Season 1, Episode 28: Impact of Concussions on Your Nervous System
with Titus Chiu, MS, DC, DACNB

Jodi Cohen: Hi. I am Jodi Cohen, and I am super honored to be here with Titus Chiu, who is the number one bestselling author, award-winning international speaker, functional neurologist who's on a mission to transform the face of healthcare for millions of people around the world struggling with postconcussion syndrome. And I love Titus, because functional neurology is fascinating, and you're really able to heal people that no one else can support or help. So I'd love if you could just talk a little bit about how the parasympathetic nervous system plays into your work.

Dr. Chiu: Absolutely. Yeah. It's such an important topic. And I'm so glad that you're bringing this information out to the world, because on one level, when we talk about the nervous system, we can break it down to a lot of different components, but we have what's known as the autonomic nervous system. So two categories is the sympathetic fight-or-flight, and then the parasympathetic, which is the rest, digest, and heal.

And when a person is in a state of sympathetic overdrive, it's virtually impossible to heal from anything, from a concussion, from a head injury, from trauma, or even chronic stress. So when we talk about the parasympathetics, a lot of the work that I've done is I've found ways of using the senses, whether it's sight, sound, smell, taste, touch, or even movements or eye movements, to trigger a parasympathetic response. And, yeah, in this talk today, I'd love to share with the audience one simple thing that they can do, or maybe a few more, to actually do that.

Jodi: Yeah. That would be amazing. And I know that you work with the triune-on brain, and I was hoping you could relate that back to the parasympathetic nervous system.

Dr. Chiu: Yeah. So that's a really great model developed. The triune brain is a great model developed by a neuroscientist called Paul MacLean years ago. And it's just a really wonderful framework to understand, number one, the actual evolutionary process of the nervous system, but number two, how it relates to function. So I use this a lot in explaining with my patients or clients, as well as understanding it for myself. So the triune brain, it looks at breaking the brain up into three parts. So the first part is the newest area over here--

Jodi: I love it.

Dr. Chiu: --yeah, which we call the neocortex, or the dolphin brain. I love that name better. The dolphin brain, which refers to all these different structures that make it the higher centers of our nervous systems that allow us our personality, allow us our ability to tap into spirituality, or create the arts and philosophy, and all these wonderful things. So that's what we call the neocortex or the dolphin brain.

So that's one of the newest structures not only evolutionarily, but also, when we develop from an infant growing up into adults, this is one of the later structures that then fully matures. You probably heard that saying women are much more mature than men? There's actually a biological truth, because many women's brains--and this is a generalization--but many women's brains, the frontal lobe develops sooner in women than in men. But that's just a [crosstalk 03:31].

Jodi: When does it develop? 'Cause they say that about teenagers, too, like their brain hasn't formed.

Dr. Chiu: Exactly. So that's the thing. For women, it's earlier on. It's probably closer to the late-teenage years, but for men, it's sometimes maybe 20 or 25 years old. In some cases 43, like myself, as a work in progress, right?

Jodi: Yeah, right.

Dr. Chiu: Anyways, that's what we call the dolphin brain, or the neocortex in this triune brain model. And this is a really important concept we'll explore fuller in our talk later, but the second part of the triune brain is what we call the mammalian brain. And that refers to what a lot of us know as the limbic system. So this deals more with emotions and bonding with other humans, and just connecting with ourselves and our loved ones. That's these deeper structures.

So you can see here is outer portion, the neocortex, and buried deep within the nervous system is where we have the limbic system. We have areas such as the hippocampus, which relates to memory as well as navigation spatially. Then we have the amygdala, as you probably know of, which is very--

Jodi: Can you point to the amygdala so people can see that?

Dr. Chiu: Yeah. The amygdala's actually buried really deep. You can't really see it in this--

Jodi: Yeah, it's hard to explain. Thank you.

Dr. Chiu: Yeah, exactly, 'cause it's buried super deep, and it's like this little nugget. It's almost like an almond shape, which the name comes from. So it's buried super deep in the structure. So I actually had to--

Jodi: Oh, disassemble. Sorry.

Dr. Chiu: No, that's not a problem, because we'll get to this structure as well. So, yeah, the amygdala's buried super deep in the structure, as part of this whole circuit of Papez we talk about that's related to the limbic system. Yeah. That's the second part of the triune brain, which is what we call the mammalian brain or the paleo mammalian brain, which, again, refers to not only the function, like in terms of emotions and bonding, but the evolutionary development throughout not only globally, from a global macroscopic model of just evolution, but also within our own development again. The neocortex developed later on for some of us in our 40s [laughter] and the mammalian brain or limbic system developed earlier on.
And then, finally, the third part of the triune brain is the reptilian brain. That refers to the brain stem as well as the cerebellum. So the brain stem here, we have composed of three parts: the top, middle, and bottom. The top is what we call the midbrain. The middle is the pons, and, finally, the bottom's the medulla. Now I'm explaining all this 'cause it's going to make a lot of sense in terms of what you can do to take control of your senses as well as your autonomic nervous system. So it's really important to understand these concepts. That's why I'm--

Jodi: No, I love it. And I love that you have visual aids. Thank you.

Dr. Chiu: Sure. Yeah. The reptilian brain, brain stem, as well as the cerebellum, which deals with motor coordination. But, interestingly enough, a lot of more recent research has found that the cerebellum deals with things like autonomic regulation, like the balance of sympathetic and parasympathetic. The cerebellum also contributes to cognition and smoothness of thought, which is really cool, 'cause it plays a big part in my work. That's why the structure is so important to a lot of what I do in terms of using the senses to retrain the brain, because the cerebellum, classically, like I said, deals with movement and coordination and balance. But it's also tied with autonomic control, like sympathetic tone and balance as well as parasympathetic, but also emotional regulation, and even immune function, as well as cognition.

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Dr. Chiu: So by using specific movement exercises, like balance exercises, movements of the arm, eye exercises, we can not only retrain the cerebellum for all those functions, like motor functions, it has spill-over into the emotional world, the cognitive world, as well as sympathetic-parasympathetic balance. Yeah. It's really cool. So anyway, this--

Jodi: And for people who don't know what functional neurology is, you touched on it, but can you explain that a little bit? And how you use movement to help the body and the brain function?

Dr. Chiu: Yeah, great question. So functional neurology is really...it's very similar to conventional neurology, but the biggest contrasting points are, number one, the therapies that we bring to the table. So in conventional neurology, unfortunately, a lot of the options, they're limited. It's like you have medications or you have surgery, for the most part. So for functional neurology, it's like the sky's the limit. If you understand the process of neuroplasticity, meaning how you can use your experiences to rewire your brain, it's really the sky's the limit. So we'll be talking about that.

But, for example, the midbrain at the top of the brain stem, which is a really important control center for the autonomic nervous system, it processes lights and sounds. So based on that understanding, if someone's midbrain is overactive, which leads to a heightened sympathetic fight-or-flight response, what we can do, very simple. We can dampen lights and we can dampen sound. So wearing sunglasses or plugging the ears can really help people who have overactive midbrains, which can look like, in the real world, might be anxiety or a startle response. Or maybe they're really sensitive to lights and sounds as happens after a concussion.

So understanding all the specific functions of the nervous system, in the functional neurology model we can then use sensory-based therapies to rewire the brain. But in conventional neurology, it's like, Oh. You have pain, take a pain medication. So it's more about suppressing symptoms, where functional neurology's all about finding balance and rewiring the brain through, for example, the senses. But we can also bring in higher brain function. So, again, this goes back to the triune brain model.

With functional neurology, we can rewire the frontal lobe by doing things like meditation or even sudoku, or crossword puzzles. We can rewire the parietal lobe through body awareness exercises, or there's a meditation that we call a body scan. That rewires the right frontal lobe and the parietal lobe. We can rewire the temporal lobe through music, and in a lot of our conversations, you can use the sense of smell and aromatherapy and essential oils to activate the frontal lobe as well as the limbic structure. So that's functional neurology in a nutshell.

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Jodi: So, basically, you really understand what makes certain areas of the brain over- and underactive, and based on that, you can then use the senses to either stimulate or sedate certain areas so that it returns it to balance.

Dr. Chiu: You got it. That is brilliant. Yeah, very succinct. Exactly.

Jodi: Yeah.

Dr. Chiu: Is it underactive? Is it overactive? And then from there, understanding what the actual area of the brain processes, we can target it with the utmost specificity. It's so specific.

Jodi: Right.

Dr. Chiu: For example, if we find someone has anxiety, a lot of times from a neurological perspective it's several reasons. It could be that the right frontal lobe is overactive. So to engage, one way of balancing that out is to engage the left frontal lobe. And one way you can do that is to take lavender essential oil and breathe in through your left nostril.

Jodi: I'll demonstrate. Yes. I love that. I do that. I used to get anxiety attacks, honestly, in supermarket check-out lines when it would take too long. And, obviously, now it's taking forever, so I don't leave home without this, 'cause it just helps me calm down.

Dr. Chiu: Yeah, right. Yeah. It's this immediate response. It works from this more neuroplasticity model, because when you smell things into your left nostril, it really goes more directly to your left frontal lobe in what we call the olfactory cortex, which also--

Jodi: Right, right. 'Cause the olfactory channel goes directly up.

Dr. Chiu: And the second thing, it also works neurochemically, 'cause lavender has gabanergic--GABA, which is the calming neurotransmitter--has those properties as well.

Jodi: Right. Inhibiting.

Dr. Chiu: Yeah. In a nutshell, that's functional neurology. It's understanding...so, for example, if a patient or a client of mine comes to me and they're like, "You know what? No matter what I do, I feel stressed all the time." In the world--I mean, right now, things are a little different, but even prior to the current health situation we're finding ourselves in--I've had patients or clients come to me like, "I don't know what's going on. I just feel stressed and ramped up all the time. I can't sleep. I have chronic pain or headaches, or I feel anxious. But everything in my world is pretty good. What's going on?"

And a lot of the answer to that is it's because their nervous systems have become out of balance. And so once I find out where in the nervous system--is it in the neocortex, is it in these areas over here, the mammalian brain, the paleo mammalian cortex, or the limbic system, or is it in the brain stem or cerebellum--but when I find out what those areas are, I can then specifically target it to not only the region but, in our conversation right here, the side it is.

Smelling into the left nostril goes here, or if you do a balance exercise on your left foot, it activates your left cerebellum versus your right. We could become very specific. And through the miracle of neuroplasticity, we can, number one, bring balance to the nervous system, and we can also strengthen areas that are weaker or we can calm down areas that are overactive.

Jodi: And getting back to the brain stem, what parts of the brain stem correlate to what parts of the nervous system? And how can that get thrown out of balance?

Dr. Chiu: Yeah. That's such a great question. In our context of the triune brain, so the brain stem is the reptilian brain. So the brain stem is really interesting, because the top part of the brain stem, the midbrain, it's like a really...actually, all these areas are really important points in the autonomic nervous system, like sympathetic, parasympathetic balance. But the top part of the brain stem, when we activate it, it triggers a powerful sympathetic response. And this is actually part of a larger neural network that we call the reticular activating system. So when this becomes activated, it's all about being alert. It's all about survival.

Jodi: Right. Sensing danger. res, that's all about survival too. And then the brain stem, it's all about survival as well.

Dr. Chiu: Yeah. The interesting thing is, when I was reflecting on our conversation before we had it, I was just like, you know what? All areas of the triune brain are about survival, but it's just how we go about doing it. Like when we develop compassion for others and we develop foresight by training our frontal lobes, that helps us survive and thrive. And when we develop bonding through the limbic structures, that's all about survival too. And then the brain stem, it's all about survival as well.

But if you think about it, it's like different levels of evolution of even humanity. It's like this stuff is really survival, but on a very just visceral level. So if the midbrain becomes activated, you're just going to be in high alert all the time. And that goes back to a lot of the patients and clients I work with. Because even if things in their world are "okay," for whatever reason, they don't know why, they just feel on edge, and it's because this structure has overcome all these other structures.

And that's what happens. For example, the midbrain, when it...and this happens a lot in trauma. After someone experiences trauma or a concussion, or even emotional traumas, this area goes into red alert, and if the trauma is strong enough, or chronic enough, even if it's a micro-trauma, this midbrain gets stuck in overdrive. So all of a sudden, what should help us survey our environment just when threats arise, it's always on high alert. It could be a mental trigger that triggers an exaggerated stress response.

Jodi: Right, like even thinking about losing your job. Even if you've had great reviews, all of a sudden--

Dr. Chiu: Yeah. Because [crosstalk 16:48] into the future. Yeah, 'cause the midbrain's also tied into this structure we call the basal ganglia, which is deep into the brain. Basal ganglia puts the stop on unwanted thoughts.

Jodi: Oh. Like the frontal cortex? It's the overdrive?

Dr. Chiu: The frontal cortex plays a role in the basal ganglia, but so does the midbrain.

Jodi: Oh.

Dr. Chiu: This was a point I wanted to bring up later, but it's a perfect time. When we think about the triune brain and we think about it in terms of the evolution of these structures, these structures are found in reptiles. That's why we call it the reptilian brain. But they're also found in us. But in addition to that, it's like as we developed as human beings from infant to adult, these areas are just raging when we're a baby. That's why our pulse and our heart rate as a baby, or our pulse, is just like 100 beats per minute, whereas most adults, it's like 50 or 60, is because when we're infants, these areas are just going unfiltered.

So that's why infants have that Moro reflex, the startle response, because there's no filter on the midbrain. But as we develop and we mature, the frontal lobe as well as the limbic structures start to put the brakes on the overactive midbrain. But check this out, Jodi. When we experience trauma or concussion, or any type of trauma, this area lights up and it goes into overdrive. It's like the accelerator pedal.

And in many cases, because of trauma, when you have release of adrenaline or cortisol, or if you actually--in the case of concussion, you actually have a damage to the brain like I did many, many years ago in my car accident--when you have damage, what ends up happening is you lose that suppression, that calming aspect of the frontal lobe on your brain stem. No matter what you do, if you try to meditate, you try to talk to yourself positive thoughts and positive thinking, you try to say, "okay, everything's gonna be okay," your frontal lobe doesn't have the capacity to really believe that or to do that. So when it comes to that, which do you think is going to win?

Jodi: Interesting. That's so well put.

Dr. Chiu: Yeah. Do you think it will be the neocortex, the frontal lobe, when it comes to the survival conversation in our brains? Or is it going to be the midbrain and the brain stem?

Jodi: This is amazing, and this is a great segue. So how do you help people? People like yourself that had the car accident, and their ability to enter the parasympathetic state is not accessible?

Dr. Chiu: Yeah, exactly. That's why I wanted to really frame this conversation so you understand, and our audience understands, this whole triune brain model. So if we try to engage the frontal lobe and it's compromised from a trauma or from excessive chronic stress from years, leading to mild neurodegeneration, it's not going to be able to do all its wonderful functions of being present and being patient and being grounded.

Jodi: That must be why so many people who try to meditate either can't do it or feel like it's worthless.

Dr. Chiu: Yeah, exactly. That's the thing. I have so many patients...and even myself, when I was in the dark stages of my recovery after my concussion, when I would try to bring...and that's the danger of it sometimes, this whole positivity movement. It's like, "Oh, just be positive. Oh, it's not a big deal." Actually, it is.

Jodi: They're skipping some steps.

Dr. Chiu: Exactly.

Jodi: They don't know. That's not the first step. So what would be the first step? How do you help people?

Dr. Chiu: Yeah. That's a great question. Whenever I work with clients and patients, the first step is, number one, getting to the root cause. Where in the nervous system is the breakdown? But from there, the second step is, we have to rebuild from the foundation. And guess what the foundation is? When we go back to the triune brain model, it's the "reptilian brain." It's the things like the brain stem. It's the things like the cerebellum. And that's where the senses come in. So I almost never start with, "Oh, just go sit on a yoga mat for an hour and meditate," unless my patient or clients have already had a lot of training and developed a lot of frontal lobe bandwidth, so to speak.

Jodi: Yeah. Correct.

Dr. Chiu: I might use that as an access point into healing, but many patients, especially if they've had a concussion--even if they have practiced meditation for years--this area becomes compromised, 'cause it literally sits right behind our forehead here. The prefrontal lobe, especially. And that's the area that really deals with our higher selves. So it's very susceptible to injury after concussion. But, in addition, even with chronic stress, things like excessive cortisol or excessive adrenaline, can really just shut off the frontal lobe.

Dr. Chiu: So, yeah, going back to your question, where do we start from the foundation? So doing things like movement training, exercises like I spoke about before, but very specific exercises. So, for example, if you've had a concussion or brain injury, or if you've been under chronic stress and you find that you actually...you have this sense that you just don't feel grounded anymore, and it's this very...it's actually a physical experience. But then people, they try to interpret it as their experience of it is they just feel unsteady.

Jodi: Yes.

Dr. Chiu: "I don't feel balance." But a lot of people think that's a metaphor, but when I do a neurological exam--

Jodi: For me, it feels like overwhelm. Like I can't even focus on one thing 'cause I'm so ADD.

Dr. Chiu: Yeah. That speaks more to the midbrain. But when I'm speaking to some clients and patients of mine who just literally feel like, "Yeah, I just feel off-balance." They might not have equated to that. They think it's a, yeah, metaphorical thing. It's just like, oh, it's an analogy to how I'm feeling. But when I do an exam, many times their balance is actually off. So it's like their minds are trying to interpret this subconscious, physical thing that's actually happening.

So for them, it's a cerebellum thing, so we give them balance training. We give them yoga exercises. If it's one foot versus the left cerebellum or right cerebellum, we'll give them a balance exercise on the left foot or the right foot. For those of you out there who don't have access to a functional neurologist, you can test yourself. Just do a simple balance test. Balance on your left foot, and then balance on your right foot. See if one of them is more unsteady. More likely than not, it's because one of your cerebellums--the side that's more unsteady--isn't as strong as the other one.

And what can you do? Simple. You do a balance exercise on that foot that is more unsteady. And when that improves, guess what? Not only does your balance and your muscles get stronger, we're actually changing the strength of your cerebellum. So we can take that concept, and for what you had described for you, it's more this ADD or ADHD where it's hard for you to just focus? That sounds more like to me either, number one, a reticular activating system overdrive, like what we were talking about the midbrain--and we'll talk about ways we can calm that--or, number two, yeah, it can be because the frontal lobe, which helps us to focus and sit and be present, maybe that's been a little sleepy.

Jodi: Right.

Dr. Chiu: But the great thing is, Jodi, regardless where you're at right now, there's so many things--and same thing for everyone watching out there-- through the miracle of neuroplasticity, there's so many things that we can do to rebuild these areas and bring back function that might have been lost. Or even what I love doing now, ever since I've gone through my healing journey, is taking my brain, which is a pretty healthy brain right now, but taking it to the next level, 'cause it's same principles.

But, yeah, going back to what we were talking about with you, I see that with a lot of my patients and clients, as well, after trauma, whether it's concussion or whatnot. The midbrain becomes overactive. And if they have compromise to the frontal lobe from a concussion, as an example, no matter what they try to do, if they try to...the analogy is, think about a child, a little kid. They're overactive, and their teacher's like, "Just sit down and focus." Is that going to work? No. They don't have the frontal lobe bandwidth.

But guess what does work, Jodi? And I'm sure you're aware of this research. Recess. Have all the kids go out and play, and crawl around and tumble and do somersaults and bump their knees, and smell things and eat things. Breathe fresh air. The reason why that works, after they have recess, they find that when they go back to the classroom, they could sit and focus, and their bad behavior goes away.

Jodi: Now you said something else early on when you were talking about the tri-brain and how gratitude and connection also get you out of the brain stem?

Dr. Chiu: Yes.

Jodi: Can you just talk a little bit about that?

Dr. Chiu: Absolutely. Yeah. So the interesting thing is, remember how I said all these structures deal with survival, but it's just a different way, a different expression of that? So when we talk about things like gratitude and we talk about loving-kindness meditation as an example, those are powerful ways of activating the vagus nerve. So we'll get into that in a little bit, but the way we do that is through these other structures. We actually bring support.

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Dr. Chiu: For example, when we practice gratitude, it engages the frontal lobe. And when we practice loving kindness, it engages the limbic system. All these things I'm telling you, they're brain regions. Frontal lobe, limbic system, brain stem. But the beautiful thing is they all should be communicating what we call neural networks. And it's the activation patterns of these neural networks. So, for example, if you activate...for example, if you think about a friend of yours. If you just bring their thought consciousness into awareness, or the thought of them, it engages your frontal lobe as well as maybe your hippocampus, which deals with memories.

But then, when you then bring this loving-kindness meditation at the same time, it engages the limbic system. So that's this neural network of loving kindness and compassion. And then the more you do that, these areas get stronger and stronger. But my point is, when you engage that, then it also, not only does it...you're sending this good energy out into the universe and to the person you're thinking about, it also helps put the brakes on your midbrain.

Jodi: I love that.

Dr. Chiu: Yeah, exactly. So that's one route of calming your sympathetic and activating your parasympathetic. This is actually what I call a top-down approach, where we're using the neocortex as part of the triune brain model. We're using the higher centers to help balance out sympatheticparasympathetic balance. But, again, Jodi, the question is, well, for some people who have been under chronic stress, for some people who have experienced trauma, that might be really difficult for them to do, even just to maintain focus of some idea. So what do we do in those situations? Well, check this out. Again, it goes back to the whole reptilian brain. So if this guy is stuck in overdrive and we're trying to engage the frontal lobe, which takes a lot of energy... if you're stressed out and you're trying to be present and focused, or whatever, and have compassion, it's really hard. Because it takes a lot of energy. Because who's going to win if this guy and this guy go to battle in terms of survival? Almost always, it'll be the reptilian brain, unless you train and train and train this, and you've developed neuroplasticity over years.

Like you look at those Tibetan monks or those monks who practice meditation all day every day for decades. But that's the thing. We all have the ability to get there, it's just through consistent practice.

Jodi: Right. You mentioned movement. What else do you do to activate the brain stem?

Dr. Chiu: Yeah, so that's the thing. If this is stuck in overdrive, we can take advantage of this same triune brain idea and use the bottom of the brain stem to put the brakes on the midbrain, on this top part.

Jodi: Say more. Elaborate on that.

Dr. Chiu: Yeah, exactly. So the brain stem is, like I said, it's part of this reptilian brain. It's this ancient survival structure. The top part is part of what we call the reticular activating system that helps us just stay alive, to survive. At the same time, the bottom part of the brain, which we call the medulla, it houses a bunch of brain cells and neurons that control respiration, that control our heart beat, that control digestive function.

And guess who also lives here? There are the cell bodies for what we call the vagus nerve. So the vagus nerve, as you know, is this powerful communication line from areas of your body to the medulla. So it's not even the vagus nerve that's the most important player in this. The vagus nerve is just the connector to the medulla.

Jodi: So deep breathing, or things that enervate and activate the vagus nerve can calm the brain stem?

Dr. Chiu: Exactly.

Jodi: Cool.

Dr. Chiu: So that's the thing. So in answer to your question, so what can we do about it if someone's experienced trauma and it's really hard for them to meditate, or even practice compassion for themselves or others? We can use, then, a bottom-up approach. Meaning, we take advantage and we activate the lower brain stem to put the brakes on the top part of the brain stem, which causes that sympathetic response. So things such as breathing exercises, things such as belly massage, things such as...even what you said, like the loving-kindness meditation. But that, again, that needs to engage the higher centers.

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Dr. Chiu: So there's a lot of different things that we can do to activate the vagus nerve. Meditation activates the vagus nerve, which activates this lower brain stem. Humming or toning, like making certain sounds, like ah or ee, or even the sacred sound of ohm. All those things actually through our guttural...it triggers these sensory pathways, the vibration activates the vagus nerve, which then sends a signal to the brain stem--the lower part of the brainstem--putting the brakes on this guy. And then you have this...you start to get this balance of sympathetic overdrive back into balance more parasympathetic state, and then healing.

Jodi: That's amazing.

Dr. Chiu: That's the approach I like to take with almost all my patients and clients, because if they have experienced trauma or they have experienced concussion, a lot of times they just don't have the bandwidth here, and they're told, "Oh, just think positively. Just practice meditation. Just do gratitude." Those things will help, but if this guy is in overdrive, it's going to be this uphill battle. So what I like to do first is do things that are easier for them to employ, that don't require a lot of cognitive energy, and utilize the senses.

Jodi: Right.

Dr. Chiu: So things like essential oil is going to also activate the vagus nerve, and humming, like I said. Even if you're in your bathroom and you don't have too much sensitivity to pain, like on your face, or...a lot of people who have concussion have sensitivity to this area. In the bathroom when you're brushing your teeth in the morning, just splashing cold water on your face can trigger a parasympathetic response. What it does, it first triggers a sympathetic, but then to balance it out, the parasympathetics then kick into gear. It's all about balance.

Jodi: That's amazing. Yes. I know that the people that are listening are going to want to know, how long do I balance on each leg? You've got a great book and some more information. How can people find out more about what you've been talking about?

Dr. Chiu: Yeah. That's a great question. I have a book that I wrote that goes dep into this, a lot of ideas. I actually launched an online course, as well. So I have an online course--

Jodi: Oh. Can you share the title?

Dr. Chiu: Yeah. It's called The Brain Save Solution Masterclass.

Jodi: And where do they find that?

Dr. Chiu: They can go to my website, brainsave.com, and they could find the link to that class there and more information.

Jodi: This was amazing. Thank you so much for tying everything together so brilliantly.

Dr. Chiu: Yeah, you're welcome.

Jodi: Thank you.