think there's a lot of, I think ketamine, you know, got a bad rap somewhere along the line. I have heard recently that they were using ketamine as a, as a battlefield, kind of like a morphine.

Yeah. And and it did not work out so well because they're hauling the, you know, the people go under, but they're still receiving information and, you know, they wake up in Long Stool Germany and all of a sudden they got PTSD because, you know, so I don't think it's for, for every event.

But as far as a modality for healing, I think it's a game changer. I definitely wouldn't be where I am today without it. I mean, you and I wouldn't be having this conversation or or any kind of conversation.

I wouldn't be having any kind of conversation with anybody on on this level without it. It's definitely turned my life around. you know, it's it's making.

I'm I'm in a relationship, you know, that's that's possible for me today which I don't know that it's ever going to totally shut down the some of the visceral responses I have.

I don't think I'm ever going to be a, you know, CEO of a corporation because of some damage done. I don't I don't think that's ever coming back. But, you know, the fact is I'm okay with it today.

Advice on Ketamine, Trauma, and Recovery

I'm okay with that. I'm okay being in recovery. I'm I'm okay with the understanding that, you know, I'm probably going to be in recovery for for the rest.

I mean, I hope I am I'm just so thankful, you know, I'm so thankful to to to have, you know, a team of people around me and they get it, you know, like you said, it's not it's not the everything, but it's a huge it's a huge ingredient in my in my health today, in my mental health and my emotional well-being.

I mean, I used to I used to really, really struggle. And sometimes I still do. But, you know, I struggle well, and that's what you know, I went to, like, I don't know, I want to call it a PTSD camp is Boulder Crest, Virginia.

And they got quite a program there. And that's what they say, that it was put on by vets who recovered, are recovering from post-traumatic stress. And and basically they say, hey, guys, you know, if you got this, you're probably going to have it and you're going to struggle.

But the idea is to struggle well and to thrive, you know, and you can thrive again. You might not have the job you want. You might not even qualify to be the Walmart greeter because you might be a little gruff, or you might be you might not be the right guy for that.

But but I can, you know, I struggle well today. I do well, I do things, you know, I, I have fun, I, I, you know, I don't just do recovery all day, you know, I, I, you know, the other day we, we went paddle boarding.

That kind of stuff was off the table for me. You wouldn't have found me out there standing on a paddle board or even thinking I could stand on a paddle board.

You know, you told me one time in a group setting. Hey, guys, you know, go have fun, do something, have fun. It would go take a go, go, go have fun. And you know, today I do that.

Today, Arleen and I will get on my motorcycle and we'll take a trip, you know? And it doesn't have to be crazy, but

we have a lot of fun. And, you know, I, I, I struggle.

Well I got, I got the sticker on one of my cards that says struggle. Well you know, and that's been the difference for me. And you know, I, I think I said it in the group therapy the day, if you took a real close up look, you might see this a little bit in my life, but, you know, just like, I don't know one of these guys that sells me.

On the fact that he can do great things with your money. You know, if you took a kind of a view from out, you know, you you would see my life definitely improving and a pretty steep slope, you know, a pretty steep slope when you consider where I was even when I first walked into to show a month, you know, I'll walk in, you know, dragging my lip or whatever, dragging my lip, limping from my hip, you know, I mean, I was even even then, which wasn't too terribly long ago, you know, the, the, the improvements.

It's there, you know, it's quantifiable. Today I can quantify my recovery, you know, and, you know, I have these have these good ideas that come up, you know, those ideas were in me.

But, you know, the whole idea of, of, of ketamine is, you know, it allows my conscious thought, my circular chatter, my unresolved chatter, my, you know, just to lay down for that 90 minutes or whatever it is and, and let my subconscious come up and, you know, things that I heard or things God put on my heart that have just been absolutely overrun with the chatter and some of the poor decisions that I made and the terrible neighborhoods I've allowed myself to walk through.

You know it. It allows that to lay down long enough for the stuff in there, that's deep within me to come to light. And all of a sudden I feel like I got this great idea.

Well, you know, it did, didn't just pop up it it it was in there. It was in there. And it was been been allowed to unshackle, you know, just and that that's the biggest thing I think so many things, so many parts of you so much.

Thank you for sharing that. And thank you for allowing this conversation. And, you know, and being vulnerable in this space, I think it's another place to to really talk about for a lot of people that thank you for being here and sharing to your story and giving others an opportunity to see the inside view of what this kind of looks like from your perspective.

It gives. So it's so much more powerful than, you know, than what we, you know, we talk about in as a prescription night your, your your reflection and what do you what you've done and what you experience really gives us so much more hope for us, so many others.

So thank you for being here for that. And thanks for having me, doc. You're welcome. Thanks for taking the shot. Thank you.