

THE MODEL HEALTH SHOW

EPISODE 691

The Shocking Truth About U.S. Psychiatry, Addiction, & True Mental Wellness

With Guest Dr. Joseph Yi

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SHAWN STEVENSON: Welcome to the Model Health Show this is fitness and nutrition expert Shawn Stevenson and I'm so grateful for you tuning into me today, how effective are conventional treatments for mental health?

According to the National Institute of Mental Health, depression is now the leading cause of absenteeism in the United States, is the leading cause of disability, is the leading cause of missed work. Now, this condition, this issue has grown exponentially in recent years, and some people like to point to the fact that being able to assess and to diagnose and early treatments are all so much more advanced, so that's why the numbers have gone up, but they've gone up precipitously, they've gone up despite those things happening. If you talk to people who've been working in the field of mental health, psychiatrists and neuroscientists and psychologists for 20, 30, 40 years and you actually ask them, have you seen more cases of mental health issues, they'll tell you it is outrageous, they've grown so much and the depth of which people are dealing with these issues from anxiety to depression, to bipolar disorder, ADHD, the list goes on and on, have been at levels that is just far too much, there aren't enough practitioners to serve all the people who are struggling.

Now the question is, is it a lack of practitioners or is it something going on with our treatments being ineffective, that these cases are growing and we're not getting a resolution of symptoms of struggle.

Now, I also want to point to the fact first and foremost, before we get to our special guest today and really dive into these topics, that we want to do our best to not over medicalize our emotions and understand that every single human being has experienced levels of anxiety or depression, or an inability to pay attention to certain things from time to time. And these issues of course, can be extreme in certain individuals at certain times in their lives, and what we want to do is to understand that we don't want to criminalize these emotions because all of our emotions can provide us with valuable feedback, and the things that we need to work on, things that we need to change and adapt to, or to just perceive differently, things that we need to let go of, things that we need to grow from and to become more resilient. And the list goes on and on.

Even our physical symptoms beyond just mental health symptoms are giving our body's valuable feedback. If we're experiencing hypertension, for example, if we're experiencing vision issues because of pre-diabetic symptoms and/or diabetic symptoms, it's our body giving us feedback that we probably need to adjust our behavior. But in our conventional treatment of things, as you know, we tend to be provided with the medication to mask that symptom, to

not provide a resolution, to not look at what's the root cause of the issue, not focus on let's remove the root cause of the anxiety, let's remove the root cause of the hypertension, let's remove the root cause of one of the other conditions that's growing with our cognitive function, degradation, Alzheimer's and dementia.

Alzheimers is now the sixth leading cause of death in the United States. This is not an accident, it doesn't creep its way into nearly the top five cause of death in our modern society, because it's just a random occurrence. Something has changed in our culture, something has changed with the way that we're taking care of ourselves, something has changed with the way that we're perceiving ourselves, with the way that we're perceiving our emotions, with the way we're perceiving each other, with the way that we're perceiving food, with the way that we're perceiving our environment and exercise and how we interact with things, how we're perceiving technology. All of these things are creating this recipe for the outcomes that we're seeing. And so again, pointing you back to the question, how effective are conventional treatments for mental health?

That's one of the things we're going to be talking about today with our special guest, and also how's the health, the average health care professional? How is the health of the average psychiatrist or practicing physician in our culture today? I think you're going to be really surprised when you find out some of the data and a huge extension of gratitude and acknowledgement for all the incredible healthcare workers that listen to the Model Health Show and who are applying things in their own lives and with their patients. And we're really seeing a wonderful up spring or a shift that's taking place because no longer is our education relegated to just conventional methods that is very linear, that is very one-size-fits-all, we have this access to a wide range of some of the very best health care professionals in their respective fields.

We've brought forth the top people in the world in gastroenterology, the top people in the world in cardiology and neuroscience, and the list goes on and on and on, we're talking about the top people, award winning, all the degrees, the degrees got degrees, all the things. And there's this consistent thread, when you see the people who are really at the top of their game, they have come to the realization that our conventional treatments have not been effective, and we need to address the underlying causes of what's ailing our society, we need to address the hallmarks of human health. What are the things that our genes expect from us to have healthy expression or optimal expression? And to be able to mute genes that kind of code for the expression of symptoms, and then we get these symptoms, and they get labeled and we get this diagnosis and then we're getting drugs to treat those symptoms, right?

We need to address the things that really make us human, right? And so, we're going to be talking about that today as well as from the top down in healthcare, how are we treating our

physicians, how are we treating our nurses, how are we treating the people that are entrusted with caring for others? Have we created a system where they're able to care for themselves, do they have the knowledge base, do they have the time and access to care for themselves? And so, we're going to again, dive into all of this, and also recently, there's been a movement because of our poor level of success are part of the reason behind our poor level of success and are dramatically increasing rates of physical and mental illnesses.

There's been a movement of self-medication, right? Through illicit means, and of course through modern prescription medication as well, but self-treatments through illicit drugs and things like psychedelics. But did you know that there's an emerging use of psychedelics in psychiatry? What about the potential for abuse in that category of medicine? We're going to talk to our special guests about that. And so again, I want to open up this conversation and get some educational feedback from somebody who's in the field and who's been exposed to these different types of treatments, conventional treatments, and these emerging treatments, like psychedelics. And also looking at what are the potential downsides here and for people to consider the long-term ramifications. And again, are we doing things to treat symptoms or are we utilizing certain things to help us to get to the root cause?

Again, it's all about addressing the root cause, and sometimes identifying the root cause can be a deep dive, it can take up a lot of time and energy and human capital just to be able to identify that stuff. But in our culture today, we want the quick fix, we want something now, we want something to address this thing, and sometimes we're not willing or even equipped to do the work necessary to address that root cause and to really remove the thing that's causing the symptom or the expression of illness, but I'm telling you right now, and our special guest is going to reiterate, we have so much potential within us.

And we have so much, especially today, more than ever, we have access to this information and to education around all of these things, but it's really what are you attuned to? Are you attuned to a system that is very good at churning out very poor effects? As a matter of fact, pouring out more degradation and disease? Are you tuned in and tapped into that, or are you tuned into educational resources that are empowering you? That are teaching about a variety of different options that you have available to you and that are giving you insights and tools that are science-backed to help you to have a vast array of resources and tools in your superhero utility belt.

And if you're listening to this show, I already know the answer to that. You are tapped in, and you are all about empowerment and education, but again, today is more important than ever, and one other thing, if we're talking about cognitive performance, even prior to this incredible interview, one of my favorite things to do is to make sure that my cells are firing on all cylinders, and not through anything that is some new age fancy pants thing, but something

that is tried and true and has been an important element, and literally element in human evolution and our cellular function. Nothing's happening in our bodies, whether we're talking about the creation of energy via our mitochondria, where we're talking about our heart beating.

Are neurons talking to each other without electrolytes being present. Electrolytes are minerals that carry an electric charge, and they enable signal transduction, they're the foundational piece of the sodium potassium pump that's running nearly every process in our bodies, every microsecond. When we're deficient sodium, potassium, sodium potassium, these are very important, when we're deficient in these things, problems are bound to arise because our bodies are going to be less capable of running processes.

And another key electrolyte is magnesium. Magnesium is responsible for over 650 biochemical processes that we're aware of. That's 650 things your body can't do, or can't do effectively, it's going to have to find another way, if we're deficient in magnesium. Guess what the number one mineral deficiency is in our world today? Magnesium. And so that combination, sodium, potassium, magnesium, what's the optimal amount of those things on a daily basis? Well, there's one company that collected a couple hundred thousand data points to find the optimal amount of sodium, potassium and magnesium, because again, these things, even if we're eating a whole food diet, there's going to be a tendency to become deficient in particular with magnesium because it's responsible for so much, it's getting zapped from our system to run all these processes that have a lot to do with stress management with our bodies. And they dialed in the optimal combination of these without, here's the key, with electrolytes without sugar.

Without the added sugar, without any unnecessary artificial colors. People out here drinking blue. They're out here drinking artificial blue, we're talking about Gatorade power, whatever, they're just... What kind do you want? Give me the blue. Not blueberry. Not straw, blue, alright? And I'm just being 1000 with you, that was my favorite drink growing up. I'd go to the store, the convenience store, and they had those little juices in the barrels, some people call them quarter water, some people call them barrel juices. I loved the blue, 0% fruit. But I didn't want strawberry, I didn't want watermelon, give me that blue. Alright. What the hell is that blue?

Today, we're moving beyond that stuff and we're dialing in again. Another thing to these electrolytes is that they're going to be acquiring the electrolytes from earth grown nutrients. Alright. So, the sourcing and the integrity behind element is remarkable. Now just to give you a quick glimpse into how important, we'll just take magnesium is in your cognitive function and your brain health. Again, we're talking about brain health, again, we're talking about mental health today.

A fascinating study, this was recently published in the journal *Neuron*, this is the leading journal in the field of neurology and neuroscience, and they found that magnesium is actually able to restore brain plasticity and improve cognitive function. And this neuroplasticity is essentially the ability of our brain to change and to adapt. That's what we want, we want to be able to be resilient and adaptable. And again, this isn't happening in our brains effectively without magnesium. And researchers at McGill University found that sodium functions as a "on off switch" in the brain for key neurotransmitters that enable cognitive function and also protect the brain from neurodegenerative diseases.

Need I say more? Get yourself some element right now. Go to drink L-M-N-T.com/model and you also get a free gift pack with every purchase. With every purchase of electrolytes, they're are going to send you a free variety pack to try out the different versions of LMNT. And by the way, grapefruit LMNT is back right now. And many people say that grapefruit is their absolute favorite, and I just had it for the first time today and I got to agree, it's a little bit too good.

LMNT, what are do you guys doing? Why are you making stuff so good and so easy to optimize our electrolytes? So, for a limited time, grapefruit is back, so pop over there, take advantage, I highly recommend checking out the grapefruit salt from LMNT. Go to drink, L-M-N-T.com/model. And now, let's get to the Apple Podcast review of the week.

ITUNES REVIEW: Another five-star review titled, "amazing practical advice" by Sports Enthusiasts 35. "This show is amazing; Shawn does a fantastic job of breaking complex topics down so you can digest what he's saying and then immediately put that information to practical use in your own life. Honestly, I wish I could give this show more than five stars because that's how amazing it is, please keep up the phenomenal work."

SHAWN STEVENSON: Amazing, thank you so much. More than five stars, I appreciate that so very much, and if you have to do so, please pop over to Apple Podcast, leave a review for the Model Health Show. And without further ado, let's get to our special guest and topic of the day. Dr. Joseph Yi is a board-certified addiction psychiatrist with a specialization in holistic psychiatry and medication detoxification. Graduating as chief resident of psychiatry from Cooper University Hospital, he gained invaluable experience in treating complex psychiatric and addiction cases.

In addition to his local practice, Dr. Yi has extended his expertise to a global scale, reaching out to people worldwide through his incredible social media channels, he is one of my favorite people to follow through the use of humor and arts, and he's provided incredible guidance and support to those in need. And now he's here on the Model Health Show, to share his incredible experience. I'd like to welcome the one and only Dr. Joseph Yi. My guy, Joe, good to see you a man.

DR. JOSEPH YI: Good to see you man.

SHAWN STEVENSON: Thank you for coming to hang out with us, long time in the making.

DR. JOSEPH YI: Seriously, I got to tell you for the people watching this, like I am an enamored by the fact that I'm here at the Model Health Show. Your show is like The Tonight Show of health and wellness. So, the fact that I'm here and you've been asking me for a while to come on your show. It's not that I didn't want to come on. It's that I didn't want to come on after Tony Robbins. You had Tony Robbins a couple of months back. I was like, let that episode cool down, and then I'll come. You don't want to be the guy to come on after Tony. So yeah, happy to be here, brother.

SHAWN STEVENSON: That's awesome, man. Thank you so much. And today we're talking about the mind. Today we're talking about mental health. And you chose psychiatry as your specialty, and I'm curious first and foremost. What made you choose psychiatry?

DR. JOSEPH YI: Oh, it's like that saying psychiatry chose me. So, growing up, I'm sure you know, but young guns are motivated by money, sex and social clouts and I wish I could tell you that I'm someone who want to be this doctor that could change the world and make the world a better place and all that, but that would be a lie. I wanted clouts, I wanted women, and I wanted some money. And I grew up in a very poor environment, I was bullied a lot too, so I figured being a doctor would solve all my problems.

So, I studied really hard, had a chip on my shoulder, listened to a lot of Tony Robbins, and that pain empowered me to reach higher in the game of life. I got a full scholarship to college, got into med school early, but then when you have lousy reasons like sex, money, and power to get through medical school, I came across something called gross anatomy, where I had to open up a dead body, crack the skull and examined the brain and the trigeminal nerves. And I said, "Man, this is not for me." So, I actually quit medical school and left school for about three years, my parents kicked me out, and then I embarked on this musical journey, I wanted to become a musician, and of course with the musician lifestyle, drugs are a requirement, so I did a lot of marijuana and psychedelics at the time. I got to learn how to deal with very interesting human beings called musicians, developed my social skills.

And then after about three years of that, when you put poison into your body chronically and you're not eating clean and you're not moving your body right, I got very sick and depressed, and it culminated into one night where I was just throwing up because I wasn't eating properly, I was just so sick and then people are laughing at me in the streets of New York City like, look

at this homeless guy. Get a life, get a job and I'm like, I graduated top of my class. I got a full scholarship to college, I was a medical student, and now I'm like homeless.

And I said, okay, you know what, I'm going to go back to school and I'm going to do something in the world of mental health and/or addictions work. So that's kind of like how it seemed like a natural fit for me to go back with purpose now. And of course, our good friend Tony Robin always says, purpose equals power. And that allowed me to get back to school and face gross anatomy, of course, that I really did not want to do, but I was able to get through it and get through medical school. So that's kind of how it happened.

SHAWN STEVENSON: Wow, that's an incredible story, man. I had no idea. And one of those is Tony talks about too, that moment of decision, yours was puking out on the side of the road somewhere in New York City, and people pointing and laughing at you and not knowing who you are, your potential, and coming face-to-face with that, and then choosing to like let me make some changes here. Now, you're going to start operating within a certain culture, if we're talking about healthcare and standard of care, and I'm curious, your experience in conventional psychiatry, when did you start to see that maybe there were some holes in this system? Maybe there were... You know what I mean?

DR. JOSEPH YI: Yes. So, you know how over the past three years, people like you and me and the people watching this podcast, we were like, "Can people see what's happening?" You see that, you hear that all the time. And those were my four years of medical school. 'Cause I was the... I kid you not. I was the only dude in Rob Wood Johnson Medical School that was like, "Can we not see that there's no talk about health? It's all about disease. It's all about disease care, not healthcare." And it's a lot about medications and how they mask certain symptoms and help improve and manipulate certain systems of the body to not feel as sick, but there's no really talk about health and fitness. And I don't know if you're aware, but less than 20% of all American medical schools require nutrition as a curriculum, and we had this one course in Rob Wood Johnson Medical School called the biochemistry of nutrition. It didn't talk about nutrition, it talked about the biochemistry of nutrition, meaning, Omega-3 fatty acids? This is what the molecular structure looks like. Memorize this for your test. So, it was a bunch of that. And I was the only one complaining amongst my peers.

You don't see anything wrong with this? And they didn't care. They were just like, "Look, man, we got to study for the board, I don't have time to listen to you." So, that was the beginning of that. And then once I graduated from medical school and into residency, I got connected with this doctor. I read this book called Disease-Proof Your Child, by Dr. Joel Fuhrman. I don't know if you've ever interviewed him, but he's a nutritarian, family doctor, he wrote the book Eat To Live, and talks about a very clean, nutrient-dense lifestyle. And very basic things for you and

the audience who listen to this, but at the time it was revolutionary, and that was the first time that I understood that food can be medicine, and that was kind of like how that journey began.

SHAWN STEVENSON: Wow. Yeah, of course, this being the Tonight show of health podcasts, Joel's team reached out. But just thinking about those seemingly happy accidents where you come across work like that, but you were already questioning things. That's one of the things that I admire about you and how we even connected, I was like, "This dude is actually asking questions." He's questioning not just yourself, you also question your own biases, and you even make parodies about you questioning things, and questioning things that are commonly accepted and making fun of those things. And you just mentioned something really remarkable, which is not being taught nutrition in medical school. Which every organ and tissue of the body is made of the food that we eat, so you would think this is kind of important. If I'm going to be a cardiologist, I probably want to know what the heart is actually made of. The foods that this patient is eating to make their tissues.

But too you shared just maybe 20%, and even the nutrition that they are taught is, to say subpar is an understatement. And so, with that being said, so now you're making this shift and you're starting to actually work with people, what are you seeing in the population at the beginning of your career, and what were some of the treatment protocols? Were drug reps coming to your office? I'm just curious.

DR. JOSEPH YI: Yeah. So, what I learned early on in my medical practice is that... And I've been practicing for about 18 plus years now. Is that a lot of what we learned in the books are not very accurate in clinical practice. So, for example, I am a detox specialist. I make a living from helping people come off of psychiatric medications mostly and elicit substances as well. There's some people who just don't want to be on Zoloft anymore, but it's really hard to come off. So, the way we were trained in medical school is there's this book called The Psychopharmacology Handbook, the prescription handbook, and it's by this doctor, Stephen Stahl. I actually met the dude, I read the book, I was a big fan of his work, and this is like the psychiatric bible of psychopharmacology.

In this book, he talks about how if you are on a medication and you want to taper someone off of it, you drop the dose by about 50% for three days, and then another 50% for three days, and then you discontinue that medication. So basically, he's saying that you could come off medication within a week. And when I started practicing that way in real life, people started going bonkers. And then so I had this one moment with a client early on in my career, where he's like, "I feel like I'm going crazy." And I said, "No, no, no, wait. The psychiatric bible said that this is the way to do it." And he's like, "I don't care what the bible says, man. I feel like hell, and we got to slow this down."

And then we went back and forth, and I just had this moment where I asked myself, should I listen to the guy that wrote the book, or should I listen to the patient who's actually going through this? And so I elected to listen to the guy, I worked with him very closely, and I discovered that, sure, some people could come off of medications like within a week or so, but really what this book fails to acknowledge is how hard it is to come off of medication is based on several factors, one being how much you're taking and for how long.

If you remember algebra, back in the day, the y-axis will represent the dosage and the x will be the time length, right? So, if someone's on a huge dose of a drug for an extended period of time, that surface area is the magnitude of pain you would have to overcome to get through this taper or the detox. Now, if someone's on a low dose of drug for a few weeks, yeah, of course, you could get off in about a week or so. So, I've learned things like that that the books didn't teach me via listen to the client.

So, I learned very early on like, okay, a lot of the stuff that I learned from the school that didn't even teach me about nutrition and fitness and food as a medicine, maybe I might want to listen to some alternative sources to see how I could become a better doctor. So that's one of the first things that I learned early on in my practicing career.

SHAWN STEVENSON: Wow, man. And just to even have that as a specialty, it's an incredible resource, just for people listening. You mentioned prescription medications and illicit drugs as well, so you're helping folks who are... Obviously one of the biggest epidemics we're facing right now is with opioids, and in particular fentanyl. So, what is the current situation you're seeing with that?

DR. JOSEPH YI: Yeah, that is happening, but because of people like you, Shawn, who I consider to be a very serious light worker, more and more people are catching on to the fact that there are better ways to take care of your mind, body, spiritual health, by taking care of yourself. So, podcasts like yours and others out there, it's really making a significant impact, where people come in and say, "Look, I've been listening to Shawn Model, and I feel a lot better, and I don't want to be on Prozac and Zoloft anymore. So then when that happens, yeah, we do these small incremental tapers over an extended period of time. So that's mostly what I do, but yes, of course, the fentanyl epidemic is a big deal.

You, of course, know that in 2021, it was the first time that the United States passed 100,000 drug overdose fatalities, and 70-80% of that was from fentanyl, and now we got this big thing in Philadelphia, 'cause I'm from the East Coast. I don't know if you heard of something called Xylazine. But Xylazine, X-Y-L-A-Z-I-N-E. And they get these ingredients from all over the world, mostly from China, that produces this chemical called Xylazine, and it's an animal tranquilizer,

and this thing is like a powerhouse anesthesia that you mix that in with a little bit of fentanyl or a little bit of a Xanax, it gives this potentiated sedative effect.

And when people shoot this up, not only do they get really high, and obviously offers them a complete escape from reality, but it causes dead skin cells too. Necrosis of the skin lesions. So, people are getting their fingers and their hands amputated. It's a very ugly thing that's happening in Philadelphia right now. Xylazine, yeah. It's been all over the news too.

SHAWN STEVENSON: Crazy. Crazy. As soon as you said that animal tranquilizer, I thought about the scene from Old School where Will Ferrell shoots himself in the neck with the animal tranquilizer dart.

Hey, be careful with that. That's the most powerful tranq gun on the market. Got her in Mexico.

Cool.

Yeah, it is cool. They say it could puncture the skin of a rhino from...

Ow! Oh. Yes! That's awesome. What? You just took one in the jugular, man. Whoa. Yes! Oh my God. Oh my God. I did. Is this bad? Is this bad?

You should pull that out. It is not cool.

Wait, wait. Pull what out?

dart, man. Got to dart in your neck.

You're crazy, man. You're crazy. I like you. But you're crazy. I feel tired.

SHAWN STEVENSON: I thought about that. It's kind of comical that we would turn to something like that, but in reality, humans do the strangest things, and we have an issue with looking at the results. Right? So seeing this epidemic, even with fentanyl for example, where, and again this is readily available, it being the leading cause of death for people in their "prime of life years," between 18 and 45. And if it's the number one cause for younger people, number one cause of death in our country, in our society, you would think it would get a lot more attention, but unfortunately we're focused on things that are not remotely as deadly, as you know. And this brings to light, and again I'm grateful that you're even mentioning that 'cause I had no idea, you know we're not watching the news out here like that, but eventually when something lands, hits my radar and I dig into it, I find again there's somebody that's monetizing suffering and that's really the system that we have right now.

DR. JOSEPH YI: Yes. And I was actually thinking about this, I'm glad you brought this up, because I mean this. A friend of mine, we were talking about, what could we do to like... If we had absolute power, like Kim Jong Un in North Korea, and we could revitalize the system, like revamp the system, what could we do to really make it better, make healthcare a legit healthcare system? And the one thing that I really think that we need to get rid of is to incentivize these doctors to do these lousy 15-minute med checks. You and I both know that you can't get nothing done in 15 minutes when it comes to health and wellness. It's like you're going to really talk to someone about nutrition and wellness in 15 minutes. You have 15 minutes to go over a med check. Raise, change, lower, medication dose. But the system incentivized that.

So, for example, my nephew is about to enter into Carnegie Mellon University. \$85,000 a year, room, board, tuition. Come on, man. 85,000? So, he's going to graduate 300,000 plus in the hole, assuming he even goes to medical school, half a million plus in the hole. Residency, he's making pennies on the dollar. So, when he becomes a young attending physician, he's going to be in a system where, okay, you see a patient for one hour, let's just say he goes into psychiatry, he could make 300 bucks by seeing a patient for an hour, or he can make 150 for every 15-minute med checks.

So, he's going to do the math and he's going to say, "Okay, I'm in a sh*t-ton of debt, and I could make 600 bucks in an hour seeing four patients or I can make \$300 in an hour." I think he's a good dude, but he's going to have to make an executive decision where his survival needs, needs to be met. So anyhow, my point being is the system incentivizes these 15-minute med checks, and if I had absolute supreme power, I would abolish that, and at least require like 30 to 45-minute visits with the health professional. One.

Two, just like how I was talking about how in medical school nutrition and fitness is not a requirement, I think we should mandate nutrition and fitness as a core requirement, because that's where we get into true healing. That's where we really get into healthcare. Not sick care. So that's another part. And there's hardly any teachings of that in medical school. That is true. When the holistic wellness guys are complaining about it, they're actually right, it is true. And last but not least, this may sound a little silly, but I am serious as cancer about this. In order for you to have a license to practice medicine, you have to pass a series of board exams, right? I also think that we should mandate passing a physical fitness exam.

You can... Look, one of my early days, I was invited by a drug rep, and it was like a doctor social, and they were pitching this drug, and the doctor that was sitting next to me, I swear to God, man, he must have been at least 340 pounds. I was thinking the whole time, when was the last time this man saw his own penis? So, my proposal is, in order for you to be practicing and have

lessons, you have to have a BMI of under 27. I think that's reasonable, man. 27. Under 27. One. And other fitness tests, like...

SHAWN STEVENSON: Can you see your penis?

DR. JOSEPH YI: I could see my penis very well, yes.

SHAWN STEVENSON: Not you. But just being one of the tests.

DR. JOSEPH YI: Yes, yes.

SHAWN STEVENSON: He sees, very well.

DR. JOSEPH YI: Yeah, you got to check that. Or even run a 10-minute mile. That's reasonable, Shawn. You should be able to do that. Or like 20 push-ups in under a minute. So basic physical fitness test, and then every two years have the doctors come back and pass the fitness exam. Instead of just the continuing medical education credits. So, I think if we did that, then doctors would be more incentivized and more likely to talk about health and wellness and fitness than just doing the bare minimum to make as much bank as possible.

SHAWN STEVENSON: That's powerful, man. Ironically, we have these physical fitness tests for people who are armed with guns and assigned to go kill people, I'm talking about military, and in that context, but not for those who are here to heal people. And if you really think about it... And this is the craziest thing, man. Ironically, it's the exact opposite in healthcare. Working at a university for so long, I worked with a lot of nurses as well, just seeing their health just exponentially get worse over time, and with the classes and the clinicals and all this stuff and just struggling, having to have a part-time job as they're going through all this stuff, and sacrificing their health and really making sleep deprivation a badge of honor. Stress, right? You tear your own health and wellbeing apart. And if you happen to make it out 'cause you're young, seemingly physically unscathed, like you look "fit", but your mental health is just absolutely demolished.

DR. JOSEPH YI: Yeah.

SHAWN STEVENSON: That's what we're seeing here in the field of medicine. It's one of the most riddled with disease fields, in particular with nurses. Higher rates of cancer, in particular breast cancer. Higher rates of obesity, diabetes. These are the facts. With physicians, it's either number one or two highest rates of addiction and use of, and also, they got accessibility. Use of drugs and alcohol and just trying to, again, the mental management and not having those skills taught in medical school, what if we create a system where we can heal the healer in the

process and having people really armed with true tools of wellness? But you just articulated it very plainly, we're getting into this system where you come out and you're just... You're trying to survive yourself, and you're thrust into this system where you got to try to do what's best economically and not so much what's best for the patient.

DR. JOSEPH YI: Yeah, I see that all the time, man. And interesting you mentioned that about doctors and addiction, and I'm seeing... I don't know if you're recognizing this amongst your clients or the people all around you, but addiction is like, there's this whole addiction epidemic that... The silent addiction epidemic that I don't think people are really talking about, but have you noticed that technology is kind of creeping its way in? And I do believe that people could use technology for the better, but have you noticed that it is a major contributing force to addiction all throughout the world?

And if I could talk a little bit about that. 'Cause I'm an addiction psychiatrist, and this is what I'm kind of getting people to think about. People have been using substances since the beginning of time. There is plenty of archeological evidence that suggests that marijuana, psilocybin, they've been using it for ceremonial purposes and so on. But more recently in the history of humanity, there's been this shift from use towards abuse and addiction, and I'm seeing that technology being the major catalyst for this on three different levels. One is that technology has allowed for the mass production of all of these substances. Back in the day, people used to grow tobacco leaves and roll it up and smoke it, and nowadays you have Marlboro and Camels and packs, not only that in mass production, but the vape pens readily available everywhere. So, technology has allowed for the mass production of all these substances. Alcohol, everything. One.

Two is that technology has allowed for the potentiation and increased concentration of these substances. So, I don't know if you're aware, but back in the Bob Marley days, marijuana used to be, the bud, used to be about 4% THC in concentration. 4%. Nowadays, with these vape pens, THC concentration's up to 90%. And for these developing minds, man, that's a little bit too much for the mind to handle. And your boy, Dr. Daniel Amen, was here not too long ago, and he talks about decreased blood flow to the brain from marijuana use. That's not good. So, it's really hurting a lot of people at this intensity. And last but not least, like we were talking about before, technology has allowed for the creation of synthetic chemicals like fentanyl and/or Xylazine, and what else is coming on down the pipeline.

So, yeah, I do believe that technology is a major catalyst, but also, it's technology plus the human being. 'Cause there are people like you, who could use a phone very responsibly, and there are other people who irresponsibly abuse the phone, get addicted to it, and they have very adverse life consequences as a result.

SHAWN STEVENSON: Man, this is so important, man, because even with Daniel Amen making a statement about that with marijuana, especially in the developing brain, and the multiple studies that we now have, and it increasing the risk of psychosis, a lot of folks... Of course, something that's very polarizing, because again, you just mentioned marijuana has been around a long time, and used ceremonial, whatever the case might be, and humans have had... We even have these cannabinoid receptors, right? However, the stuff that people are smoking today is not the same stuff. You just said the Bob Marley age, right?

And so, if you think about that in the developing brain especially, we have to be open and honest to say, maybe this isn't good for our children. Whereas he shares a message like that, and people sometimes because maybe it's been a staple in their life and they don't see any harm and all the things, they'll say that it's bullsh*t, it's just made up. It's the man making up another study, that Mother Earth has made. Mother Earth didn't make that 90%.

And here's the thing, too. A lot of times if you click onto their page, they're selling vape pens. It's like that's their schtick.

DR. JOSEPH YI: Oh, yeah.

SHAWN STEVENSON: But I don't tend to look into that stuff very much, but I've never seen anything as polarizing. Even with all the COVID stuff, I didn't see that much polarization.

DR. JOSEPH YI: Oh, people love their weed, huh?

SHAWN STEVENSON: Yeah.

DR. JOSEPH YI: They don't want to let that go.

SHAWN STEVENSON: And, again, you've got to keep this stuff in context. Certain things are appropriate for some people at some times, and we have to give ourselves permission to understand that everybody's not the same. Just because you have this certain experience does not mean that this is appropriate for other people. And especially if we get into this place where we see a large dataset of negative outcomes for children. I think we can even get to a place at least just acknowledge like, maybe this isn't the best for kids and the developing brain, then we can start to have a healthier conversation. And again, still, not to say that that isn't appropriate for some kid who this actually helped to manage a symptom, whatever the case might be. And this is also leaning into the conversation I want to have with you about other modalities that are oftentimes misunderstood. I want to share this study. I don't know if you've seen this one yet, it just came out like two months ago. You mentioned diet and exercise being like hallmarks of mental health.

This was published in the BMJ. No big deal. It's just one of the top journals in the world. It's a meta-analysis. This included 1039 randomized trials. Over 1000 studies.

DR. JOSEPH YI: Okay.

SHAWN STEVENSON: And this included also over 130,000 participants. And it revealed that physical activity is 1.5 times more effective at reducing mild to moderate symptoms of depression, psychological stress, and anxiety, than medication or psychotherapy. Right? Not to say those things aren't appropriate for some people at some times, but physical activity is something our genes expect. It is something ourselves require, and it's documented, over 1000 studies, to be more effective than that other sh*t. But yet this isn't talked about.

DR. JOSEPH YI: Oh, I got a funny story for you, man. This is a true story. People listening to this, they're going to be in disbelief. Several years ago, I was at the American Psychiatric Association, the annual meeting, and I'm required to attend this thing so I could keep my license and all. And the president of the APA came out, and he was talking about how there's like, we're funding all this research to investigate Gavipap and its role in depression and bipolar disorder and all this, and we got some really exciting things coming your way. So, I raised my hand and I said, "Are there any fundings for research that proves that nutrition and fitness is great for mental health and addiction recovery?" And the guy basically paused, and he said, "Well, as of now there is no research down the pipeline investigating these factors, but if you could prove, if you could send me some articles that proves the link between fitness and nutrition in mental health and/or addiction recovery, I'll be happy to look into it." This is the president of the American Psychiatric Association. So, I guess we could send them that article and say, There you go, bro, you could do some work now.

SHAWN STEVENSON: That's crazy.

DR. JOSEPH YI: But that's a true story. And this is the system that we're working on. So, I do believe that there are a lot of people that are listening to this that are catching on, that like, okay, there's something not right with this western system. There's got to be a better holistic way of doing so. And that's great, but the other thing that I just want to bring up real quick is that I think certain holistic influencers do mess things up a little bit. Like the guys that are talking about like, water is not hydrating. Come on, man. I don't know if you've seen this going around. And if they want to make the argument that, okay, you want to drink coconut water or get your water from foods 'cause there's certain minerals and electrolytes that help enhance the absorption, fine. But you can't say that water's not hydrating. Like if you're in a desert and you're dying of thirst, you're not going to drink a bottle of water?

And then you got the meat eaters, the carnivores, who are saying vegetables will kill you. These plant defense chemicals will mess up your thyroid in your kidneys. Let's not forget all the other nutrients that are in the vegetables too. Let's just like forget about that. And then there are people now, the vegans saying, "Well, if you eat meat, then there's MRNA technology in there and you're going to die from that."

So, everything is bad now, and I can see how the layman can look at this and be like, "Yo, man, forget health and wellness, this is too confusing."

SHAWN STEVENSON: Right, right.

DR. JOSEPH YI: You had these guys on your show, man. You know what I'm talking about?

SHAWN STEVENSON: Yeah, pass the Courvoisier. I don't want to deal with any of this stuff. Alright, so... And you just really brought up a really important thing for us to understand. This is one of the things that I always work to do, is to intentionally bring on multiple perspectives. Because a lot of times what happens is with any of these guys is they'll find success with a certain protocol, and they'll think it's appropriate for everybody. That's the problem. The same thing with the drugs, like keep reiterating this point, but we can find healing, we can find benefit in a lot of these different things at certain times for certain people. And so, if you've been struggling for years with gastrointestinal issues and depression, and then you do the carnivore diet and you have a resolution and you feel good and you have no more gut problems, and your mental health is better than it's been since you can remember, that's a validation for you that that thing is effective for you right now. But you got to give yourself permission to keep the window open, don't become so dogmatic and biased that you start to put up the crucifix at Brussel sprouts, just like these Brussel sprouts are going to... They're out here killing everybody on the streets.

And here's the funniest thing about all of this is that most of us agree more than we disagree. Hallmarks. Healthy amounts of movement, good sleep quality, eating real foods, regardless of the category we place them in mentally. That's the thing about humans, we sometimes get too smart for own good, and we start categorizing all these foods, versus things that are not f*cking food, which is the majority of what we're eating today. That's the problem. We're in-fighting about what real food is the best real food and ignoring the fact that, according to the BMJ again, no big deal, what do they know, over 60% of the average American's diet is ultra-processed foods. It's not food anymore.

DR. JOSEPH YI: Yeah.

SHAWN STEVENSON: So, again, I think that regardless of the tribalism, like this is the real issue.

DR. JOSEPH YI: Yeah. Hence 42% of Americans are obese now. And that's...

SHAWN STEVENSON: This is prior to the pandemic, by the way.

DR. JOSEPH YI: Yeah. And, brother, I saw some obese homeless people in LA. I don't understand that's how even possible, but it's possible here in America. Yeah.

SHAWN STEVENSON: I've talked about that too. The obesity within our homeless populations are really on par with the rest of society. That's never existed before. Traditionally, if you think of someone who's homeless, like they're lacking nutrition, they're lacking food. We think of the Game of Thrones type homeless person. You know what I mean?

Just like... No, no, like they're eating out here. But they're eating ultra-processed foods. And so, again, maybe that's the problem, maybe it's doing something very strange with our metabolism. And also, this speaks to the fact that we are over-consuming, but we're also deeply deprived and starving. Ourselves are starving. And also, our minds are starving for real quality, even quality thinking. And so, I want to ask you about this, because you brought up the technology addiction. And being that all of us, we have these, we have these devices with us, for many of us 24/7 it's our best friend. You lose your phone; you lose your mind. Literally. And being so focused on what's going on through this small rectangle, and viewing life through this, and starting to perceive life differently through this, perceive yourself differently through this, how is our addiction to our phones and social media, how is that affecting our mental health today?

DR. JOSEPH YI: Yeah, I don't know if you're familiar with the work of a social psychologist by the name of Dr. Jonathan Haidt, H-A-I-D-T, I think I'm pronouncing it right. Haidt. But he's a social psychologist out in NYU. And you should have him on your show. He was the guy behind that Netflix, there was that documentary on the social dilemma, and he was one of the guys behind that. But what he talks about, this is super interesting, is that Facebook came out in 2006, 2007 was when the iPhone came out, and in 2010 was when half of our country had both social media and the phone together. And when you look at 2010, over a decade to 2020, that was on average about 100% increase in suicide rates amongst teenage girls. And when you see the graph and the correlation of social media to these rates, it is startling, when you see that together. So, he's the guy that caught on to that. A lot of people are like, "Why these kids all going bonkers and stuff?" And it's not so much the males, but more the females.

And what he said is that guys are more into the porn and the video games, girls are more into social media and comparing themselves to other people. And nowadays these kids are getting their sense of self-worth and their dopamine fix through their likes and the views.

So, yeah, man. And I've talked to a lot of women about this too. It's like women are always comparing themselves to other people, checking out the dress... Women check out women more than guys do. So, when you're always comparing yourself to someone who has a filter or someone who was at a better party, who has more money, the better boyfriend, girlfriend, whatever, it could be a pretty depressing situation. So yeah, I see that as a major, major issue. And I want to give you a quick little story from my clientele. 'Cause when I ask these kids or adults for that matter, how much time are you spending on your phone? And the average is about seven hours in our country. Somewhere around seven hours of screen time. They are... My clients are averaging about 10, 11.

And there's this one kid who says, I don't look at my phone. So, I said, "Okay, do you play video games?" We tracked his video game time. It's like 14 hours a day. Like, how is that possible? With sleep and everything too. He just has it on the whole time. And these kids are not... Back in the day, I'm sure you used to ride bicycles with your friends and play kickball or dodgeball, whatever, in your neighborhood. When was the last time you've seen kids out in the neighborhood playing, playing and engaging physically together? They are literally in neighboring places playing video games with their headsets on. Limited physical interaction.

SHAWN STEVENSON: Or even in the same room.

DR. JOSEPH YI: Yeah, yeah.

SHAWN STEVENSON: With "play dates", which that's a new terminology. We just played. Can Rico come out and play? It wasn't like, "Hey Rico, you want to have a play date?" You know what I mean? It's a different thing. But no disrespect to that. But you're so right, man, there are several small kids who live on my block, but you hardly ever see these kids outside. There's one family that will be outside, their little kids playing, but for the most part, these kids are just indoors, unless they have a specific activity that their parents sign them up for. And there's obviously multiple reasons behind this. There's a fear. There's a safety thing. Man, there was like a looming thing when I was a kid about kidnapping and things like that, and very real things that any parent is afraid of, but just to think about the level of freedom that I had. We just were outside.

And for the most part, we're okay, we're safe, and just, "Be home before the street lights come on," that whole phenomenon. Today, we know what can happen, we might have experienced things ourselves, and we want to really keep our kids close and really, in many ways, over-parent or over-protect them, to the degree that they become deficient in the ability to... I was just talking about this with Caroline Leaf, who you met today, about becoming more fragile. So not being able to really develop resilience.

And so, what do we do? We go more into technology, we go more into social media, turn off that struggle that we're facing. And not being able to process our own thoughts, process our emotions, and have our thoughts fed to us essentially through these apps, through the social media, and getting to this place where, then what? And this is where I want to ask you about next. Now that I'm feeling so deficient, so disconnected, so unworthy, or whatever the label might be, I know I'm turning to the medical paradigm for help. I'm really, I'm addicted to social media, and my mind is now trained to see through this lens of reality, my perception of reality is distorted, but now I'm coming to my doctor and telling him that I'm depressed and anxious.

DR. JOSEPH YI: Yeah. So, there are a lot of people who are socially malnourished, and that is a big problem. Because technology has allowed us to connect with people a lot easier, but it's made it never so much more difficult for us to give a sh*t and care about one another. So, it's like this very empty sense of connection. So, a lot of people are socially malnourished. And I don't think you're going to like where I'm going with this, Shawn, but I'm going to say it anyway. But that's why I believe that... We of course know that in psychiatry a lot of what we do is masking symptoms and band-aiding wounds, it's not really curing much.

So, if someone has an acute panic attack, I give them a medication that chills out the anxiety. It's like a band-aid for a bleeding wound, we just need to chill out the bleeding until we can get to the core root of why you're bleeding in the first place. So that's what a lot of psychiatry is, and I think psychiatry and the medications can be helpful for some people sometimes, but it's not really curing anything.

But, having established that, I'm sure you know that there's a whole wave of ketamine treatment that's on the rise. And just to be clear, when I first heard that ketamine was being used as an antidepressant, especially for treatment-resistant depression, I laughed at it, because back in the day when I was a homeless musician, I was doing a lot of ecstasy and ketamine, and you name the drug, I was snorting it and putting it in my body. And so, I was like, "No, there's no way in my good consciousness that I would actually promote ketamine and offer this as a treatment for depression." But one of my closest friends who's a hardcore holistic psychiatrist, he's been doing ketamine treatment and offering to his patients, it's like, "Bro, you need to get trained in this. Whether you want it and you want to do it for yourself or not, at least add that as an option for the clients."

And when I trained in ketamine, starting last October of 2022, I saw certain things, man, that really allowed me the opportunity to face what's in my subconsciousness that's just been hiding under there, and do the work and truly heal myself. So, when you're talking about people need different in perspective, I do feel like psychedelics offer a tremendous opportunity, and I'm very hopeful about this, to get people to see things from a different light.

And real quick, I want to give you an example. I came out open on my Instagram Lives about this, but I was a long-time cigarette smoker, and I've tried a lot of substances, but the one thing that was my Achilles heel was tobacco and nicotine. And then more recently I switched from tobacco to the vape pen, thinking that that would be the safer, less addicting option.

Boy, was I wrong. The conversion was exponentially more nicotine in my system, 'cause you could smoke it indoors and all this stuff. So, my wife and my kids would say, "Look, you shouldn't be doing this." My partners would say like, "Look, man, you're a board-certified addiction psychiatrist, you shouldn't be doing this kind of stuff." And I would preach about health and wellness to my Instagram family, without them knowing that I had this terrible affliction. And when I did that psychedelic experience with ketamine, when I was training in there, I found myself in a basement somewhere, in a dungeon, chained up. And it was not a very pleasant sight. And I saw some demonic figures come in and handing me the vape pen, and I saw myself bow down and accepting this thing and smoking it.

And when I came out of that chip, I said, "Wow, evil has evolved." People would think that the devil is someone who has pointy ears, red with a pointy tail and a black trench coat and trying to kill people or hurt people. But evil has evolved to the point where it doesn't have to kill you if it could get you to kill yourself. And nowadays with pornography, social media addiction, fentanyl, these vape pens, evil has evolved to the point where it's getting people to hurt themselves to the point where they're killing themselves and destroying their lives.

So, once I recognized that, I've never touched it again. So, I'm like about 150 days clean now. But I have to say that out of decades of doing this kind of stuff, this was the first time that I was able to stop using the nicotine vape pen. So, it gave me a different perspective and allowed me to really change.

SHAWN STEVENSON: Yeah. Man, thank you for sharing that. Because that's another thing about you, where a lot of us... We've seen this stuff where people... We basically hide the things that are not congruent with our persona. And you're somebody who I immediately saw like, this is a real person. And to share even that dark thing, that thing that you're struggling. We're doing all this other stuff right, too, that's another thing that we'll tell ourselves. It's just like, "This is my Achilles heel." And here's the thing. What that is doing is giving the opportunity to address the root. Right?

And this is another correlation with Caroline Leaf, and so often we're trying to trim the hedges, we're trying to treat symptoms, but what is at the root of this behavior and/or what is at the root... What am I perceiving about this thing that's keeping me doing the thing that's hurting me? And if we can't get face-to-face with that because we're numbing the thing or we're

prescribing something that treats the symptom, it's still there. It's still there just burning in the background, and eventually it's going to light the house on fire.

DR. JOSEPH YI: Yeah.

SHAWN STEVENSON: And so, whether we're turning to, through whatever our deficiency is, deficiency is community, connection, nutrition, movement, the basic tenets of life, the sunlight, and then the sun is going to kill you too.

But then we turn to, again, we have these actual deficiencies here, and then we turn to conventional medicine. Oh wait, you just have a chemical balance, just prescribe this and you're going to be fine. Or we self-medicate. That's the other thing I want to ask you about. We'll turn to other addictive substances and seek solace through that. Or we'll turn to fake food. Whatever the case might be. And so, from your experience, there's a lot of also self-medication going on right now, and people are losing themselves in that and they're not really addressing the root cause.

DR. JOSEPH YI: Yeah. Of course. And ultimately, people aren't stupid at the end of the day. They do a drug or an alcohol for a reason. It's always to either feel better, alleviate pain, discomfort in some way or to enhance performance. So, there's always a reason why people are doing it. But, my goodness, I just came back from a Ayahuasca ceremony, and I'm really into the psychedelics as you can tell. But it's illegal here, just for the people to know. Ayahuasca contains a psychoactive compound called DMT, so it's illegal here, it's a schedule one narcotic. Apparently, there's no medicinal benefits for it, and it's highly addictive, according to our government.

So, you got to go overseas for something like this. And when I was hanging out with a shaman over in the mountains in the jungle somewhere, and we did the Ayahuasca ceremony, and it was me and four other people that were doing this together. And when we were in the trip, the psychedelic experience, and Ayahuasca's at another level of a psychedelic experience than ketamine or psilocybin or some of the people, the audience here are into that kind of stuff. And when people are borderline seizing on the ground and other people are puking and I'm just here like, "My goodness, I can't believe this is happening," whatever I was processing. 'Cause Ayahuasca has this higher consciousness and it's giving you downloads and what you need to see and what you need to work on and so on.

What I really respected about the shaman was he just allowed me and everyone else to just deal with it and face whatever we're experiencing. And one of the issues that I'm having with... And maybe this is a little bit of a harsh stance, but I think people are going to ultimately change

through 20% of the time, through inspiration and 80% out of desperation or some crazy ass thing happen in their lives.

So, one of the things that I have learned from the shaman was like, look, you could do your best to try to influence people to reach higher in the game of life, but ultimately, they're going to come to their own conclusions through the universe or life. They will have to face their own demons and learn and grow from that. So, when it comes to the way I treat clients, I used to spend so much of my time and energy trying to convince these people that eating healthy, sleeping right, exercising, and stimulating their mind and connecting with the right people is the right way to go. And you know what, man, 20% of the time I was successful. 80%, it's usually they get into some crazy ass car accident, they get in trouble with the law, something happens, their wife leaves them because they're drinking too much, that's when they really choose to change.

Now, maybe you might have a better conversion rate through your show, and people are like, "You know what, man, I want to look like Shawn Model, and I want to start eating better and taking better care of myself. But the vast majority of the cases, people just want to numb up their pain and discomfort through these short-term helpful chemicals. And then long-term wise, they've realized that they've developed a tolerance, it's not really doing the thing that it did initially. And they go through enough stuff and then they come to their own conclusion, they're like, "Okay, I got to start taking better care of myself."

The issue that I'm... The thing that I'm seeing now is that a lot of times people seem to do the right things at the wrong time. So that's one of the things that I'm hoping through my social media and through your podcasts and so on, that we get the message out there to like, let's just keep it very simple and make the initiative to take better care of themselves, it's not that difficult to do.

SHAWN STEVENSON: Right, yeah, that's the ironic part. Got a quick break coming up, we'll be right back. Did you know that there's a spice in your spice cabinet that can very likely improve your insulin sensitivity and help you to burn more fat? This spice has been utilized for thousands of years, and now today we got tons of peer reviewed evidence showing how incredible it is for so many aspects of human health. I'm talking about the renowned spice turmeric. Now turmeric is actually in the ginger family, but it has its own claim to fame today, and researchers at The Department of Neurology at USC found that one of the active ingredients in turmeric, curcumin, is able to help eliminate amyloid plaque in the brain, slow down the ageing of our brain cells and also help to remove heavy metals and reduce inflammation in the brain.

And by the way, I'm talking about its impact on body fat, turmeric has been found to both improve insulin sensitivity, reduce blood fats and directly act upon our fat cells. And to take it up one more mental notch, research published in the Journal of Ethnopharmacology points to turmeric's potential to reduce both anxiety and depression. Turmeric functions like a Swiss Army knife for human health and benefits. And today more than ever, people are going beyond the casual curry and doing one of the most remarkable teas that you're going to find, and that is having a turmeric latte.

And my favorite turmeric latte, and my favorite turmeric drink, is coming from Organifi Gold, and this is because it also has other bio-potentiators that make turmeric work even better in the human body. I'm talking about cinnamon, I'm talking about ginger. And also, here's the thing that makes Organifi's Gold so remarkable, it also has the medicinal mushroom, Reishi, which according to research published in Pharmacology, Biochemistry and Behavior, they found the Reishi was able to decrease our sleep latency, meaning that we fall asleep faster, was found to improve our overall sleep time, and also improve our deep sleep time and light sleep time, so our REM sleep and non-REM sleep. Pretty remarkable.

So, I highly encourage you to check out this incredible Organifi Gold Blend. Go to Organifi.com/model, that's O-R-G-A-N-I-F-I dot com, forward slash model. You get 20% off their incredible Gold Blend, as well as their green juice blend, their red juice blend, and actually store wide. So definitely take advantage of this and make yourself your own turmeric latte. I love the turmeric blend, the Organifi Gold, with some almond milk or milk of your choice, warm it up if you feeling spicy. And it's one of those things that really helps to add another layer to your health and wellbeing. Check 'em out, go to Organifi.com/model, for 20% off. And now, back to the show.

Now, word of advice, you don't want to work with the shaman who got his online certifications six weeks, first and foremost. But also, this speaks to the different aspects of the human experience and different tools, and this is something that's been utilized for thousands of years. And this is not an avocation for anything, by the way, I'm not even advocating to eat real food, if you want to eat a Twinkie so be it. It's probably in your best interest to eat real food, but for us to realize that there are far more options for treating our issues, and you just said one of the most remarkable things in this conversation which is, most of the time we don't change until things are bad enough, which is a very strange thing about humans.

Inspiration, it can hit, and we can do a thing, but when things are just kind of bad, well, maybe I should walk a little bit. Okay, whatever. But until you... What if you lose the ability to walk or you have an injury, or like you just said, some life crisis takes place? Of course, yeah, I've seen people much more motivated in those contexts. But ultimately, again, it's finding a way through to get to the root cause of why we're hurting ourselves. And so, if it's through...

Sometimes that can happen in conventional treatments, it's not off-limits there. And then we've got this psychedelic treatment model that's emerging right now, which is so interesting because this has been around so long and now it's kind of having this resurgence. But really what I want to talk about as well is, why is the other system so pervasive, that's so ineffective, why is it so pervasive?

And so, in your practice, I know you mentioned going to an event where you had drug reps and you were sitting next to the guy, whatever, but a lot of people don't have that experience of running a practice and doing the day-to-day stuff. Once you get out of medical school, we have these continuing education things, who is really teaching our physicians about treatment? Is it some prestigious institution with all of this science to back it up, or is it drug reps who are coming to your office and passing out pamphlets and inviting you to fancy dinners?

DR. JOSEPH YI: Yeah, yeah, most doctors are not like me and Dr. Daniel, Daniel Amen, who like to look into independent... Other researches, alternative researches, on health and wellness, and so on. But a lot of the doctors, they just... What I'm observing is that there are a lot of doctors that are just very burnt out, so rather than after work doing some other independent reading and so on, the last thing they want to do is think about health and wellness and things of that nature. So, they do get a lot of the information from the drug reps about the new medications, so that is true. And big pharma's very clever man, I got to tell you. I'm laughing telling the story, but they're very clever in the way they go about... It's like they put in all this money into researching like, "Okay, how do we get attention from male doctors," because a lot of the doctors don't want to talk to the drug reps?

So, they hire these IG model-like women who get just the best drug reps, and I guess they get some training, and they come, and they entice the doctors into listening to whatever they have to say, and this happens all the time. Are these people following my Instagram, are they seeing who I'm following, what kind of people I'm in to?

But it is pretty shocking how they send very lovely, attractive women to try to get a few minutes in to pitch their drug, 'cause most doctors won't want to talk to and listen about a new drug and so on. And for women, what I notice is that they're not going to send a hot guy over for our female doctors, but we all know that the way into a woman's heart is through food. So, they love to call and say, "Hey, we're happy to send over a rep with some delicious foods, what would you like to eat? And so, let's talk about Rexulti or whatever they're pitching." So yeah, they find clever ways to get into the doctor's office. And I'm looking at the data, and I don't know about you, man, but after whatever happened over the past three years when they're saying that certain things are safe and effective, whatever these guys are coming to me with their data that their drug is better than any of the drug that I prescribed in the past, it's hard for me to fully believe that, if you know what I mean.

So, I try not to get involved with these drug reps, but having said that, when I observe what's around me, yes, absolutely. Most of the people are getting their education through what the drug reps are talking about. And some of my friends, they think they're cool, 'cause they're like, "Oh, did you know that this medication does that, that and that?" Bro, you got that presentation from the drug rep, come on, man. You're like, "Where are you getting this information from?"

So, it's more impressive when I have holistic friends that are saying, "Hey, this is a very cool way, if some people are having withdrawal symptoms from benzos, you could try taking something like a Kava supplement that could help ease the restlessness." That's what I want to know about, but people like you and me, there's not a... We need more of us in this world and less of the western Band-aiding. Although I do believe that western Band-aiding is very necessary, but a lot of the times what ends up happening is... This is a very interesting analogy, but this is what's happening in western medicine. If you're driving your car and there's a blinker, engine blinker, saying something's off, if it gets really annoying, someone might take a hammer and bash that and keep driving. But that doesn't necessarily get rid of the problem, the issue is still there.

And a lot of what western medicine does is it just mask the symptoms, or it takes the signal away, but sometimes that signal is important, so you don't want to completely take it away. So, we see a lot of doctors that are just doing this as like, this is the treatment, the cure, and as a result, the by-product is what we're seeing today, a mess.

SHAWN STEVENSON: I'd say that it's all the time when we get those signals, all the time it's feedback. Your body is giving you feedback, whether it's physical symptoms, mental symptoms. And oftentimes that feedback is requiring some kind of attention and/or change, and we become very... Especially today, we're more comfort... Creature comforts, our favorite thing. We're creatures of comfort, we are comfort-seeking, and that's okay. But we've also got to keep that in check because we didn't evolve with so much comfort, we evolved in conditions where we needed to continuously find ways to make sure that we're going to survive and be good.

So, we're moving to this place where we're beyond survival, but are we going to move to thriving or are we going to create, for the first time in human history, create problems that we have to try to survive? And right now, it's the latter, we're very good at doing that. And so, you mentioning Kava, Kava, I even talked about that in my first book, Sleep Smarter, years ago. And we've got peer reviewed evidence on it helping to be a relatively safe kind of providing that tranquility effect and helping with sleep quality, and it's been used for thousands of years.

The same thing holds true if we're talking about this movement with psychedelics in medicine. Now I want to ask you about this because what I want people to walk away with is to understand that there is a wide variety of treatment options. Most importantly, you want to stack conditions with the things that our genes expect of us to the best that we can and look at what are the means for us to get to the root cause of what behaviors or ways of thinking are ailing us. And so, with that being said, this is in a category, if we just put a category of psychoactive substances. We don't think about that when we're talking about medicine, when we're talking about prescription drugs, but if these are in the field of psychiatry, these are psychoactive medications.

The same holds true with these things that you just mentioned, DMT, being a psycho-active, but we call it psychedelic instead of being in the same category. So, with that being said, all of these different treatment options, how are these in this category, something like you mentioned ketamine or DMT, what's going along in the brain, how does it affect the human body?

DR. JOSEPH YI: Yeah, and before we get into that, I want to make it very clear that most people will not need to see a mental health specialist if they did the four basic pillars of mental wellness. You sleep right, read your book, sleep right, eat right, move your body right and connect with the right people. So, if people just stuck to that, most people would not need to get these kinds of treatments and so on. But having established that, yeah, ketamine is a synthetic big pharma drug that's been around since the 70s, and it's very hard for me to talk about how a synthetic medication can actually promote healing and that's the one that I have the most experience with, so I can speak on that. But yes, one is that it offers people an opportunity to do some shadow work. It is said that 95% plus of your behavior patterns are shaped by your sub-consciousness, sometimes people end up doing certain things without really knowing why they do it, in their subconsciousness.

So, if something is holding you back and you don't know why, sometimes you could do a ketamine psychedelic experience, go in there and face certain things that you may or may not have been ready to see, and that's what we call shadow work. So, it gives that opportunity to do that work, it's not going to do it for you, you still got to do the work. So that's one way.

Two, is that what's really exciting about ketamine is that you of course, know about the dopamine reward center, but the dopamine reward center has this evil twin, which is called the lateral habenula center, and this is a center that's responsible for holding on to a lot of dark, disappointing, depressing memories.

So, when this part of your brain is too active, it has a grip on your dopamine system, so a lot of times people find difficulty in finding joy and pleasure in things that they normally would enjoy

doing. Ketamine goes in and through the action of working on the glutamate, NMDA, AMPA receptor system, we don't have to get into that, but the downstream effect is that it suppresses, or tone downs the volume of the lateral habenula center, which allows the dopamine reward center to breathe, and then people find pleasure enjoying the things that they used to enjoy doing.

And so, when someone has an instant one or two hours after post-ketamine treatment, and they feel like their depression has been lifted, that's from that. So, it's really cool that, yes, it's kind of manipulating the brain, but at the same time, when people are in sh*tty situation, Shawn, and I've been depressed and anxious before, I'll take anxiety over depression any day, but when you have some sinister depression, and if it's just holding you down, sometimes people want that little bit of relief. And then it gives them the opportunity to see the world in a better place and then work on themselves there afterwards.

And lastly, the way ketamine works, which is the most exciting in my opinion, is that by acting on the glutamate receptor system, it enhances... There's a downstream effect that happens, that activates a certain region in your genes called the mTOR region, and when this gene area gets activated, it's almost like a switch goes on and your brain becomes more fertilized. And now your neurons are eager to grow into a new direction, and your brain and your mind becomes more influenceable. So, I'm someone who used to hate reading, after medical school, I didn't want to read anymore, I'd rather watch YouTube videos to learn, and so on. Also, I'm someone who's not like you, I just didn't like weight training., I'd rather play tennis, but I didn't want to weight train.

And then so through my experience with ketamine, I trained my brain to really enjoy weight training. And I told myself, I love weight training, I love it. And now your neurons are like, "Yes, I do love weight training, I love to read." I saw the study that said that reading for six minutes a day can reduce your stress and anxiety levels by 68%, by exercising the imagination and allowing your mind to work, to comprehend information. So, after I saw that study I said, "You know what, I'm going to love reading, I really enjoy reading." And then after about three days of talking to myself like that, you really do feel differently about the way you see reading and weight training.

So that's a great way of my patients who are stuck in certain negative thought patterns to reset and gives them an opportunity to even think positively or think in the more namaste or gratitude way of thinking. So, it's a great way to reset and rewire the brain into a different direction. So, it's hard for me to say that to you, 'cause I know you're a health and wellness guy and we're friends, and big pharma is something that you and I have had some serious problems with, but this is the one thing that I'm like, wow, there's something about this that's very

special. So, I would ask people who are kind of anti-big pharma watching this, to keep a little bit of an open mind that not everything is bad that's coming from that department.

SHAWN STEVENSON: Yes, yes. And so that's another thing too. It's so interesting, in my 10-year anniversary episode, I mentioned one of the keys to... I kind of went over 10 of the biggest things I've learned, keys of success, and talking with world leaders in various fields and also just doing this work for myself 20 years. And one of them was to question your biases, to keep questioning your biases, and I use the example of big pharma. And I went through all... Not all, but a long series of crimes they've committed. But I was like, still, you have to remain open that something good can come from this industry. And now, with that being said, I want to circle back and ask you about the same concern that would come up for me with any psychoactive substance, which is the potential for addiction. So, can we talk about that in the realm of these psychedelics?

DR. JOSEPH YI: Okay, so from my experience, I would say there's absolutely zero potential for addiction with Ayahuasca. So Ayahuasca's not something that people will be going to the streets and trying to get some Ayahuasca, that's just not going to happen. And I can say that with absolute certainty and full confidence, because that's a very hard-core psychedelic experience where I believe that this plant has a consciousness and it's looking out for our own good, despite whatever... It's illegal here. So again, oversees if people are going to try this out, most people would agree that there's something very special and unique and magical about this. And it's not like something that people are going to be abusing. I don't see that. However,...

SHAWN STEVENSON: Wait. Do you know anybody who's been to like 20 Ayahuasca ceremonies in a year?

DR. JOSEPH YI: They have, but not in a year.

SHAWN STEVENSON: Not in a year.

DR. JOSEPH YI: Not in a year.

SHAWN STEVENSON: Maybe like in a couple of years.

DR. JOSEPH YI: I have. But addiction by definition means that you're losing control of yourself to sustain a certain habit. So, one, if someone wants to say, hey, you might end up becoming dependent on it where you feel like you need this all the time, and if you don't have it, you go through like some sort of like a withdrawal. You develop a tolerance to it. That's dependency. That's difference from an addiction where if someone is a crack addict, they will sell their body

and do certain things beyond their control for more crack. But people won't be addicted to Zoloft. They're not going to do crazy things to get more Zoloft or a Prozac for that matter. You're talking about dependency that they don't want to go through the withdrawal of that. So, I forget if the question was asked in that way. Do I see it like addiction potential?

I don't see addiction potential with Ayahuasca. But I will say I do see some addiction potential with ketamine though. And this is something from my training and I have access to it too, right? So when you have a drug that if I'm having a really sh*tty day, Shawn, and if I take this ketamine and it sends me to Saturn for an hour, and I could hang out in the beach out in Saturn and float through with the cosmic angels and spend some time with my mom, and a lot of these experiences on the ketamine journey are like beautiful and super pleasant and it makes you feel good. Yes, tremendous for addiction and abuse, especially in the hands of the wrong kind of person.

So yeah, we have a locked up and it is something that I will say, fully attest to it that there is a addiction potential with ketamine. Not so much with psilocybin. I think most of the people, like the things that come from the earth, I don't know. Mother nature seems to have a way of adding other nutrients in there that kind of have a more sustained release. It's not like so addicting. But yeah, it's the ones that people create, like the ketamine and the MDMA, that's about to come out into the pipeline pretty soon for PTSD treatment. Things like that, I could see tremendous abuse. Yeah. I acknowledge.

SHAWN STEVENSON: And this is speaking to the importance of education and working with practitioners, folks like yourself who have a broad range of experience and also who are not just use, this is the top tier thing. Like, take these drugs, take these different things, but let's address all the other things. Try to check these boxes, and if we need to add in some other things to help us again, address the root cause of your suffering, then we can add these things to the mix. And so, a big part of why do... We talked about earlier, just joking about our carnivore friends, our people who are hardcore vegan or whatever the case might be, and how it becomes the only thing in the toolkit. I want to provide everyone with a vast array of tools in their superhero utility belt.

Especially again, for ourselves, for our family members who might be suffering, but whatever it is, it's trying to get an inroad back to ourselves. And we're so externally focused, again, largely in part to this technology being in this phone and we are not listening to our bodies, those signals you mentioned that are getting smashed. But the signals are going off, and if we pay attention whatever method we are using, whether it's meditation or whether it's through one of these psychoactive protocols that you're talking about but being able to go within and to address the things that are really ailing us, that's the ultimate mission. That can be done so often.

Stanford did some research on this, just the act of walking. Just going for a short walk increases creative inspiration or something called divergent thinking, like 60% versus sitting. And getting us to go within to think differently about our lives, about our problems, about society, really just by moving our bodies. And so what if we can start to create a culture where those things are being prescribed. Low tier things that have pretty much all upside, like it affects everything else in a positive way. And what are the negative side effects of walking? You know what I'm saying? You might end up somewhere, you know what I mean? I don't know. You'll end up in another neighborhood.

DR. JOSEPH YI: I prescribed my patient fun one time, and she wanted her money back. I said, this is what you need. And she said, no, I need to go up. I'm a Pristiq. I said, yeah. I guess, but before we do that, I'm not hearing anything about fun. It's amazing how if you have a child, a baby, and the baby smoking cigarettes all day, eating garbage and confined in his crib, and he's not really going out and exploring the world and stimulating the mind, like you cannot expect that baby to grow up to be happy. We are not that baby, but we are still human beings. We still need to figure out a way to stimulate our minds and maybe cut down and put into poisons there too. And it's a basic concept. You're absolutely right. But a lot of times people have a hard time accepting that to be the official treatments.

And I've gone to arguments and disputes with my clients about like why it's important to eat clean. They'll tell me that they eat Pop-Tarts for breakfast. And I said, well, yeah, but that's all sugar. And they go, no, no, no, but I have my fruit serving in there from the jam. And this is how some people think. And when they think like that, to try to pitch about fitness, and also the other thing too is that, some of these young guns, if I'm trying to encourage them to put down their phone a little bit more and eat cleaner, but then you meet their parents and they're both obese and staring at their phones, it's, I would say, nearly impossible to get the whole family to change. It has to be a whole family situation when the parents do not one to change, it sucks for the kid, man.

So, yeah, I wish there could be a better way of influencing people to make better choices, but some people are stuck in their ways and I feel like they will eventually get to a point where life or the universe will show them the way, probably through a painful way of why they need to change. But I have been a lot happier when I let go of the attachment to the end results for these guys. Hey, I could show you the path, but you now want to walk the walk, it's okay. It's okay. You'll figure it out one of these days. And that's what I learned from the Shaman back from the ayahuasca ceremony. He's just like, okay, man, now you got the downloads. Now it's up to you to decide how you want to live your life now. So, I like that kind of like namaste approach where he's just like, okay, you deal with it.

SHAWN STEVENSON: So, one of the things for us, you just mentioned it, changing our culture, right? You just mentioned the family culture, for example. And really this is where our greatest change, our leverage is within ourselves and within our family unit. But then we can stretch that out to our neighborhoods, our community, society. I believe it's possible. It's going to take a lot of work, but one of the ways of doing it, the inroads, and you use it so well, is through the lens of humor. And it's been such a joy over the past couple of years to stay connected with you and to see what you're sharing, the creations that you're putting out on Instagram and looking at some of these issues, whether it's pandemic related things, shutdowns and all these different things, and putting a lens of humor for us to like, it's more palatable.

But also, laughter is so healing. It's such a good therapy. It's just like when you're... I saw this report recently, and it showed how much our laughter goes down over the years, like from our childhood, adolescence between our 20s and 30s. Like, people stop laughing as much in any given day. And it's so sad because if you look at long lived cultures, they're hanging out and laughing all the time. My mother-in-law, who's definitely listening to this right now, watching this episode, that's what she does. And she's one of the... She's like an icon for me with health and wellness. If there's not something to laugh about, she's going to make something to laugh about. She's going to talk about you, she's going to... Whatever it is and to see something like that, just like great examples of people who are doing well into their senior years. And I'm just so grateful for that, man. Because you are, I'm talking about your genius level with what you're creating. So, can you share what inspired you to start doing that?

DR. JOSEPH YI: Yeah, it's called depression and anxiety, man. When you feel like ass, you want to figure out a way to feel better. And you create content and it's therapeutic for me. So, when I'm frustrated with the world, I'll interpret things a certain way, create a skit with my kids and so on. And those seem to do pretty well because people like to see like families involved and little kids that seem to be somewhat in tune with what's happening. So, by doing that, it's made me feel better. And if it could make other people crack up or make them feel better, what a blessing. But I don't go in with the intent of trying to crack people up. I say, okay, I'm going to make a post, but whatever's happening here with the vegan diet, whatever. And here's what I'm going to talk about and this what the idea is going to be. And it comes out a certain way. And yeah, I crack myself up and I feel better. So, it's like therapeutic for me. On a self-care level, that's what I do. And if other people resonate with it, it's awesome. And it has allowed me to connect with you and some really awesome people in the health and wellness community. And I'm truly grateful for that.

SHAWN STEVENSON: That's the right use of the technology, to connect people. But then here we are in the real world. You know what I mean? And so, can you let everybody know where they can follow you? Of course.

DR. JOSEPH YI: Oh yeah., yeah.

SHAWN STEVENSON: And just any other place that they can get more information, just get more into your universe.

DR. JOSEPH YI: Yeah. So, my Instagram is like my main channel. I used to be on TikTok, but TikTok didn't like me very much, so I got banned from there. Instagram is Yoji-MD, Y-O-J-I-M-D. And I have a supplement line called Beyond Recovery. So beyondrecovery.com. And that's a mental health, mental wellness supplement line that I created with three other doctors, three other holistic doctors, 'cause a lot of what we do in Western medicine in a nutshell is just, it is just backwards. And we just want to keep this very simple in terms of like reminding people to stick to the basics. Let's eat clean and sleep right, and exercise and all that stuff. But if you, for whatever reason, because everyone has every excuse in the book why it's so difficult for them to eat clean nowadays, then at least take some supplements too.

And I want to make it very clear supplements do not substitute real foods as you know. But if you could try to eat a little bit cleaner now, step up your game with the diet game and add some supplements on top of that. And this is a supplement line devoted towards mental wellness. So that's something that people could check out at beyondrecovery.com. But aside from that, that's pretty much my plug. Yeah.

SHAWN STEVENSON: Awesome man. Well, this has been dope to actually hang out and see you in the real world.

DR. JOSEPH YI: Yeah, man.

SHAWN STEVENSON: And everybody definitely go follow him because he's going to bring some brightness to your day and he's always insightful as well. And again, just getting us laughing, one of the best therapies that my mother-in-law pointed me to was not taking yourself too seriously. And I remember there was one teacher that she shared with me, he said that seriousness is a sickness. And I was like, man, you can't be... This guy's not serious. You know what I mean? I immediately, I felt this pushback because in my culture where I come from, especially as you get older, you stop playing. Like, stop playing with me. You play too much. And to reframe things and to lighten up to see the world through the lens of humor and love and connection. Those are some of the things that I have also been lacking in the last couple of years that you've been an advocate for recently too. Reframing things, because ultimately, if we're going to progress as a species, we've got to be more understanding. We've got to lighten up, we've got to check our biases and just be open to change.

DR. JOSEPH YI: And if you want to laugh, just understand that some dude in England just got crowned king. That's kind of funny. And my goodness that actually happened. And lastly, the Shaman, one of the most important lessons for everyone, just to close this up, is that the Shaman advised me before I left that it's very a wise and enlightened thing to be childlike, to play, to remember, to play and be childlike. Don't be childish but be childlike. And that's one of the last things that he took to me. So, he shared with me. So, in moving forward is, I will like to remind my clients to be childlike. Let's have some fun. Don't take life too seriously. Look at these kids, their imagination. And they're running around. They're doing some really cool things. So, let's be childlike. Not childish though.

SHAWN STEVENSON: And being childlike can also be, you can have a king and a queen, by the way.

DR. JOSEPH YI: Is that true?

SHAWN STEVENSON: Shout out to all of our audience in the UK. Congratulations. And that's the thing about us. We're just big adult babies. And we're just manufacturing in imaginary things and creating a life that we feel comfortable with. And the more that we can become aware of that and that... And also becoming aware of how little we actually know, nothing. You've been keeping up with the James Webb telescope stuff?

DR. JOSEPH YI: No. No. I don't know.

SHAWN STEVENSON: Man, this telescope is like, we've got billions upon billions upon billions of galaxies filled with other planets. It's just like we're here in this almost nothing. But the thing is, we're everything, we're a part of everything. And the challenges that we ironically feel so isolated, even though we're part of something so magnificent because we have this unique individual consciousness. And the more that we can get in tune with that and to realize our mind is perceiving things a certain way, but the reality is we're all connected, we all affect each other. Every action we take, every thought we think, and we can start to be the light. We could start to bring the energy to the room.

When you came in here, you brought a certain energy into the room. And you can't turn that off. You are who you are, and it's incredible. And I want to implore everybody to do that. Be more like Joe and bring it to it. Be a light, be somebody who's bringing good energy. Be somebody who's being creative and bringing humor and prescribing fun. So, this has been fun, man. I really appreciate you coming by to hang out with us.

DR. JOSEPH YI: Thank you so much, man. And we got our Instagram live next week or so. So that should be fun. I'm going to be... You're going to be in the hot seat, so.

SHAWN STEVENSON: Let's go make sure again, follow him on social media. Dr. Joseph Yi everybody. Thank you so much for tuning into the show today. I hope you got a lot of value out of this. We've got to keep this conversation going and really normalize our conversation around mental health. Yes. Check that box, this is something that is happening. But also normalize the conversation around effectiveness. Normalize the conversation around efficacy. Are our treatments for our conditions for our growing mental health issues, are they actually working? And are there things that are clinically proven to be more effective?

We've got to normalize that part of the conversation because it's not just about acknowledgement, it's not just about conversations, it's not just about treatments. It's about, are they working? And if not, we can pivot, we can add new things to our protocols. But when we get into the situation where we're being dogmatic and there's one way is the way through our standard of care, which has again largely been ineffective, not to say that it can't be effective again, for some people in some cases, absolutely everything has its value.

So, we don't want to villainize, but also at the same time, we don't want to make one thing, the end all be all. And so, providing a wide range, a wide pallet, a smorgasbord, a buffet of options and education around what are the most important things? Those foundational tenets that Dr. Yi talked about today of right nutrition, of movement, of high-quality sleep, of community and connection. If we have deficiencies in those four things, and we're not addressing those first and foremost and jump right to medicalizing our emotions and medicating our symptoms, when our bodies and our incredible brains are giving us valuable feedback that we need to adjust our behavior, we need to go within, we need to make the changes necessary to express health and wellbeing within our bodies.

When we mute that feedback from our bodies, again in some cases, when there are extreme, to be able to have some reduction in pain and suffering and symptoms in a spot case, yes, we need those things available. But ultimately, we're going to keep having those symptoms coming back and starting to domineer our lives if we're not getting to the root cause of our issues. So again, I hope that you got a lot of value out of this episode. If you did, please share this out with your friends and family. You can share this on social media. Tag me, I'm @Shawnmodel and tag Dr. Yi as well. He would love, love, love to see your feedback and you sharing the show. And of course, you could send this directly from the podcast app that you're listening on.

We've got some incredible masterclasses and world-class guests coming your way very, very soon. So, make sure to stay tuned. Take care, have an amazing day and I'll talk with you soon.

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