

Radical Remedy - Cameron George Transcript

0:00:00 - Chloe

Hey guys, it's Dr Chloe and you're listening to the Radical Remedy Podcast. Today's episode is with Cameron George, who is not only the co-founder of TruKava, a cava company that is bringing this traditional herb to the masses, but he happens to truly be one of my very best friends. So in this episode we go into Cameron's backstory, which is absolutely fascinating and equally horrifying. So Cameron went through quite a lot in terms of health challenges in his early 20s, which then ultimately led him to CAVA to help him get out of this neurological disaster that he had gotten himself into. You're going to be fascinated to hear the story and you're going to learn so much about what goes into chronic health disorders and how you can get out of them. We also go into the effects of benzodiazepines on the brain and how they're impacting your health long term, as well as the risks and benefits of taking some of these pharmaceuticals.

I found it incredibly interesting and I'm really grateful for his time and knowledge, and I know you guys are going to love it too. Let me know what you think like, share, comment, and I hope you guys are all having a wonderful day. Thank you so much. I really appreciate your support. So, Cameron, I know that you are obsessed with kava, and there's good reason to be so. I, as you know, am a doctor of Chinese medicine and obsessed with and so I think kava is actually one of the medicine and obsessed with herbs, and so I think kava is actually one of the most versatile herbs on the market. But I would love for you to dive into your backstory a little bit as to how you got into kava, because this is truly an epic adventure of remarkable proportions and very entertaining for all, especially me.

0:01:45 - Cameron

Yeah, I mean, where would I start with this, right? I mean, I tell the story a lot, I guess, you know, sometimes I don't have the opportunity to kind of go into it. You know full bandwidth, I guess. Well, how did I get into all this? Well, let's just say, we have this term we call pain to purpose and pain. In this case there's definitely some humor in it. You know, at the time definitely wasn't funny. Now it's pretty pretty damn hilarious.

But yeah, like I basically had a total collapse of my health in my early 20s it was. It was basically there was a lot of circumstances leading up to it, you know, contributing factors in childhood, but it's kind of like it's, you know. I mean, anyone listening to this podcast probably knows, right, you know, today we're kind of in the midst of this sort of epidemic of explosion of chronic disease neurotoxic illnesses, neurodegenerative illnesses, autoimmune illnesses and all of that. That's kind of started to come to a head here in the last like five to 10 years. It's really kind of at a different level now. I would say that I was probably on one of the earlier waves of kind of the explosion that we're seeing.

You know you call people like me, like we call them, the canaries in the coal mine. You know it's an analogy, you can look it up. It's basically, you know, coal miners. They used to take canaries down in the coal mine, hang them up. The canary dies. You know that means you need to get the hell out. So yeah, I mean, you know people like me.

You know we get sick first, you know, for whatever reason, and you know it's a sign that there's something really, really bad wrong in the environment. So, anyways, back when I got sick this was probably this goes back probably, you know, 2009, 2010, maybe a little bit before whenever I first started getting sick, I just kind of had, like I said, a total collapse in my health. I was a distance runner, you know distance runner, you know collegiate athlete, you know slash, you know professional athlete at the time, working three jobs, like you know, really high functioning person, and you know started to get kind of some chronic symptoms, some fatigue, some brain fog, you know like a few other different kind of, you know, residual

symptoms, that kind of built up over a period of time. First I thought I was overtraining and realized that I wasn't kind of backed off. That didn't work things continue to progress in a negative direction and ended up in a psychiatrist's office, where that's really where, like you know, things took a really nasty turn, right. So now we know that.

You know, whenever you're in that kind of situation, I probably could have made a few basic like foundational tweaks, like to my diet, to my environment, you know the things that comprise the world of what we call biohacking today. That wasn't a term back then. Even functional medicine to a substantial degree, the way that it is now anyways, it exists now. But yeah, I could have made a few basic tweaks at the time and probably had my health back on track and totally rebuilt it in a number of months. But because I kind of went the other direction and, like you mentioned earlier, right, so I'm from Arkansas, so this is literally like a black hole in the middle southern region of the country where not much innovation really exists, or it's literally like probably one of the last places in the country for things to actually penetrate to. So that would be like functional medicine.

We didn't have any of that at the time, right, and we still don't have much of it here today, but at the time it context where they type in your symptoms into a computer, you know, into their system, and then they give you a corresponding medication correlated with the symptoms and that's really the end of it. Right, it's like go on this. So we've all been through this whole thing. It's sort of like the epitome of sort of the allopathic approach to medicine. Right, there really was no framework for really trying to go upstream and look for cause, try to remove cause. You know, it was really kind of a you know disease symptom management program, which it still exists today, but we just didn't have any alternatives to it. So it's like where else would I go whenever I started to have enough chronic issues? I'm not even someone who is like who is quick to go to a doctor, in a sense Like I would kind of take care of it myself.

But it started to get like to a point where I was like pretty severely fatigued and I was noticing it because, being an athlete at the time, you notice those things. So you notice them in your performance first. Then you notice it like penetrating into your daily life and you're just kind of like unable to really even function on a normal level, as it's difficult to even get out of bed in the morning. It was past a level of normalcy. So you end up basically in a psychiatrist's office because you go to whatever the circuit of your family doctors and you go through that whole thing and don't get anywhere and then they're like, well, we'll send you to a psychiatrist. You end up at a campus psychiatrist and they're just basically like, okay, well, we've got a few different miracle drugs that, can you know, fix you right up, right, when you're having a lack of focus. We'll definitely give you this great, you know attention deficit amphetamine based drug. You know that actually it's great at supplying you with energy, right, and it's like, yeah, it's like at the time, you know, it's like you just don't have an alternate philosophy to these things.

So basically I was put on a slew of different pharmaceuticals antidepressants, benzodiazepines, but mainly amphetamines, so Adderall, ritalin, those types of things, but mainly Adderall. Adderall was sort of like the centerpiece of what brought my life, what took the already turbulent circumstances that were going on underneath the surface, which I had a lot preexisting this whole time. That was there, that was sort of brewing, that now I can recognize as sort of like the beginnings of like a chronically ill kind of trajectory, but it hadn't like exploded by any means. It was all kept under some level of relative control until I started to get these kind of debilitating symptoms and then, once I went this route, ended up on the you know, going the drug route, you know drinking that Kool-Aid. Taking that trajectory it was like every single issue that I was experiencing, in the short term of course, seemed to perceivably get better.

Of course you start taking amphetamines, antidepressants, and usually you know you have more focus and more energy and all that kind of immediate stuff, but at the cost of other parts

of your personality and of your emotional and psychological framework that you don't even know is missing right at the time because of how the nature, how the drug works. So I go on the drugs and it just basically within a number of like months my whole life just started to like unravel, like an epic proportion of pathological circumstances. I was probably the worst constitution or the worst type of framework that you would want to put on like an amphetamine. So basically it just took all of my preexisting impulsivities that were there, which is kind of like part of my adaptive wiring, going back from certain things. You know your developmental stuff and you know you know adaptive, you know circumstances from certain traumas and different things that kind of led to this sort of more on this air on the side of like hyper impulsive, like you know, just just, you know mental framework.

So anyways, you know, whenever I went on something like Adderall, it basically accelerates all of that, amplifies it and puts it on steroids. So I well, like I said, I was a pretty high functioning kid at the time, young guy, um, who had things you know pretty well together and within months of getting on this pharmaceutical, um, I had charged up hundreds of thousands of dollars in credits, went on like crazy buying sprees, um, you know, I got into all kinds of trouble in the sense of I just like started going like super, super impulsive. Every single one of my, you know, I quote unquote natural impulses just got put on crazy steroids. So I ended up buying a whole host of just crazy things, like exotic animals, like I just ended up with an apartment that looked a little bit like a weird messed up cross between like Ace Ventura and Breaking Bad right.

0:10:08 - Chloe

Just to interject really quickly like obviously this story isn't funny in any sort of way in terms of like what you went through, but like also, I think it is really just such a good example of how Western medicine can be well-intentioned. But looking at this one pathway or these one pharmacological interventions that can really disrupt all of these other pathways in different ways, like this is just like the epitome of what can go wrong when you're just taking these pharmaceutical approaches instead of actually looking at the deeper challenges that are leading to these disharmonies in your body and your brain.

0:10:47 - Cameron

Yeah, exactly, I mean, it's definitely one of many, many, many cautionary tales that exist out there around this topic and it's just a really good extreme example. But but you know, but also just you know these things occur obviously on a spectrum, even though what the average person has experienced as a consequence of taking the same road might not be to this degree. But it still is happening at some level to a very, very large percentage of people who take this road. You know, it's just you know. We know that now it's, you know this particular road, obviously in choosing to attempt to medicate yourself out of neurological issues, be it hijacking the brain chemistry with. You know psychotropics it's not that there's no place for it in any context but overall, when you look at the data that exists, both epidemiologically, on both the health, and you know mental, physical outcomes and you know just the net cultural outcomes that have manifested as a result of this. You know 80 to 100 year experiment that we've been on with this like psychotropic train in psychiatry. You know the net results have been overwhelmingly negative. Right it's, you know it ends up being a bad strategy and we can talk about why.

There's just even the philosophy of trying to solve a problem in this way, by hijacking, by intervening at the chemical level, you know, via brain chemistry, right to try to solve this issue. Why that doesn't necessarily work is a lot of people really don't really even know what a drug actually is and how it works. We know that it has a mechanism, we know that this, obviously. But when it comes to psychotropics especially, it's massively problematic and really is an unsustainable game that you're playing with your brain chemistry, because it's based on the principle of borrowing from tomorrow to pay for today, which ultimately ends up not doing

anything but depleting these pathways into extinction and creating more problems than you actually initially started with right. So it really is a game of, by definition, medicating symptoms and band-aiding something. But I would always say that I would say it's more than that. You know, using psychotropic to try to permanently resolve or solve a true biochemical issue in the brain, or one that is, you know, manifest from some kind of neurological injury or neurological imbalance that leads to anxiety, depression, all these different things. It's not only a Band-Aid but it's more of a Band-Aid, lined with sandpaper, meaning that you put it on it actually makes the wound deeper the longer that you wear it right Because it rubs the hell out of it because of just the principle of which it's based on, right? Obviously, you're trying to supplement chemistry that's not currently there, which these are feel-good chemicals. Every single one of these drugs works on these primary pathways dopamine, serotonin, gaba, acetylcholine Many of you have heard these terms before, and it's basically like they're all our feel-good or chemicals that help to modulate our mood and create a healthy and stable mental and emotional experience all day, every day, as a human right.

And so whenever you start tinkering with your endocrinology, with your neuroendocrinology, with your brain chemistry, via synthetic drugs that just isolate a very specific pathway, what you end up doing is optimizing for certain symptoms and metrics at the cost of others in a complex system, right? So it's basically like I said. I always kind of liken it to use like a bank account analogy. If your brain chemistry is like a currency, what drugs do is essentially borrow from tomorrow's you know currency to pay for today. So you're just using up your stores of these chemicals or you're blocking a receptor here and there, but you're displacing the chemistry in some way instead of actually getting to the root cause of why it's not modulating correctly or what kind of interference is sort of in the way which usually has to do with things like brain metabolism or toxicity in the brain, stress and trauma and all these different things that cause these dysfunctional states. So you're not creating any more neurological flexibility or any more brain energy or any more of these chemicals with these drugs. You're literally just kind of like charging them on credit and saying, okay, I don't have money today, I don't have the currency I want today, so I'm gonna get a credit card and I'm gonna use it and, oh great, I can spend it and I feel what I wanna feel right now. If I wanna study for that test, if I wanna be focused right now I take an amphetamine, oh great, but at what cost? Right, at the cost of tomorrow, and then twice as much tomorrow, because now you're twice as depleted, and so on.

And the need for the next pill or the next compound or the next cigarette, alcohol, any of those things I put these in the drug category as well is really created and perpetuated by the last one once you get on this train. So this whole thing about just looking at it like a bank account, when really what we wanna be doing long term is, instead of charging our mental and emotional states on credit, instead of understanding how we actually generate robust you know chemistry and get the right natural mechanical catalyst right, both from the environment, how we push these buttons ourselves to give ourselves both the resources and the sort of natural stimulation you know for the internal pharmacy that's between this year and this year, which is the best pharmacy in the world to actually optimize itself right, because it's all governed by the intelligence of the body. And that's really how you create long-term balance in a complex system like the body is to feed it at its base and basically act as an investor that infuses currency in, you know, or helps to build it by valuable acts or practices, right, like you would with money, and then you have something that can be sustained long term. So, but anyway. So I ended up in this situation with this because I took that road, obviously, and you know, once I went on these drugs, because of everything that I just described, of course, not knowing it at the time all the amphetamines, all that stuff I created this sort of really crazy imbalance like cascade in my mind and my brain. And again, this is the extreme version of the scenario because it was sort of like a perfect storm of the worst of all worlds. You know I had probably the right susceptible genetics. I had, you know, certainly the right, you know physical stressors. I was in a moldy apartment at the time. I found out later that had black mold in it.

Then I ended up, you know, getting on all these pharmaceutical drugs. So I, you know I, had a huge sort of, you know, chemical trauma and chemical injury to the brain and like a toxic exposure there. Because that is another thing about most of these pharmaceuticals is that they I mean virtually all of the major psychotropics have a neurotoxic component to them at different levels, but especially the one with black box label warnings, the ones with black box label warnings like amphetamines and benzodiazepines, but even the antidepressants have somewhat toxic effects on human metabolism and stuff like that. So it adds to your toxic load, right. So? And then, as a byproduct, the behavior that was generated from taking that approach, that created this chaotic explosion in my mind, which then translated into my personal experience and my perspective and mentality, which then translated into my behavior, which then translated into, you know, all the circumstances around me. Everything started to break down in numerous ways, like I gave you one example which was like the crazy hyper-impulsive sort of buying sprees that just weren't part of me, that just wasn't me before then, like it was in me to some degree like a proclivity towards impulsivity, but the amphetamines just took it to like a psychosis level.

But the main takeaway of, of most of what I've said so far about the you know the trajectory that I was on, is that it was just this almost incomprehensible, just explosion of absolute chaos. You know that just started out of really a single or combination of decisions in a short period of time that I could have gone this way or I could have gone this way, right, and it literally was just a direct reflection. It brought me literally to the brink of death eventually and obliterated my entire family and obliterated the circumstances. And if it had gone differently it would have completely obliterated my entire family and obliterated the circumstances and if it had gone differently it would have completely obliterated it permanently. And the good thing is is that this has been a tremendous like.

The last, like 10, 15 years have been a tremendous gift. And we use the term pain to purpose because it was incredibly painful, it was incredibly chaotic for a number of years, but this amazing purpose came out of it and this perspective came out of it that I just couldn't have conjured up through almost any other circumstance. It gave me all these amazing gifts in life and be able to be on this podcast with Chloe right now and to meet all these amazing people and do the work that I get to do. That's so great and fulfilling and I get to do basically something that I would do for free. For free, and I get to work in this realm of health, wellness, personal development, functional medicine as a career and to actually do it full time. But yeah, so that's basically like, yeah, that's the takeaway that I like to give people out of this. It's just that's the main point of it.

But I mean just to kind of finish up the end of that part of the story real quick. I basically like so I'm going through my life, thought everything was okay In retrospect of how I know it now, I actually wasn't okay at all. Even pre-drugs, right, I had all of the seeds of disaster brewing. You know, all the susceptibilities and all the sort of like imbalances and you know, and the fragile points that were really just brought to the surface by this cumulative toxic set of compensatory strategies and me recognizing that, going back and learning about it over a number of years and understanding it.

That's how you take a system, a brain, a mind system, body that was completely compromised and it completely imploded, and actually rebuild it from scratch, because now you've replaced the belief system with a new belief system that takes all that into account and is able to take in information, that learns and understands how to approach it from a totally different standpoint of how to produce currency in your mind and brain, how to feel it from a totally different standpoint, how to produce currency in your mind and brain, how to feel good on a day-to-day basis, how to build good, a good, healthy emotional and mental framework and a good, robust set of brain chemistry and hormones and all the physical stuff that actually create that

experience, instead of this constant chasing of it and this constant trying to charge it on credit and pull it from somewhere else just to get it.

Now A lot of that stuff can be changed from a hardware standpoint, you know, like you know, rebuilding all the physical stuff, getting the brain healthier, the nervous system healthier, detoxing all the stuff that I eventually had to do to get well, and then a software standpoint, the neurofeedback side of things, that the training, the perspective, the thought processes, all that stuff, the belief systems, you know, those two things you know together are going to give you a much, much more efficiently um, functioning biological computer. You know which is what your brain and your mind actually are. You know, um, so yeah, that was kind of where I ended up with it. You know which is what your brain and your mind actually are. You know. So, yeah, that was kind of where I ended up with it. And you know, ended up, you know we it was. It was on that path that I actually came across Kava and some of the things that I'm known for today, kava.

0:22:42 - Chloe

I can't wait to hear about this. But no, I think that I love how you explain that, because I also think it's so important when we're looking at the trajectory of the health of our children, because a lot of us as parents you know like what was it? A study from like 10 years ago showed that infants have 250 different chemicals in their cord blood we're accumulating through our lives are now being passed down to our children, which is part of the reason why we're having this complete catastrophe of chronic health conditions in our children and our developmental disorders in our kids. So that's always sort of where I'm looking at it. I also look at it in terms of my patients as well, and other people and what we're all faced with on a day-to-day stressors in terms of toxins and lifestyle and whatnot. But, like, really, I look at the kids as as also a canary in the coal mine, because they're really exhibiting so many of these health disorders that are. You know exactly what you just framed out so beautifully, I think.

Another thing that I always try and keep in mind when I'm looking at pharmaceuticals with my patients and when they're looking to try and start something. You know, most of these meds have not been studied for long term use and they're not recommended for long term use. Term intervention to empower somebody and give them a little bit of that credit while you're working on figuring out the underlying foundational health issues that are going on so that these people can start building health underneath and then ultimately get off those meds. That's not what we see in society, though. Most of the time people are on these SSRIs, on benzos, forever.

So I know that benzos are of a particular interest to you and I've been wanting to pick your brain about this for a while. I'm surprised I haven't more so, but what is your take on benzos? They're so very prevalent. Could you just talk about that class of drugs and how they impact the brain long-term and how? I mean? I've found them to be really addictive. Obviously they're used for anxiety and also often used as seizure medication, so I have a lot of experience with them when it comes to Remy, and they've had really adverse side effects for him. So I'm just curious to hear more about what you've learned about them and how they're impacted.

0:25:05 - Cameron

Oh gosh, yeah, this is kind of one of my main lanes here. I spend so much time both on the clinical side with patients, developing protocol for patients over a number of years as I got well, but also in my own personal experience is a huge part of my trajectory. The latter part of it that we didn't discuss most of like leading to me actually getting well after this explosion occurred. This explosion occurred, but yeah, I mean benzos is an extremely relevant topic and it plugs into a much, much larger conversation. But it's mainly relevant just because we're in the midst of a cumulative epidemic of abuse on that particular class of drugs. What hasn't been talked about a lot is sort of the explosive epidemic of benzodiazepine prescription use but also benzodiazepine abuse. I mean it's both right. I mean it is definitely it's right right behind and

probably will at some point surpass opiates in the number of people that are using them and the number of people certainly that are being deleteriously affected in a significant like moderate to severe level, right Meaning and there's actually a lot of deaths too that are associated with benzos. Benzos are one of the one of the few compounds that you can actually die from during the withdrawal process.

Benzodiazepines act on a pathway in the body that's called GABA. They bind to the GABA-A receptor in that particular pathway. And GABA, just for those, that stands for gamma-aminobutyric acid and it's basically the primary breaks of the nervous system. So it's the most inhibitory or calming neurotransmitter in the body. Anything that your body does that's involved in, you know, moving your nervous system towards a state of relaxation and sort of satiation stuff like that. That pathway is involved. That pathway is being activated, whether it be naturally, unnaturally. It's involved in the process. That's why almost any sleep aid relaxation agent, you know, or anxiety agent is involved in the process. That's why almost any sleep aid relaxation agent or anxiety agent is involved in that pathway either directly or indirectly.

So benzodiazepines are like the sort of core class of medications that have been, quote, unquote, fda approved to treat generalized anxiety and virtually everything across the anxiety spectrum. So they're like the first round class of medications for acute and long-term anxiety. That's basically, you know, obviously, ssris as a close second, things like Zoloft and those are, you know, serotonergic compounds. You know, selective serotonin reuptake inhibitors and those are more sort of a long. Selective serotonin reuptake inhibitors and those are more sort of a long. You know it's not for, like immediate anxiety attacks. You know, obviously, ssris the effects build up and they're not as effective because they work on the serotonin pathway, which is sort of bidirectional.

Serotonin can be excitatory and it can also be inhibitory. It can actually excite the system in some people, which is why certain SSRIs actually give this kind of like stimulation, more like Prozac versus like a Zoloft. That generally teeters them more towards like this sort of relaxed kind of state of mind whenever you build up concentrations in your brain. But with benzos it has a sort of a direct shot at that pathway. It binds to the, you know, the GABA-A receptor site or the benzodiazepine receptor site on that particular GABA-A receptor site or the benzodiazepine receptor site on that particular GABA-A receptor and it basically creates a significant influx of ions across that channel and across those synapses in that area and it basically is just pressing that button to basically dump the available GABA stores to make a more.

You know, I mean to take a kind of simplistic view of it that you have in your system and because it does it in such an aggressive way, just like with any compound, when you press a button unnaturally in the body, the body says whoa, this is a foreign molecule in here, it's pushing this button, it responds by trying to shut down that system because it says hey, what are you doing in here? And it responds by adapting by suppressing it. And by suppressing it it eventually you hit that enough times and depletes what you have and it shuts down the rest and you actually end up, you know, destroying GABA receptors and things and basically just kind of diminishes the whole system over time. So it diminishes, in other words, how that plays out in your experience, the whole system over time. So it diminishes, in other words, how that plays out in your experience Long-term when you take benzodiazepines. It diminishes your natural capacity to adapt to stress. Right, because GABA is sort of like your main GABA and serotonin.

Of course it's a plethora of other molecules, bi is more complex, but it's sort of like the centerpiece as far as a chemical compound in the body that allows your body to adapt to stressful circumstances. So imagine how profound that is, how imagine in your life experience every single day, especially when we live in this sort of like stress, traumatic landscape that we

do today. You know, the only thing that stands in between you and absolute mental breakdown is a good, healthy nervous system that can produce good, healthy hormones and neurochemistry that allows you to physically adapt, to actually be able to have grounded thoughts, to get yourself through and actually like power through every single day. Whenever you have robust chemistry and you have high amounts of these chemicals, you know you automatically can be Superman or Superwoman, in the sense of like you can just take on the world more effectively, efficiently and effectively, which is why there are any set of circumstances like I just described everything that takes place in people's lives, all the confounding variables, the toxins, the traumas, the stressors that beats these things down. It is no wonder that we're walking around in sort of like a an epidemic of depleted brains, that that we, as a result, it becomes normalized to feel horrible and to not be able to adapt to stress. And when you have an entire population that has normalized not being able to adapt to stress and feeling like shit basically, then it starts to become normal to press a quick button to get relief from that and we start to actually believe that it is something that we need, almost like we approach it in psychiatry today. Like you know, I've seen psychiatrists do this. I don't want to like shit on, you know, everybody in this world or something like that. But I'm just saying this is a pervasive mentality that definitely has surfaced in a percentage of the population. That it's sort of like we treat it like well, you know, I have this condition. I just have anxiety. I essentially have a benzodiazepine-like deficiency. They don't say those words, but that's how it's treated, of sort of like I need this drug, I need it for the rest of my life, instead of asking how it occurred and all that kind of stuff.

But I say all of that just to kind of paint a picture around benzos. I mean, benzos are actually one of the more pernicious of these drugs. So everything that I just described, as far as like this general principle of drugs borrowing from tomorrow to pay for today, you know not waking up receptors naturally or working with the intelligence of the body and feeding it at its base so that it can naturally create homeostatic balance and the intelligence can regulate it, like we like to do like to do in the world, of course, of natural health, nutrition, biohacking, all that kind of stuff. We do the best that we can with that Remove the interference and then feed the body to reestablish balance and help to create it from within. That would be the sort of inverse philosophy. What all drugs do, like I had mentioned before, is that sort of bar from tomorrow, pay for today. But in the case of benzos are one of the more aggressive compounds right in those categories.

And because of the pathway that it hits, because it hits on that GABA pathway and because, as a direct result, long-term use, consistent use, depletes the pathway, down-regulates it and impairs it, the body tends to, in withdrawal or in post-benzo use, long-term tends to ricochet in the opposite direction of whatever that pathway was helping to push right. So that's why depleting that pathway is so dangerous. Because when you deplete the ultimate breaks of the nervous system, when you go off it, where's the only place for the nervous system to go In super excitatory mode? And that means, at the severe level, seizures. It means spasticity, it means seizures, it means heart attacks, it means an explosion of stress hormones in the body which is far more dangerous than coming off of a stimulant that's stimulating stress hormones.

And when you go off of it it depletes those and it ricochets you into super like brain dead. You know, can't get out of bed mode, being in a pathologically parasympathetic state like that. That like has no, because you've just like deteriorated your nervous system's ability to catalyze an energetic response is hell to go through, but it's not immediately dangerous, like the inverse right. And then, once you're kind of in the situation where you've kind of like the drugs have taken hold in your system and you've dug this hole for yourself where you're fully habituated and now the drugs lose their effectiveness because, again, borrowing from tomorrow to pay for today, you eventually deplete the system. Now you're just taking it not to be in withdrawal. You're not even taking it to get a therapeutic effect, but if you go off it, then your pre-existing

symptoms go through the roof into a land that makes you almost suicidal, if not, you know, a lethal territory in some cases.

0:34:23 - Chloe

Suicidal ideation is one of the main side effects of many of these medications, definitely SSRI.

I mean, I've experienced it with a lot of my patients and loved ones you know my family who have gone on and off of SSRIs with abandon, without concern, and then become incredibly suicidal to the point that they had to be hospitalized.

You know it's terrifying and that's one thing that I always like try and remind people, especially when you're working with weaning off of a pharmaceutical. You do have to do it with appropriate care. But you are correct, like many of these doctors have no idea or even like concept of how to help somebody wean off of it, or why they even would, because in their mind they've just been trained by the pharmaceutical industry to just continue these meds indefinitely. And obviously I always like to put in the caveat that I do think that all Western doctors, or almost all Western doctors, are in the field because they are trying to help people. I think that the system of Western medicine is incredibly flawed. I think the pharmaceutical complex is obviously a disaster and has way too much power on the training of these doctors because they're not taught how to look at the body and the brain as a system and how they interact together and how these things play out long term.

0:35:43 - Cameron

A lot of times it's not the physician's fault. Most people that get into medicine to your point earlier, most people that I know that are in some of these sectors of medicine that do good things but also are involved in some of these processes that are very outdated. They're well-meaning people that get into it because they want to help people, but they're subject and they're handcuffed by a system right that gives them a framework that they can operate within. And if they don't operate within that framework, then we found out we find out all the time, we found out during COVID, et cetera that you can lose your license or you just don't have the ability, you're not given the tools to even operate under any other framework. And unfortunately, the current system American Medical Association, et cetera of course that comprises most of what we call medical school today, standard medical school at its base and we talk about just base, basic, basic, um, it ends up teaching physicians more so what to think than how to think and so like.

As you know, back years and years ago, decades ago, doctoring used to be a skillset that you developed where it was like you had. You had a much, much larger window to operate within and you had to use your discretion. You had to understand how to think about situations so that you could act in the moment and say, okay, I'm gonna use more than just what someone else says to me from some on high sort of structural corporate entity that created this system and tells me what I can and can't do. Like I actually have to use my own discernment, my own common sense, my own deductive reasoning, my own direct experience, to be able to make decisions that we don't necessarily have total data to say absolutely this or that. And doctors just ended up being able to doctor more because they got to be able to use experience and stuff like that. There are more forms of evidence, of course, than just clinical studies, of course. So, anyways, it's just most physicians that I meet that operate within these systems are very well-meaning people.

You can be sincere and you can also be sincerely wrong at the same time and that's the situation that we find happening a lot today or just sincerely limited in what you can do, and so when the only tool you're given is a hammer, every problem starts to look like a nail. You know what I mean. And so it's just like you're just given these drugs. It's like, okay, well, what do we use today? Well, we just the drugs, I don't have anything else. And so you just start whacking

all these different problems with this terrible tool or this outdated philosophy and stuff and you just, it just ends up putting people in situations and circumstances that are just not, are just far, far, far from optimal.

But this same conversation, a lot of the elements of the same conversation, as far as choosing to drug versus choosing to optimize, support, feed, nourish, you know, naturally, cultivate right, also applies to the alcohol conversation as well too. But let's, we'll get into a few you know solutions here. So we'll talk about kava a little bit, since that's sort of like an entry point or like an initial, like visceral compound that a lot of people start with when they start going down this road. Really, how to get yourself well is never any, just one thing, of course. But when you talk about some of these really powerful tools that you can give people and to get a really experiential visceral effect that can put them in a state, more of a stress reduction type of state, start to optimize the chemistry so you can better seek out more strategies, more therapeutics, more compounds, more this and that that'll help progressively build your health over time. Then you know that's really great and that's really how I got into kava.

During the midst of my process, when I was you know the explosive process that I described earlier I ended up having like 10 seizures a day. Long story short on that. On that, you know on, you know on on that trajectory of that story, um, I was having all these crazy convulsions and was reacting to everything that I was eating. That's what happens during these severe autoimmune conditions and that's really what made this situation really, really nasty. It was eventually dying because I couldn't eat anything, everything that I was eating. I was going to a reactive spastic seizure and then I eventually couldn't drink water. I was reacting to water which I didn't even know was clinically possible, and it is Because, basically, people on this level of the autoimmune spectrum develop a form of PTSD where the body's rejecting everything because it's been so just traumatized by everything that we talked about and the stressors in the bucket and the whole perfect storm that we talked about earlier. So, anyways, I ended up in this sort of spectrum of autoimmune illness where I was reacting so heavily that I was having like 10 seizures a day and like it was being put into them by things that I was eating that I had to have.

So I ended up on these heavy doses of benzos and of anticonvulsants, like these mood stabilizing type of compounds that are used as anti-seizures or off-label A whole host of different drugs, but you know, benzos were at the front of it. Klonopin, xanax were the main two to control the seizure activity, just so I could eat, right. So I went down. That's how I kind of got on. You know, consistent benzo use and eventually, again benzo philosophy. It's the GABA receptors. Borrow from tomorrow's GABA pay for today. Eventually you charge enough credit up. You end up in debt with your body's own chemistry. You end up without resources. The drug isn't even giving you effectiveness anymore. But if you go off it now your seizures are gonna be 10 times worse. They are already lethal. So going off the drug was a very, very lethal situation.

But it was losing its effectiveness and I was starting to react to the drug. And the problem was that before, whenever I would take the drug, when it first had effectiveness, I would react to the drug. Then the drug would kick in. The GABAergic effect would overtake the rest of it and neutralize it. So that was the thing. But then once it started to lose its effectiveness now I take the drug, I react to the drug and there's nothing to neutralize and so it literally just explodes even further. So I was in a situation where I had a very limited window of time before I was going to die, there's just no question about it. So I was kind of in this short window of time long story short when I got to my very, very worst, where I was getting weaker rapidly. I was getting more reactive rapidly.

Benzos losing their effectiveness had to get off. Them had to find some way off of the benzos as a first thing, and then I had to find some way, you know, to stop the rest of the reaction,

reduce them enough to where I could eat, and it seems like absolutely impossible. Like clinically, most physicians looking at this would say, even if they weren't trying to be mean, if they were looking at it honestly, any credible physician would say that this was, that I was a throwaway. In this case, right Like. I know that's a, that's an aggressive term, but in the sense of just like. Look, this is like you may want to just start getting things together because, like, like, you're just in such a rock and a hard place, your body is so weak and there's nothing that we can give you. There's nothing that we can do. Dot, dot, dot, you know.

So it's like I was in this really really unique space of time and, you know, was just thinking of anything and everything that I could use to get any kind of leverage to start inching my way out of it, even though it seemed kind of like impossible. But I just was kind of like focused on putting that out of my mind and just kind of focusing on what's in front of me. And at some point I had sort of remembered that I had come across a guy who got to be a really good friend of mine, you know, kind of from this point on. But I had met him kind of in some of our travels like I was traveling all over the country trying to get different treatments and therapies and different things and I had met this guy and he was an indigenous Islander from Vanuatu, which is the home of where kava has been cultivated for 3,000 years and it's a core part of the culture in Vanuatu.

Just in short, kava is primarily an anxiolytic plant medicine, anxiety-relieving, stress-relieving and mind-opening and mood-lifting plant compound, food-grade plant compound that's consumed by entire populations in Polynesian cultures as a food, in similar context that we use alcohol and coffee. Because it reduces stress, relaxes the mind, increases mood and mental clarity. So it relaxes you without sedating you at all. It clears the mind while relaxing. At the same time it induces social connection and opens the mind and makes people more empathetic. It puts you kind of in like a better version of yourself. You feel like more of yourself, not like you're on a substance. So we call the term hyper-sobriety that. It kind of puts you in or it's a calm, enhanced state of natural sobriety. It's enhanced sobriety. It doesn't feel like a drug at all. That's what makes it so unique. You can feel it, it's visceral, but it doesn't feel like a drug. So they use it there for weddings and funerals and spiritual ceremonies and social gatherings, all these purposes.

The sacred medicine. I had read about it at this point when I was in this kind of critical juncture. I'd read about it for years because at this point I couldn't even use any of the things that I had learned about because I was so reactive so I hadn't gotten the system in place to get me well yet and was in this critical juncture. So I had read about kava but I had tried it like in this sort of crude form that you can get it in the States and limited, you know, in some health food stores in this kind of extract form that I thought was kava. And it turns out I learned from my friend from Vanuatu that that is actually not traditional kava, that it's a cut down, reduced form of it that is no more kava than caffeine powder is coffee or, you know, cocaine is coke and tea. It's sort of more sort of like an isolate that whenever you do that with kava it like gets rid of most of the effects and so it's just kind of a small shade, a fraction of what kava is. So I had tried this in the past and didn't get much from it. It felt like chamomile tea, mildly sedative. None of the effects I just described that made it so sacred in Polynesian culture, made it a huge part of their spiritual and social sort of like. Well, something's wrong there, and then I just kind of shelved it. This was like a long time before.

So then, once I ended up at this critical juncture, I happened to get a phone call from this guy that I had met in Vanuatu. He's like have you, you know? He's like well, have you tried kava? You know, like. And I'm like yeah, you know, I tried it in this form. He sort like the bunk shit, it's not good.

Real kava is a traditional drink that's prepared in this way. That's like a tea that's from these fresh roots and it's a different thing entirely. And I'm like okay, great, how can I get some? He

sends me some. He tells me how to prepare it. It's this crude process you take these roots, you squeeze it down. You end up for like 30, 45 minutes and squeezing this nasty stuff out of these roots, this fat comes to the top, it's like this oil-based where the medicine is in it, and then you end up with this drink that looks and tastes like muddy water and that's kava. And so I did that, started using it literally.

Within two weeks of using this stuff regularly, like my seizures, convulsions, reactions had reduced by like 85% and I was able to eat virtually almost anything again. I was able to take supplements again, like literally. So for someone in my circumstance like I was basically like worshiping Kava at that point, like on my hands and knees, because like it was an absolute miracle from mother earth herself, like she spat it out, and it was just like this miracle comprised in this, like natural, like brownish golden liquid. I'm just like. I was completely blown away, did never expect it, I was looking for any relief that I could get, but it basically saved my life, was able to eat and drink water again, miraculous, obviously held the convulsions down, reduced that down and then I was able to totally get off of benzos in like two months, which normally takes minimum a year and a half to taper from. So I knew the mechanisms.

I had studied the mechanisms of both that and I was pretty well versed even in cob because I'd read a lot about it. But then I delved deep into it and realized this is a very complex medicine, kind of like cannabis. It's multi, it's not just one linear mechanism because it's not a single molecule, it's an ecosystem, it's a living organism, it's the ecosystem, molecules that has multiple mechanisms around the entire body and has multiple different, you know, coinciding effects depending on strain and so on, but generally overarching. It hits on this very same GABA pathway that we described with benzos Not, but it hits on a different way. So instead of pushing the button as a foreign molecule that tells the body to shut this down and stealing from the system, just using up, releasing and using up your available stores Instead of doing that. It's so cool because it gives you this sort of like acute natural elevation and GABA release, but it communicates to multiple parts of that biochemical sequence, all the way down to the cell level, but also communicates the upregulation and production of GABA and even the stabilizing of new GABA receptors. We see we get an increase in GABA receptor density with long-term use. But basically what it's doing is it's waking up that system through the GABA pathway through the serotonin a few other different ones, but that pathway for sure and rebuilding and resetting the parasympathetic nervous system. So it's giving you a similar acute relief that you're looking for off of the synthetic. But instead of depleting the system and habituating you to it, it's doing the exact opposite. So underneath the hood it's working totally different.

So, like we've known about this forever in the anthropological literature with kava, whenever you consume kava regularly, there's a phenomenon called reverse tolerance. So the reason why you get tolerance with the pharmaceutical is because of that thing that I've been describing. It borrows from tomorrow to pay for today, depletes everything, so you need more of the same substance to get the same effect over a period of time and then you go off of it. You don't have any more, you don't have any more currency, et cetera. So that's habituation withdrawal and you go into withdrawal because you're bankrupt. So what I found with kava was is because of that reverse tolerance effect that I've later found out exactly how that works. I was able to get off of the benzos because of kava and stabilize and eat again.

But I had to implement a multi-therapeutic approach that took the same philosophy that I use with Kava.

Feeding the body at its base and feeding the intelligence basically comes down to out with the bad, in with the good.

That's basically what it comes down to.

It's how you heal people, or that's how the body heals is.

I had to go through deep detoxification of everything that had accumulated in my body and cleaning up the landscape and then feeding the body with the right nutrition, with targeted supplementation and then with some powerful regenerative interventions. A good way to use technology that doesn't contradict or undermine the intelligence of the body, things like stem cells and peptides that are using technology to feed the body at its base by harnessing the intelligence of nature in a concentrated format instead of like an isolated synthetic molecule. So I did a few of those things. The kava gave me leverage, then I moved on to nutrition, detoxification, then supplementation, then eventually regenerative medicine, and that combination was the reason why I'm sitting here today talking about this. And you know, fully functional and so on is, over a period of time, doing the right combination of things, using that core philosophy and moving away from the philosophy of hacking the assembly line downstream, hiring a new manager and creating a new, more robust assembly line to replace the old one. That's how we did it, you know.

0:51:14 - Chloe

No, it's amazing. It's so important for people to start to understand how and I think that this is one of both of our missions and what we're doing fundamentally is helping people feel empowered to actually take control of their health instead of just handing their power away to somebody else, because so much of it is ingrained in what we're doing day to day and how we're doing that. And I think that, again, these chronic health conditions we're seeing a lot with COVID, we're seeing a lot with long COVID, we're seeing a lot in our children I mean, it's just such an epidemic at this point. So all of the work that you've done and all of the things that you've experienced are, you know, really a microcosm of the macrocosm of this health epidemic that we're having in our society. So I love this story. I think you did a beautiful job of going through all of that and I personally I used kava back in college when I lived in.

I studied in Australia and then I stayed in Fiji for a couple of weeks on my way back.

We drank a ton of kava while I was there and it was just, it was so cool, and I remember bringing it back with the kava bowl, and so once I started hearing about your products and hearing you on podcasts.

You know, kava is in many ways sort of similar to CBD in its actions and its efficacy and its ability to, you know, not only acutely address the stress and anxiety that many people are dealing with today, but actually build the body up through the wisdom of plant medicine. You know, and I think if it's done really well, it can be really profoundly healing for so many people, and so that's why I love your products, that's why I think you and I are such good friends and why, you know, I think that your products are really just changing the game when it comes to getting powerful herbal medicine out there. I mean, you now have the drinks. You know I'm a huge fan of the oils and I just think it's really exciting to get good herbal medicine out there. I really do think that the wisdom of nature is something that we'll never be able to replicate as humans, and I think it's foolish for us even to try.

0:53:26 - Cameron

Yeah, and we got into it really due to, you know, just because of everything we just talked about.

Right, I didn't get into it, you know, from a sales angle or a sales standpoint or even trying to build a business. It was I get into it, you know, from a sales angle or a sales standpoint or even trying to build a business. It was. I got into it from a clinical standpoint, I got into it from an experiential standpoint and I wanted to be part of the solution, the larger macro solutions and

you know, you know, shifting the way that we approach both health, obviously, but also, just, you know, coping in a world that's really really turbulent, and kind of teaching people this sort of idea of coping healthy, you know, you know, and sort of having your cake and eating it too, getting the result that you want without destroying yourself in the process. You know, and that's sort of like at the core of this whole thing. And while we got involved in this whole movement that we're calling the Sober Curious Movement we didn't really get into alcohol, but all the same things that we talked about.

Kava's two main components is that it's a huge, it's a protective organism, a protective mechanism, it's action in the body. It's neuroprotective, it's tissue protective, it protects us from stress, it helps to reset traumas, it helps to reduce physical trauma in the body, to relax, to recover, all that kind of stuff. But then it also has this sort of mind-opening, mind-clearing effect, this sort of empathy-inducing effect that helps to facilitate human connection, which is sort of like it has all the components that people go after alcohol for as well too. So from like a safe, recreational standpoint it is one of sort of like the symbolic sort of leverage points on what we're calling the sober curious movement, the advent that's going on right now, the cumulative cultural curiosity in what lies beyond alcohol, because it's starting to become undeniable and more publicized and talked about how badly this experiment, this cultural experiment with alcohol that we've been on for a very long time now, has gone, just going by the data and going by personal experience as well too. I mean, alcohol is just a straight up toxin to the body. It has no health contribution whatsoever. It's only a vice that you try to get the best effects that you can while trying to mitigate the damage and so on. And it's not that it's indiscriminately bad, just like drugs. We just have to be honest about what it is.

And you know kava to us and to me. I got into it because it's part of a symbolic. It's a symbolic sort of catalyst for this new mentality, this new collective mentality that's starting to surface in the culture of learning how to cope healthy. You know what I mean. It's not just about Kava, because a lot of people kind of know me as that and is talking about this one thing and all that. And as amazing as Kava is as a medicine, it's a great entry. Kava, because a lot of people kind of know me as that and is talking about this one thing and all that, and as amazing as kava is in a medicine, it's a great entry point for people that are just starting to adopt this mentality of like, oh, I take kava and I realize I can cope healthy. Like, what else do you got? Like they'll come back and they'll go to you know they'll come back to their you know, and look at podcasters' influence and be like, hey, natural stuff actually works. There is a way that I can feel good and not shoot myself in the foot Like how can I do that? I wanna know more.

So it's a great catalyst, and why what we're developing with the brand and launching nationally in Sprouts and everything, why it's such a big thing culturally is and why we're riding this whole Sober Curious movement is it really? What it symbolizes is just as important as what it is as a substance. And even what it does as far as immediately relaxing you. That's great and those are great effects. But what it symbolizes is a shift in mentality in the way that we approach, you know, coping stress relief, human connection, all of those things that are wrapped up and why we want to tinker with our mental and emotional states, right and so like.

Like the Sober Curious Movement, for example, is not an anti-alcohol or an anti-drug movement. It's more of just an honest and sincere exploration of what could lie beyond it, what the higher roads are, if they're there right, and our mentality starts to shift in relation to some of these old habits, from I want this, but I can't have it, to I could have it, but I don't even want it because I've got something better. Now you know what I mean. Like I've got an experience that's better. You know what I mean. Like that's really how people get over addictions in their life is by changing their identity and changing their core mentality.

That's the full circle back to the beginning of the conversation. You know I got sick, my mentality almost killed me in the most gruesome, horrific way, you know, and it was shifting

that core mentality that changed the roots and everything that grew off of it was totally different, you know. And my mentality today, with all this stuff, I don't look at alcohol or I don't like like if someone said to me, hey, do you want an Adderall? I used to live and breathe by that stuff. Right, if someone tried to take it away from me I would have choked them out. You know what I mean. But if someone asked me I wouldn't say what brand? Is it XR, is it this or that? I wouldn't say any of that. I would say that's not who I am.

0:58:39 - Chloe

I don't even there's nothing in works the same across the board with most of these things. Yeah, and I do think to me. I'm always a big advocate of like something is better than nothing. Like every little step in the direction of health is important, and it can be adding an extra apple a day, it can be, you know, adding a non-alcoholic drink instead of a glass of wine. It can be whatever it is. It can be just fucking sitting and meditating for two minutes once a week, I don't care. Like every little bit ultimately adds up and starts building health as opposed to building disease or just responding to disease. So I am going to cut this now, because you and I both know that we will talk for 700 fucking hours and Remy's going to be home soon. But thank you so much. I think this was really fun and it was really interesting using your story as the backdrop to explore some of these concepts. So I really appreciate you sharing that with everybody, as well as your time and wisdom.

0:59:34 - Cameron

Sure as a Lily yeah.

Transcribed by <https://podium.page>