Introduction to Dr. Greg Eckel

Welcome to this episode of the Reverse Alzheimer's Summit. I'm delighted to introduce you to my friend and colleague, Dr. Greg Eckel. His journey into Naturopathic and Chinese Medicine began in the mid-90's when he noticed the overmedication of children while he was teaching preschool.

Then in 2001, he co-founded the Nature Cures Clinic in Portland, Oregon, and most recently has founded Energy4Life Centers a wellness and recharging center located in Park City, Utah.

His unique combination of naturopathy and Chinese medicine provides an array of tools to treat acute and chronic illness. Emphasizing prevention and wellness principles.

He's been heavily focused on neurodegenerative diseases because of his own personal experience supporting his wife through Creutzfeldt-Jakob disease. So he's deeply dove into regenerative medicine and has some really cutting edge things to share with us.

He's been featured on major networks like ABC, NBC and Fox. He's reached over 150,000 people online. And we are so, so lucky to have him here today. Welcome. Thank you.

So, you know, we started kind of catching up before I hit record and I was like, wait, wait, we've got to record this because it's such exciting stuff that you're up to.

So you move to Utah and you have this kind of new motto after everything that you learned over decades in Portland. You kind of had this opportunity for a rebirth and to kind of reconfigure things so that you could really help people on a different level.

Just dove into it. Tell us what's going on at your Energy4Life Centers. Yeah. Thank you. It you know, it is the culmination of my life's work. And I got into brain regeneration from the loss of my late wife, Soraya.

Personal Loss and the Origin of Brain Regeneration Work

She had a very rare neurodegenerative condition called Creutzfeldt-Jakob disease, which is a mouthful. That's Mad Cow Syndrome. And people. And that catapulted me into this specialty.

You know, I always knew the medical system was broken. Being in practice up to that point, 17 years. But going through it with my wife's life on the line, it was tragic.

And as a physician, I wasn't even able to navigate the system and I knew how to speak the language. Unfortunately, you know what? I uncover through that process?

It didn't help Soraya one iota. It I don't regret the process at all. I, you know, having, you know, found love on the planet in with this magical being named Soraya.

You know, we blended our family lives, her three kids and my two. We even had a maid named Alice. We blended our medical practices. She was a certified nurse midwife, nurse practitioner.

I'm Naturopathic Chinese Medicine provider. And we bought a house. And in that buying of the house, this story became about this orange fiesta where plate we misplaced a plate.

But that became the harbinger of an eerie, eerie Groundhog Day of Soraya's memory, eroding rapidly. It was rapidly progressing dementia in a 42 to 43 year old woman.

I went looking for the usual suspects. Was it lime mold, heavy metal toxicity? Was it perimenopause? You know, there all of these things are in the differential when we look at mind Alzheimer's, dementia, mild cognitive impairment.

But in someone so young it quickly became it isn't any of these. Dr. Craig And so I went looking for solutions, talking to world experts in brain regeneration and memory loss.

Some ominous differentials came in there, and I always knew Soraya was one in a million. Unfortunately, the medical community agreed with me, and she has this very rare degenerative disorder on the, you know, differential.

So I went looking for solutions around that. You know, navigating the grief and the loss and all of that. It ripped me open as a human being and oddly enough re-instated my faith in unity consciousness.

And I share this story because it really is the genesis as to what we're doing today here at the Energy4Life Centers. one, I know that love is the answer.

You know, it is. It was amazing time that I had with Soraya. The loss was really profound. For a little while, I became a grief ambassador. You know, we don't deal with grief well in our culture, but the uncovering of what I call my fancy protocol for brain regeneration and the gifts that it is giving, and really my purpose and passion reignited.

I didn't want my suffering to be for not, you know, these therapies that I found. They didn't help her at all. But what they are doing is I'm sharing them with as many people as I can.

So I really appreciate the opportunity to share here with the listeners and viewers of the summit and also here to provide some hope, because we're seeing things that should not reverse, reverse.

Right. We've been told so many times for so many years that Alzheimer's is not reversible, that there's nothing you can do about it to suggest otherwise.

I remember learning that in Naturopathic school, to suggest that you could do something about Alzheimer's would be to give false hope and to be dishonest.

And yet we're watching it happen. So is it truly possible? Have you seen this as well? Is it truly possible to reverse the effects of neurodegenerative diseases?

It truly is. Now, I am not making the claim that I am doing that. It is the innate intelligence doing it when, you know, stacked properly with enough, basically enough weight on the other side of the scale we are seeing and I'm excited to share these stories.

And so, you know, the whole concept of Energy4Life Centers Well, number one, who doesn't want more energy for life? But two, it's a bio energetic approach.

So not only are we dealing with, you know, integrative, functional naturopathic Chinese medicine, but we're putting the bio energetic, we're bringing a quantum understanding of reality into the centers.

And when you look at that, what the heck does that mean? You know, when you look at quantum physics versus Newtonian physics, we all grew up with Newtonian physics.

Point A to be time in between. Well, we're stacking that up. And when you look at the validity of just a system of physics, Newtonian physics, I think is provable up to about 92%.

And quantum physics is provable up to about a consistency of 96%. So there's actually more evidence to support that reality. Now, I stand for the and we're going to utilize both time and space and we're going to use that quantum understanding of the universe to.

Totally advance fascinated by this.

Can Neurodegenerative Disease Be Reversed?

And, and I want to make it a little bit tangible, like, what is this mean? Somebody walks into an Energy4Life Centers Yeah. And what is the intervention or what is what is it that they're experiencing?

Like, take us through it. Yeah. So we start with first three words. So it's detect and then it's correct and then it's protect. So in the detection, we're doing all of the things that you would do going to a functional, integrative physician.

We're doing blood work, we're doing functional stool analysis, heavy metal testing, hormone testing, gut microbiome testing. Maybe we're testing for mold.

Maybe we're testing for Lyme. It depends on you know, where the patient leads us. In addition to that, though, then we're doing a voice scan. This is a bio energetic reading of the body.

We use the vocal cords as a hologram for the whole day. So, you know, I always grew up saying, well, grew up in medical school saying the microcosm is in the macrocosm.

The macrocosm is in the microcosm. Well, or you are in the universe. The universe is in you or you are the universe. The universe is you. And that was a quaint saying in these ancient Chinese textbooks.

But to actually experience that and we know the kind of the innate laws of the universe with the golden ratio. And, you know, there's all of these mathematics that is, you know, it's incredible just how our body is laid out in in proportion and in relation to each other.

Like it's not a coincidence. I don't think so. We use the voice, we use bio impedance measurement. Parts of the body are looking at conductivity with skin are technology in impedance in the tissues for folks that are in the office as well.

So we're utilizing bio energetic scanning measurements in addition to all of the functional anatomical physiologic biochemical readings that we're more used to as well.

Got it. And so through this, you're you're detecting some sort of information from from the bio impedance, from the skin, from the voice. And then does that impact how you treat someone?

It does. So it really gives an amazing, amazing read. You get about 11 pages tabs of different bio energetic assays. Now, it doesn't mean so it's an energetic read.

So we're we're utilizing biochemistry physiology in addition to bringing so it it really deepens our conversation and it starts us out on the right path.

So it will it's based off of the Chinese medicine system. Peter Frazier And Harry Massey were the inventors of this technology, and it will. So it's based off of Chinese medicine.

Then they did some energetic testing to tie it together and it's eerily accurate with false diagnosis. So I've been studying Chinese pulse diagnosis for 26 years and I've been sitting at some great feet, like measuring pulses and the the voice scan actually comes up with the same imbalances that I have trained my fingertips to.

So I don't like to admit that because, gosh, that would have saved me some time, right?

Energy4Lifeu2019s Detect, Correct, Protect Approach

I'm glad I have the skill, but it's also nice to be able to corroborate it in reality. And so it comes up with foundational

stuff to do lifestyle wise.

It will also for programed info pseudo calls so we can add those types of remedies into our treatment regimen as well. Yeah, I guess I heard you talking about love and I Chinese medicine.

So I'm like, are these is it supplements? Is it a hug? Is it acupuncture? What exactly does it tell people to get more of or less of what. It actually can?

So it it has some bio energetic components around your hero's journey. So it actually maps that out very well. It also looks at emotional status and state like, you know, there's positive and negative emotions and I try not to create the polarity with them.

They're just kind of energetic packets that are getting expressed by us. However, there are some themes that we see for folks and around unresolved trauma with neurodegeneration and Alzheimer's in particular.

So it's looking at levels of stress, it's looking at emotional status, it's looking at what's in the field or the frequency around a being so, you know, this physical body where particle matter form but it's looking at the the the waves the waves around the body that are creating structure or dysfunction so you can give information to remember have the innate intelligence remember wholeness and pull it kind of basically pull it back to that.

And I know so many people who are supporting someone with Alzheimer's caregivers, care partners, many of whom are present on on this summit. They are experienced.

And the trauma of right of having a partner potentially go to being a dependent, having a parent become more like a child, having those intense conversations are those those days where someone is is really struggling and having them say things that they never would have said earlier in life to someone they hadn't.

And so that in and of itself can feel very traumatic. And so I'm curious, do you support the when you see someone with with a neurodegenerative disease, are you often seeing the care partner as well?

You have the care for the caretaker is very important because without them the ship goes down. And so what we do, we do have programs for the caregivers as well.

Oftentimes we find, you know, it's like, look, my my ship is full. I got to just deal with my loved one. I'm going to come back to me. But we do encourage folks like at the center here.

So we do these assessments and we can do them really around the world. Ultimately, though, we're wanting people to come here because the the therapies and my fancy approach is what I call it for brain regeneration.

I haven't figured out how to deliver the substances through that green dot yet into the living room. We're looking to do that. But bringing in and layering the therapeutics through that bio energetic flagship resonance and I'll use these I'm using those words on purpose because I know people, you don't really talk about it that way.

But the results, I think, really speak for themselves. So, you know, we get the foundational underpinnings figured out. We invite somebody out what I call my camp.

So they're camped out here at the center. And this is the first of eight centers. We have centers, one in coming in Connecticut, one in California, one in Florida.

You know that'll be that'll make for well, we're going to do that in 2024. And then we also have some programing for recharging centers where it's less provider dependent and more you can go in and charge your body batteries.

So to prevent a lot of this stuff from happening as well. So that's really exciting, energetic coming. And you know, we're getting great feedback from folks.

So somebody comes a story about someone who's done really well at your clinic. Perfect. I'm just getting there. So I had a patient recently. David was in, we did an EEG of his brain, so we do electroencephalogram.

His alpha wave length was very low. You know, we're looking at that alpha range. It should be between eight and 12 and he was below eight. And so we do a brain frequency training.

It's a TMS transcranial magnetic stimulation. But at one fifth the dose, it's called brain frequency. It's an overlay that goes on that machine. It's a chair with we call it the hammer of Thor.

He did about 40 trainings there. And then he went through and. I had to go back to the hammer of Thor can. Yes, I think we need a magnet. It's a magnet that you put over the locations of the brain that emits a field that will bring up the the waveform and create more coherency in the electrical activity of the brain.

So he had a very disorganized electrical signal in his brain.

Caregiver Support and Center-Based Treatment Model

And it neurofeedback. It's it's an electrical stim. So it's transcranial magnetic stimulation. So it emits a field of electricity that then helps the brain respond to that.

So it kind of feeds information in so it is a type of neurofeedback, but we're not really feeding back to the system, we're feeding into it. And then we also did our brain regeneration program, which is the biggest lever that I have in there are one sound both healing and frequency and a laser activated and guided very small embryonic like stem cell procedure.

So we went through that camp and we can talk about the particulars. But he you know, as many people get this diagnosis, it's like basically, you know, here's your discharge paper.

Go get your affairs in order and good luck. Right? Like maybe here is Aricept that really is not making a massive difference long term. He was depressed, overwhelmed, in shock from that diagnosis.

His wife was as well very retracted going through the process. They got a puppy. He's in charge of them. I thought, oh, boy, this is not a good scenario.

Like we got like a lot of needs happening in this household. He's on top of it. All him. He is. There's no accidents in the house. He's back engaged in his purpose and passions.

He's back out eating dinner with friends, socially rising. He's got his life back. The diagnosis. He had an Alzheimer's diagnosis. Oh, wow. Yeah. So. Okay, so. And then it lets them.

Yeah, let's double click on a couple of the pieces that he did. So he came in and he went through your process in terms of doing all the foundational lab work, understanding what was going on with his gut and toxins and nutrients and all that.

And then he did some additional pieces that included, you said, embryonic like stem cells can. Yeah, it varies. About. That. Yeah. So V as in Victor, very small embryonic like stem cells.

So they're not embryonic stem cells. They come from the body. These are the new kids on the block. They were discovered 25 by Dr. Ratajczak at University of Kentucky.

There still is some controversy as scientists like to study. So there's you know, we need more research. However, I will tell you, clinical evidence is in they work and they work very well.

I love them because they're they're coming from the person. They're autologous and we pull their blood. We spend their blood, we get the plasma in the plasma.

Are these dormant V cells that we then activate with the laser? And that's a patented process by Dr. Todd over cadence. He owns the patent I'm part of his medical advisory board in kind of in charge of the neuro degeneration neuro regeneration branch because of the results that we're getting here with mild cognitive impairment, dementia, Alzheimer's, Parkinson's disease, we're seeing all of these respond.

Another quick one that I have is a 65 year old retired pharmacist, Chuck. He came in not able to do one plus one math. You know, he progressed into, you know, stage two Alzheimer's during the pandemic, as a lot of our patients did with the isolation and separation, etc..

That was not a great result for folks with neuro degenerative and, you know, progression. And social isolation, well known risk factor, modifiable risk factor when it comes to cognitive decline and social isolation, so many, many people struggled massive.

And so he came in not able to do one plus one math 30 minutes after the procedure with the laser activated and guided V cells, he's rattling off multiplication factors.

Well. One month later, he came in and his wife, Kathy, said, well, Chuck has a sense of smell back like, what do you what are you talking about? Kathy said, well, you know, dogs died during the pandemic and I didn't wash the cars.

Patient Success Stories and Stem Cell Therapies

But Chuck hasn't been able to smell for 15 years, so he didn't care. Then one day he gets in there and he's like, Hey, it really smells like dirty dog in here.

So she sheepishly I was like, Well, he's got a sense of smell back. And, you know, he got his life back. He was back, you know, playing with his grandkids.

His sense of humor and wit was back at the dinner table. Really, really awesome to see that. So that's that that's really the privilege of doing this work is when you see someone engage more fully in life and just get back having someone say, I have my husband back, I have my wife back, I have my mom back, my dad back.

It's just so heartwarming. It's of course, it's the reason I get out of bed in the morning and do this work. And it's so fun to hear that there are other ways to do it.

I think this stem cell conversation. So you're on the medical advisory board, you're really involved with this. Would you mind going into the details and breaking down the different types of stem cells?

So you said you're using umbilical like there also umbilical. You also mentioned that you're using autologous. So sometimes what comes up, I have so many questions about that.

So we can break this down, but sometimes it comes. Is it older people who have neurodegenerative disease? You know, this is Alzheimer's. One of the biggest risk factors, not modifiable, is how old you are.

You're your chronological age. And what we worry about is that stem cells harvested and used from someone who's older might not be as high quality as a baby's.

So that's part of going to a to an umbilical A going to the and they're not from the fetus and not from a baby, but they're from the bullock cord. And then there is also there are legal things that we run into in the U. S.

where I think if I understand it right, the statute is that you cannot take cells out of the body and have them out for more than 24 hours and then put them in.

So the act of growing the stem cells makes it now it's illegal to put them back into the body. So and I don't know if I know enough to be dangerous, so correct me.

But that was a really great start. Dr. Heather So yeah, there's, there's different varieties. So there's from your body, so you can get them from your fat, you can get them from your bone.

And that's the part where you're saying like there, well, there is some concern for as you're older, right? We don't want to use your older cells because they're not working.

That's why your body's not able to repair itself so that those are fat drive, bone marrow drives, stem cells. There is then from out of the body, mesenchymal stem cells from placenta tissue that some people will say Wharton's jelly.

PERRY Umbilical derived stem cells are menses mesenchymal stem cells. Those were in vogue more legal in the US up until a couple of years ago. The FDA has put out some stipulations out there.

They're back in favor in the United States, but again, they're there from outside of the body. They're from healthy moms that were screened. Now there are some concerns since COVID vaccination, etc..

What is actually in the tissue? You want to know your source there. And I used to use those, but then there are V cells and these are like I call them the new kids on the block.

They come from your body. Okay. Okay. You're saying. Well, Dr. Greg, you just said if I was older, maybe they're not good. Well, they're dormant when they go dormant when we're born.

So when we light them up with a laser. Not for one minute, not for 6 minutes, but for 3 minutes. So that's the proprietary, patented process. We get the highest yield at 3 minutes and we turn these once dormant cells back on.

So when you look at their telomere length, at their methylated DNA, it's as if it's a newborn cell. So these have been in your body just waiting to be activated by the light, to be put back into your body, to heal.

And they're pluripotent so they can turn into any cell line. I We also emit frequencies around the body with skin r and palms with to influence towards nerve or joints, depending on what we're working on there.

But with this being the Alzheimer's summit, we're going to talk about nerves and nerve regeneration. So as we're active eating the cells in front of the light, we have we are emitting a field around nerve.

And then we also put those devices around the body as well. So yeah. But here he is because my clinical experience has been mostly with the umbilical cells and that's what we've had access to is what most patients have access to cost becomes an issue, but then people can go to like Panama, Colombia, Mexico and get these.

I think that's what basically you can't get in the U. S., right. And a lot of those places are expanding the cells. And there is this assumption that more is better, but cells do weird things when they are expanded outside of the body.

And so more is not necessarily better. You know, I think it's that American adage is more is better, but that doesn't play out in medicine at all. And it is rather tricky to expand cells outside of the body and, you know, going to other countries that, you know, there, again, you just want to know your source.

There's been Fed patients that have been down to Mexico with some questionable products put into their bodies. And, you know, once they're in, you can't take them out.

So, you know, I think cost is of concern on a lot of these things. But also, I would argue that having Alzheimer's is very costly, having not having your brain really, you know, that that's the ultimate cost.

And so while there isn't any guarantee in anything in medicine, we have about a 95% success rate with regards to improvement of quality of life, and so that some people have no evidence of disease.

But 95% of people are reporting back in questionnaire form improvement of quality of life. That's fascinating and really exciting and hopeful. We have not seen the same thing with the umbilical cells.

So what we see is it's very hit or miss. And even though it's still expensive and people are getting cells, some people don't get any benefit. It's just I'm.

Wondering when you've seen that, were they delivering them intranasal. Intravenously? Yeah. So that's the issue because getting through the blood brain barrier and through the lungs with those mesenchymal umbilical cord products, the cells are too large.

They get swiped in the lungs and also aren't able to pass the blood brain barrier. When I was doing the umbilical products, I was doing an intranasal procedure through a form process and the research was showing was in cerebrospinal fluid within 10 minutes.

My own you know, when I went to learn that because I was learning it to use on with Soraya, it was like, okay, how do we get these cells into the brain?

And I remember my first patient, Marc, he has Parkinson's disease. He said, Look, Doc, have you had it done on you? And I said, Well, no. He said, okay, you go get it done, and if it doesn't kill you, you can do it on me. I was like, okay, good deal.

Well, I had hip pain for a decade and I did this intranasal procedure with mesenchymal stem cells from umbilical cord. This is many years ago, but I had done everything for my hip.

V Cells, Exosomes, and Cell Signaling

I had done injection lo therapy, physical medicine, massage, yoga, you know, all of the things. Nothing got rid of the hip pain except for this. I had an intranasal procedure and within 24 hours my hip pain was gone.

It has not returned my hands. I remember my manager at the time, Bruno was like, Doc, are you okay? Because I was going like this with my hands. I was like, Oh my gosh, I have no inflammation in my hands at this moment.

I still don't. But it was really remarkable. Like I noticed the difference in 24 hours so that I like this delivery route. We actually do deliver the V cells that way as well.

I have a table that goes trend Ellenberg The head is below the feet. We have sound bulls surrounding the person as we're doing the intranasal and most of them go I. V.

But they're small enough that they go through the blood brain barrier. So one, I could just do it all live. But I like this route of administration for cell to cell communication.

And I had the pleasure of sitting down with Anthony Atala. He's a Wake Forest researcher. Doc He's growing from skin scrapings, full organs, the heart, kidney, lungs like amazing.

45 days in the lab at Wake Forest. And he says he's about 3 to 5 years away from FDA approval for that. However, I asked him, I said, All right, Anthony, I think these are working on cell to cell communication.

He said, I think you're right, but I can't go that route because I need a black and white component if I'm going to get FDA approval for growing organs in the lab from a person.

So I said, Well, at least, you know, my thinking is proper. What the research is saying, it is on cell cellular signaling and communication. You know, Mscs could have been named mesenchymal signaling cells instead of mesenchymal cells because it is about communication in the body.

So on that vein, what about Exosomes? Is there this kind of is this idea of like vesicles? It's I think of them almost like it's like a package you're getting in the mail.

It's the delivery of a message. Yeah. The cells. And they're in their envelope over there in these vesicles. But it's

not a cell itself. Right, but it delivers a signal.

And you're kind of talking about the cells themselves delivering a signal. But there's also that extraneous kind of stuff in the plasma that also delivers signals.

So do you do you post that out? Do you use exosomes? How does that work? We do. So the EXOSOMES, you know, the way I describe those is exo is out of some the cell.

So it's what is excreted out of the cell potently anti-inflammatory, there's anti-inflammatory cytokines, growth factors and signaling units in there.

But what they don't have is they don't have the pluripotent ability to become any cell line. So they're, they're a little weaker signal response. They are really amazing.

If there's a lot of inflammation in the body. I have to say that the procedure, people don't qualify for the camp if they have uncontrolled sugars, you know, hemoglobin 20 over seven.

Right. Because you're and I'm sure you're interviewing lots of folks on that with regards to the brain regeneration, brain health of Alzheimer's with diabetes of the brain.

But we are watching that in the screening measures. The other precluding thing is heavy metals. They get stored in fat and we could affectionately call each other fat heads right now with our you know, with our noggins storing a lot of those metals there.

So it's like those are big holes in the bottom of the bucket for people. But the exosomes to get back to that is, you know, really they can't they're they're a good booster.

If we're not getting results at five months mark or later, sometimes we'll we'll invite folks back in for some of those boosters with that. But the the laser also is very unique in that it is a filtered laser.

So it has much deeper penetration and into the body. Okay. So there's two, two thought processes. I want to go down both of them. But first, I want to say it's really validating to hear you say that we use the stem cells and the exosomes and that kind of thing after we've taken care of, you know, as Dr.

Bateson says, these 36 holes in the roof. So you don't want to come in hot with stem cells if you've still got heavy metals, if you've still got more toxicity, if you've still got your infections, right, if you are in that fight and defend mode, if you are being attacked by toxins or infections and defending against toxins and infections, you don't need to be building your roads and schools of the brain.

Right. You don't need to be in that that regenerative mode. In fact, you might be splitting your resource is too much to be effective. And so what I heard you say there was really validating about our approach.

It sounds like we're all on the same page there. If you're new to this, start with those foundations, of course, start with the foundations of like diet and exercise and sleep and stress management.

You can do the medicine, the functional medicine of looking at toxins and infections and nutrients and the gut and all of those pieces. And then now we get to this really exciting, fancy new stuff.

So the other place I wanted to go is tell me everything about the laser. How does it work? What kind of laser? What light? Well, how much time? Tell me everything.

Yeah. So the laser is that's the piece of the patented puzzle. So it is 743 nanometers, but that just using a 743 so our laser won't get the results that we're getting because it is on this filtration and modulation of the laser beam.

And so it's usually lasers are phase conjugated and this creates a wave form that comes together. And so where it

comes together, it's called a song modulated laser.

So straight hand oval cadence, node generating laser. So when it goes through this filter, it goes from light into sound. So hence the song modulated Laser.

So it's kind of similar to what Shelly Jordan is doing at UCLA with ultrasound guided exosomes. So this is a laser guided B cell procedure so that, you know, the red light is really healing and what we've discovered in the lab is stem cells.

When you put them, you light them up and put them back in. They're attracted to higher concentrations of light. And they discovered this as a mishap in the lab.

They were doing some stem cell research in aqueous solution and they beamed the the light through there. They shut it down, went home for dinner, came back the next day.

And at the point where that laser was, the cells aggregated to the point where you could see them with the naked eye and they were floating in the fluid, which kind of is a little bit wild because you consider fluid dynamics, right?

Laser-Guided Brain Regeneration and Future Expansion

So that that so we're extrapolating that and triangulating into areas of the brain, painting the brain, the thyroid, the thymus, the adrenal ovaries, testes to where we want the cells to really be attracted to.

Interesting. Okay. So many of our listeners are going to be somewhat familiar with red light therapy. We talked to a lot of people about that. And we you know, we talk about using the red light.

I'm usually in the mid 600 range, mid 800 range, and then even around 1070. Sometimes people talk about there being data. Of course, Michael Hamlin out of Harvard, he had published extensively a lot around this.

There's a bunch of research out of Russia and Eastern Europe. Not as many people use it in the U. S. and that's kind of associated with biohacking. But we use it at Miramar.

We use it for for cognitive function. And there's this the mechanism that I'm most familiar with that's been proposed is that it increases mitochondrial efficiency, essentially of creating ATP.

So you're through the cytochrome c oxygenates enzyme, you're kind of up regulating or making that more efficient as the light interacts with mitochondria.

And so this, you're like, this is not that this, you know, with those we can use red light, we can use LSD does not have to be a laser anymore. But this is a even though it's in that red spectrum, you're saying 730. 743.

Seven three Okay. So it's right in between the mid 608 hundred range, but there's a it's being delivered for a very different purpose. Is it always with the cells or do you sometimes use the laser on its own for healing?

We could use yeah, we can use the laser on its own as well. You know, we want to use the laser as much as possible because it is very potent, because the penetration of it is, you know, when you're just doing the red light like we do also have the Weber helmet and the V light and things like that, which are really great adjuncts, you know, people doing that at home after the camp and great research on them as well.

Utilizing the laser, you know, where we're using it 2 to 4 times a week on the same person while they're here, it's about a 20 minute session. Okay. So with and without cells and so you're shining the light on the cells that activates them.

Then you deliver the cells and then you use the laser again, same light, same frequency, same deal, and then you're using it again on the body, like whatever you want to basically target as a way to.

I'm almost imagining it's like. It's like an air traffic controller. Yeah, yeah, yeah. Over here. Cells over here to the brain. Meaning the light. Yeah, yeah, yeah.

That's right. Got it. That is really fascinating. And I am so excited to catch up with you and like, learn all of this because this really is on the cutting edge.

This is some really exciting stuff. It sounds like you're you're connecting and collaborating with some super smart people who are pushing this forward and really novel ways.

And and then also just hearing these very hopeful stories of how to add this as kind of that that next level of getting people recovery from their neurodegenerative diseases.

Yeah, it is. Yeah, go ahead. No, no, I'm just curious, like, what's what's next for you? Like, where do you go from here? Well, you know, it is really creating more of these centers.

I mean, clearly, the the need for exceeds what we can deliver in one center. So where we're creating some masterminds for physicians to learn to share our our information, our protocols, the process and evaluations, you know, being at it for 23 years and then five years ago with, what I went through, it's really put a fire under me of like, look, we need to make we this needs disrupted now.

It needs disrupted 20 years ago. And to be able to leave the door open, you know, I'm with you. You mentioned it earlier, and I wanted to bring it back up of, you know, even in naturopathic school, there wasn't a lot of hope for neurology.

You know, when I got into this, I. I only got into it because I needed to write because I was like, well, there's not much you can do once the brain, you know, once you have that damage in the brain.

But to see people actually have no evidence of disease, I mean, I have a like, you know, I just received some, you know, chart notes here because I wanted to see, you know, patients are coming out, then they go home and then their primary care doc or their neurologist says, Well, I think I might have misdiagnosed you because you don't have any evidence of that disease anymore.

I was like, No, you were not misdiagnosed. Their framework will not allow you to get better from there. So there's no way for you to get better if they're you're looking at your working with providers and it's either you're going to be slow or fast degradation.

You need to find this summit and get get all get by the summit and listen to everybody's talk on here. Because we are seeing we have people that have no evidence of the disease anymore.

Can I claim cure or. No, I by golly I don't. And you should run from people like that. But this is the possibility is there and we are seeing real life results for people which, you know, I bring my pompoms out for people.

You know, I actually cheer a lot every day because you don't really get messages like this. And the reality is, you know, we do it in community and we have a we have a big Brain Health Community that meets every Wednesday of people, you know, wanting the feedback to say, I need to see it.

And the more we see it, the more we hear about it, the more it happens. It's like Bannister's four minute mile before he ran that four minute mile, it was assumed that people couldn't run that fast.

Now kids are running it, like talking on their cell phone face timing. It's like, what in the world is going on? Right. Well, I have to, you know, just to support what you said the first time I saw someone get better, my first patient, Linda, which I share a lot about, about just seeing her go.

A moca of two out of three. Right. Very severe disease to just six weeks later, a mediocre of seven. And the first thing that came into my mind was I must have done something wrong.

We must have done her moca wrong initially. And then to hear her husband be like, no, she like talks. We have conversations again instead of just yes or no answers.

And like we're ballroom dancing times a week and she's totally keeping up and to hear how their life had been transformed. It was undeniable at that point.

And I think that, yes, we always need more research and people who have dedicated their career to when when the conventional thought process and story line, it's really hard to shift that it doesn't happen overnight.

But that's why we're here. That's why we're sharing these stories of hope, and that's why we're committed to the research and to moving that forward. And it takes a team.

So I'm just so grateful to Dr. Eckel to have you here, to have you sharing this and for contributing to this summit and this message of hope. Thank you.

Well, thank you for having me. It's been a pleasure. I want everyone to know how they can find out more about you and the Energy4Life Centers. Yeah. So it's the website Energy, the number 4 Life Centers with an S dot com energy4lifecenters.com.

That's the best spot we are on most of the social media platforms. We've got a YouTube channel. You can search for my name as well, but we hopefully will be getting the word out just like this.

So thank you. Fantastic. Thank you so much for being with us.