

Trauma, Energy, & Healing

Jana Danielson
with **Eric Robins, MD**



Jana Danielson

Well, welcome back everyone to the medicine of mindset or Summit stage Dr. Eric Robins and I'm excited to hear what Dr. Robins has to share with us today, we actually have a common colleague and friend Diana Hanson who is also featured on this summit and so it's amazing once you start getting to know like minded people how your network just drastically expands and so I'm excited to have both of them on the summit and we get a chance to spend some time with Dr. Eric today, let me introduce him to you and then I'm gonna turn things over to him. So he is an internationally renowned expert in mind body medicine, featured in the New York Times Bestselling series, the tapping solution and in Seoul medicine, awakening your inner blueprint for abundant health and energy. He is the author of the forward too many books and maybe some of you have these books in your own library including the tapping solution for pain relief, tap into balance, tapping transform your world, the secret language of feelings, life is the perfect system, oh my gosh! And I love this one.

Super brain yoga miracles through Pranic healing, really, you know, flowing then the list goes on and on this amazing human being has done a lot for society already. He is the co-author of the highly acclaimed books your hands can heal you and the power of prana and a contributing author of both. Dr. David Berceci's book, Shake it off naturally and Dr. Dawson Church is the heart of healing I'm actually right now reading Dr. Church's book, Bliss Brain. So I'm excited about that. Dr. Robins is a board certified urologist in private practice and affiliated with a major hospital in the Los Angeles area. He sees patients regionally for chronic pelvic pain, another refractory and functional disorders. And he really does his best to integrate both empathic medicine as well as complimentary healing modalities. And we're going to get into this a little bit today. He received his MD from Baylor College of Medicine in 1989 his B. A. In biology from the University of Texas in Austin and he completed his urology training at L. A. County USC Medical Center in 1995. So he's put in the time, ladies and gentlemen, he is an expert and he knows his stuff and Dr. Eric, thank

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you so much for being here, I'm gonna turn the virtual stage over to you. We've got a powerpoint that really is gonna set the stage for the conversation that we're going to get into after.

Eric Robins, MD

Jana, thanks so much for having me. And when you sent me the invite, just the topic of this sounds so amazing and as you know, there's so many folks out there that that just aren't really being helped with the standard al empathic approach. And so it's nice to have, like you said, a bigger toolbox and some out of the box ways to approach things. And the other thing I always say is that you don't really become a mind-body healing expert if you've had an easy life. So some, you know, some of my early challenges kind of propelled me into this. So, as you mentioned, I have a slide show and I'll just launch into that if I could get this to advance. Let me see, Jana, Okay, I think I can do that here. Okay, so a little bit about my background, as you said, I'm a board certified urologist and I'm also a chronic public pain specialist. I see cases referred to me regionally from all throughout southern California and it's not just about chronic pain. You know, I see, when people kind of started seeing me get results with some of these very challenging patients they send me the chronic fatigue and fibromyalgias.

And you know, every medical center has these patients that are frequent flyers that are hospitalized for days and weeks at a time and have million dollar workups and nobody can really figure out what's going on. And so a lot of those end up making it my way. And yeah, I mean, I like to combine the best of al empathic medicine when folks come to me, of course, we always do the stand the medical standard of care, the challenges that a lot of folks are sent to me that have already seen really good physicians and they've checked off all the boxes and so at that point we kind of have to do something else for them. I had to get good at this at this stuff and it's really because my life depended on it as I'll share with you. I grew up in a family where my mother was kind of sick in bed for my earliest recollections, she had what we could probably call now chronic fatigue and fibromyalgia. And my younger sister had all those as well. I had chronic fatigue center for at least 30 35 years and really bad brain fog and I remember we'd start like these 36 hour on call shifts and residency and like when you come in at seven in the morning and you'd be there all day and all night and most of the next day and like at 10 a.m. On the first day I was already just exhausted and it took every bit of will I had just to kind of keep my eyelids open.

So you know, and then in about 1997 I just kind of collapsed. Like I hit a wall in my eye was that in practice now and I just I just wasn't moving forward in my life and my relationships and my job and my health and I remember seeing this famous bio energetic psychologist and he said Eric You're getting by on 3% and you know, I can look back now and say that absolutely true. I mean

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97% of my whatever you wanna call it. Life force was locked up locked up and so I was kind of looking for ways to help myself. I tried some things that helped then but not enough. In 2014, 2014 was interesting because I had about the six-month period of these worsening neurologic symptoms. I mean I had weird twitches of my body and I couldn't feel the hot water in my hands and I started having actually really significant cognitive things going on. Like I just was having trouble thinking and my mind was kind of a sieve and that was of course very worrisome. And then I noticed that I had started had to have like GI symptoms like eight after seven p.m. I'd wake up the next morning the food would still be undigested in my stomach. And then the straw that broke the camel's back was I was in the office one day and my heart started just racing.

It 220 beats a minute. I was getting dizzy and lightheaded and got taken to the ER for that and I was in the hospital and I was almost nonfunctional at that point really thinking like how can I continue working and the hospitals came by my room and he said something and I can assure you it was not like 1/10/1000 of the clarity that I now understand the stuff, but I kind of got the idea, I'm stuck in a fight, flight freeze stress state, My physiology stuck there and then I immediately had the intuition, it's like, even though we say the body tends to heal itself, it does not heal very well when we're stuck in a chronic stress physiology and I knew because I'm kind of in the business that there's not really much we can do in standard medicine to get folks out of that. And so I was fervently looking for answers and praying and I came across some stuff that, well that's why I'm here with you today, so but because I just study so much of this stuff to literally saved my own life, I've I've kind of developed a series of mind body principles that helped me and helped a lot of my patients, so I'm gonna share some of those with you in the audience today. Okay, mind body principal mind body healing principle number one, is this when we experience events in our lives that are stressful or terrifying or too overwhelming to deal with at the time, we'll lock those memories and emotions into our muscles in the fashion, literally hold them in the body and it's a protective, it's a protective mechanism, It holds the traumas inside and prevent these uncomfortable feelings and memories from coming up to our conscious awareness to bother us.

One of Sigmund Freud's most famous students was a guy named Wilhelm Reich and he studied the body and body energies and he called this muscular armoring or another name for it was character structure and it was really interesting. So let's talk about this ranking armoring for a minute. So again, it's one way, what's one major way that traumatic memories are repressed and held outside of conscious awareness, They're held in the body and these chronically tense areas in the body can of course cause pain and rigidity and they just use up a lot of our bandwidth, you know, they use up a lot of our energy in my opinion, these areas of mild fashionable constriction of the body are the major cause of blocked energy pathways and

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meridians in our body. And you know, it's so interesting because people go to an energy healer and they might use their hands or reiki therapist to try and unblock the energy or of course people go to an acupuncturist and they put needles in the meridians to try and get the energy to flow And that's fantastic.

The higher level question to me was always, why are those pathways blocked to begin with? You know, and I think it's these traumas that are held in the mind of fashion that are a huge account for a huge proportion of that. This, these mile fashionable contractions, they live in our mental and emotional range and expression and kind of the size of our container. People talk about a stress bucket or something and we'll talk about that later. But they affect all those things okay now what's interesting is that when we start to release these areas of chronic mild fashionable contraction and armoring what may come up to our conscious awareness are the same uncomfortable memories, emotions and sensations that caused us to freeze to begin with. So I want to share an interesting story. I had again, I see pelvic pain a lot. I had two different young women that came in at various times, maybe in their twenties. One woman had severe vaginismus and for your audience that means the pelvic foreign vaginal muscles are tense and tight and spastic. It's hard to introduce anything in the vagina or a tampon or you know sexual intercourse. The other woman, her pelvic floor was so tight she'd sit on the toilet and it would take 5 to 10 to 15 minutes for that muscle to relax enough where she could urinate. And if you can imagine trying to work or go to school that was like a big taken up a lot of her time.

So and neither patient I asked them really had any idea what might have happened to cause this problem. And asked him repeatedly. And so I taught them a technique called T. R. E. Since for tension and trauma release exercises, we'll talk a lot more about this a little later but it induces a shaking, shivering trembling in the body in the muscles. And it gets these muscles to relax and unfreeze and both of them after verse. Very short Terry session all of a sudden the cause of why these muscles were tight came up to their conscious awareness. It was amazing because I just asked them about it. So one woman remembered a date rate that somehow she never could remember before and the other one remembered something kind of happened with her dad that you know you can kind of guess what happened there. So and then as we learn to handle those the emotional content of what came up the muscles were able to stay relaxed and then it's magnificent work. So as we learn to kind of navigate this release the model fashion be able to deal with what comes up emotionally as a result of that we really get a lot more freedom in our lives and our neurologic stress threshold gets larger. I studied a little bit of somatic experiencing that was developed by dr Peter Levine.

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And it's interesting because I did some of the training it's great and read a bunch of his books and really if you were to distill a lot of what he says in the one line which he does he said the key is uncoupling fear from raw sensation because a lot of times we'll release the mild fashion and it may just be there's a feeling inside, I don't like it's making me anxious. There may not even be much content to it. And if we can learn to be with those sensations and uncouple fear from them, there's a tremendous amount of healing that can happen there. All right mind body healing principle number two. So I assume most of your audience is premier with the Aces, the Ace study and if not, I'll just give a brief introduction. So Aces stands for adverse childhood experiences. There was a big study in 1997 showing that the more adverse childhood experiences someone had, the more disease and early death and heart disease and lung disease and liver disease and cancer and depression and anxiety and addictive behaviors folks had. And so if you, if you understand that the ace study was true, it's accurate that that's actually something happens. And then you reverse engineer it and say, how is it possible that these early childhood stressors affect our health later on? We there's some understandings that come from that. And by the way, there's, I think in 2000 or 3000 papers written about a study since then. So it really is a thing. So this is what we know that early childhood stressors essentially program how our physiology is going to run sometimes for the rest of our lives. Okay, it programs how the physiology is gonna run.

A big part of this is something called limbic system dysfunction and it means that we, you know, the limbic system is kind of like the fear center of our, of our brain. So if there's limbic system dysfunction, it's as if we, you know, we get easily triggered into a fight, flight free stress state and for many of us it's almost like it's running on autopilot. That's definitely what was happening to me back in 2014. I would say that most of the cases of complex chronic illnesses have some component of the limbic system dysfunction. And we're talking about things like chronic fatigue and fibromyalgia and chronic Lyme chronic Lyme infection and now post covid is a big one. A lot of the autoimmune diseases, a lot of the gut things and irritable bowel syndromes and dysautonomia and pots, there's a big component of, of limbic system dysfunction by the way, I'm gonna say something, it's my opinion. I think it's probably going to turn out to be accurate and that's just these areas of mild fashionable constriction and contraction in our body. I think, you know, our mind is constantly reading our body. I think those are gonna turn out to be a big trigger to keep our limbic system stuck going in a dysfunctional state, like our minds checking in, oh God, this person's tense, this is tense, we're not safe. What we better stay in a fight or flight state. You know, and it's interesting as that kind of as I said before, like, even though we say the body tends to heal itself, it really does not heal very well.

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When are we locked in a chronic stress physiology. Okay. Some of your audience may have seen this, this is the parasympathetic model. I love the slide and hopefully what I've done here in a few minutes explaining that you will too. So Stefan Porteous came up with something called the poly vagal model. And this thing explains so much. So basically, if you can see my mouse down here, this green air in the bottom, it's a social engagement. So, most of you have heard that when we're in a kind of a healthy state, it's a ventral vagal state. It's a parasympathetic state, it's a rest and digest and restore state. And that's really where the body heals the best. It's a healthy physiology. And by the way, when we're in this state, they also call it a state of social engagement. That's kind of interesting because it kind of means that how we act and others and how we're feeling is kind of reflective of our underlying physiology. Okay, when we're in a state of social engagement, we might feel emotions like joy and feeling very present and grounded and there's a sense of curiosity and openness and compassion and mindfulness. Okay, and conversely, people aren't feeling those things, we probably know that their physiology is not in this state most of the time as the quickest side always laugh because sometimes you see these motivational speakers get up.

They say just have a sense of curiosity and it sounds great and it probably is good. But if your physiology somewhere else, it's really hard to actually in real life have that, you know, childlike cure. Okay, now take a look here my mouse. If you can see it that my cursor this is arousal increases. And if you just change that word to stress, we're going to see what happens as the stress increases. We may go into a fight or flight state, which is a sympathetic nervous system state. And even here, you know, fight and flight are kind of two different things. Like if I'm fighting, maybe I'm moving towards the threat. I'm angry enraged. I want to fight you if I'm fleeing, I'm kind of trying to get away from the threat and that may be more of the emotions like fear and anxiety and worry and concern. Okay, some people spend a lot of their time in the sympathetic state and our curve is going up here. So as the stress increases more and you see this word overwhelmed, if we get to a place where we're just overwhelmed, like something's happening, maybe something's happened to a little kid and they may not be able to fight or flee sometimes will freeze. Now freeze is back to a parasympathetic state down.

Social engagement on here is a ventral vagal, freezes, a dorsal vagal, it's another branch of the vagus nerve. And that's really what one of the things that poor just pointed out. I think most med students don't really even get this physiology, it's very factual. But I don't think they really understand it in a useful way. Now, when we're in the dorsal vagal state, some of the emotions that are associated with that are things like people might be dis associated a brain fog, numbness, depression, helpless, hopeless shame, were shut down, prepared for death, we feel trapped. So this is where I spent 30 years of my life in freeze. I know it really well. Okay, now this is

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very interesting. Look at this slide. So we're in freeze and we want to unfreeze, it's bad to be stuck in a in a physiologic freeze. Bad, you're sick, it doesn't feel good. So as we start to unfreeze and we start coming down this curve. Unfortunately don't magically go from freeze to social engagement.

We have to come back through fight or flight and that can be a challenge because as people are frozen and we start to unfreeze them, they may start having some kind of strong emotions come up. There may be anger or rage. It might be a lot of fear and anxiety and unless you can step back and look at our map and say actually I'm on the right track. You know, sometimes people freeze again, That's kind of what happens with PTSD folks start to unfreeze these strong emotions come up and they may freeze again. But if we can stick with it and go slow and have someone maybe work with us and hold a a safe neurologic container for us and we can make it down through here and then uncouple fear from sensation and end up back more often than not in this ventral vagal state and that's where the healing happens literally physically and emotionally. And so I love this pictorial and have you seen that one before by the way, Jana.

Jana Danielson

You know, I had not, I mean it and I love obviously the pieces of it makes so much sense the way it's put together and I hope our audience can understand that that I don't want to oversimplify what that what what it depicts because when you're in the middle of it, it's you know like it's like the sky is crumbling right? Yet it shows such a clear way out. It doesn't mean it's a get out of jail, you know your hall pass or you know monopoly get out of jail free card. There is work that has to happen to get into that parasympathetic, but I appreciate how you presented that. Thank you.

Eric Robins, MD

Yeah, thank you. Yeah. And so the poor, the poor just poly vagal model kind of exactly like you said, it kind of provides a map for folks to know where they are now and what stages they need to go through and you're exactly right when you're in the middle of it, it doesn't feel good for sure. But at least be able to stand back and say, you know, I'm in the right direction. It may not seem that way or feel that way, but I am, can be really helpful. Interestingly talking about the Vagus nerve. The science shows that 80% of vagal fibers are different meaning they're coming from the body and sending a message to the brain and only about 20% of vagal fibers are different, which is the brain telling the body to do.

So I, I think so often, you know, so I so often say that a large percentage of our thoughts and emotions are actually and mindset are coming from the body and the physiology and I think this is just kind of one way of saying that, you know, so much, so much of how we think and feel is

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our interception. We may not be aware that someone asked us, hey, do you want to go hang out with me and have coffee tonight in the myth of a second or brain goes down checks our body checks the gut checks the heart checks the pelvic brain checks the status of the Maya fashion and all that and then gives you an answer and you may not be where you did all that, but people are intercepting, they're going and checking inside their body and then deciding an answer to whatever. So I kind of one of the,

Jana Danielson

I think it's really important here what you have said and I want our audience to understand that, that I mean whether you call it your gut feeling, your intuition, I love that you brought this up because I think for so long we've discounted that and we got stuck in what is going on in the brain, What do I think versus what do I feel? And what you're saying here is 80% of those, you know, the vagus nerve, that, that cranial nerve that goes from the brain to all of our organs, that wandering nerve, 80% of it is, you know, is going from the body up to the brain versus 20 from the brain down like that. That's another really cool way of, you know that the classic 80-20 rule that you kind of just flipped on its head. So thank you for bringing that up.

Eric Robins, MD

Yeah, well thank you. I think the science is gonna show us that more and more, you know, and yeah, I was presenting kind of this type stuff at the medical school last week and med students obviously very bright, but you know, all of us. I mean doctors were in our head and thinking logical and they're definitely there's a role for that and there's also a role for coming back to our body and trusting our gut and our intuition. So you know, this whole this summit you're hosting is all that mindset and I really do think to think better, feel better, we need to start shifting our physiology. That's at least a big part of it. There's certainly merit to top down approaches as well as bottom up approaches. All right. My body healing principle number three and I want to give credit to one of my mentors, Bill Harris for this. Bill started some company called Central Point and they they developed this binaural beat technology and the product called hollow sink that for me was really life changing. In fact I say at the time that I was getting blind 3% and I probably got, you know five times better, which meant I was now operating on 15%. That may not seem like a lot, but going from 3% to 50%.

I feel like I felt like superman. Anyway Bill was really a genius at taking complex ideas and topics and simplifying them and maybe turning them into a metaphor again, I'd say even if I'm teaching when I speak to other doctors or students, I love just talking metaphors because people will remember this stuff for a long time. So Bill came up with the plate theory and what it means is this, you know, all of us have heard that expression. My plate is full, right? And so the

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idea of it is that for all of us our nervous systems are like a copper plate and we can only handle so much stuff. It's a great word coming at us from life before we get the cover plate gets too full when our plate gets too full. When our nervous system gets pushed over this threshold, it kind of creates us in generic stress and anxiety reaction and then we all learn to cope with this differently depending on how we learn to respond as kids. So for example, some people isolate themselves when it just be left alone. Some people are angry or anxious or depressed. Some many of us probably, you know, engage in any number of any one of a number of addictive behaviors, you know? But the bottom line is all these reactions are secondary to being pushed over threshold. That's number one. The second thing and I think the science backs this up is that traumas and particularly early traumas heck even even the stresses we pick up when we're in utero in the womb.

For mom stressed these traumas literally affect the development of our nervous systems in such a way that we can have very small plates. So one of the reasons I'm good at this is that I was walking in my whole life and my plate was like the size of a thimble, you can imagine how that is and you can be a smart person and a nice person, good heart, but listen, if you're walking out a stress threshold, the size of a thimble life is going to push you over really, really easily and quickly. Another one of my mentors, a guy named Gay, Hendricks, he's a body centered psychotherapist also came up with something called the upper limits problem, which is, you know, we all get how bad things and negative things and stresses fill up our plate for sure.

But the gay said, if you have a small plate that even seemingly good or positive things can feel bad and we make self sabotage, you know, they used to give some examples like couples going to go away on a romantic three day weekend, right before they leave, you know, fight breaks out and on one level of truth she could say, yeah, he was being blah, blah blah and he could say she was being this and that, but probably at a higher level of truth would say the fight had to break out to kind of limit the amount of positive energy or like someone gets sick before going out on vacation. So those are examples of that. So how do we help folks to heal? All right, so the paradigm shift is, you know, what if we gave folks a bigger place, a larger neurologic stress threshold. So they could handle more stuff coming at them from life without being triggered into a stress physiology. What have you know, I was able to get my thimble from this big to a 64 ounce big goal. Like you can function a lot better in life like that. And so we get a bigger plate using both a top down and bottom up approaches and I'm going to talk a little bit about that now is our pace. Okay, Jana, we're doing okay here?

Jana Danielson

Yeah, we're great.

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Eric Robins, MD

Okay. All right, okay. So top down approaches and by the way, some of these things, I'm listening probably actually our bottoms up too. So there's not clear cut categories, but basically tapping, you know, radiant tapping is a big one. There's a lot of studies behind that showing its efficacy. You know, I always think like if someone's heck, if your plate small to begin with and there's all these big, highly emotionally charged memories that are still in you in your system and your muskets or whatever and you start clearing the charge off those with something like tapping. It's fantastic. Okay. I'm actually one of my proudest claims to fame as I think I was the first Western physician to endorse. CFT back in the day. Tapas active acupressure technique, it should say acupressure tapas acupressure technique t 80 is another big one. I use that a lot in my office if I know there's a trauma to start diffusing the emotional charge off that and kind of just freeing up the energy for folks. E. M. D. R. You know, eye movement desensitization is really good and I think is pretty evidence based now.

There's a lot of talk about limbic system training folks like joe dispenser talk about it. My recent experience has been that folks that are really chronically sick, what we said earlier, folks that are really chronically sick probably have some limits system dysfunction and there's ways to retrain that and there's several different schools, one school that just I personally am enamored with and I'm studying right now is Dr. Kathleen King's primal trust, she's a physical therapist, she herself was very sick and in bed for 10 or 15 years, you know, one if she's inhaled one mold spore, I mean she she'd be bedridden for another day and she managed to heal herself, she had studied a lot of functional neurology as part of her PhD program and kind of didn't think it applied to her and then until she realized that it did. But she actually, her school and involves a lot of top down and bottom is up. So that's just something I personally have used and like a lot internal family systems is great. I personally had some of those therapies myself and found them helpful of course mindfulness and meditation are great.

Lately I've kind of been playing around with Scott Kiloby Repression Inquiries and have been very impressed with those as well. Okay, as far as bottoms up approach is starting with the body, there's the fields of somatic psychotherapy, there's qigong, interestingly Peter Levine and vessel vander coal of course vessel wrote how the body keeps the score and I think it's been on like the number one book at amazon forever and ever they both say gong is great. bioenergetics and ranking breathwork are good and they help kind of break down that muscular armoring. Of course you can more directly go in and get mild fast release. I think Jana yourself and myself both like block therapy a lot as a novel. Yeah, there's your block there, there's your block every block very briefly if I have very limited space in my suitcase when I'm traveling and it's like, you

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know, leave something behind the block travels with me in my suitcase and it used to be whenever I go through, go through the x ray machine at the airport. The T. S. A. Agents thought it's a block and I don't know, cocaine or whatever and they always look at it lately I've been through the airport. These guys recognize the block now. So I say you really,

Jana Danielson

I had the same experience in the early days and I tried to explain it a few times and then you know what I started doing funny, not funny, I started saying it's what I used to release my pelvic floor and then nobody said any other questions, they're like, okay, and then they put it back in my in my carry on, they're like, we don't want to know about your women's house, maybe keep on walking. So yeah, I agree. The block is a must tool while traveling.

Eric Robins, MD

Yes. Yes, Yes. I love it, love it. It really helps get it in deeply and release the stuff it released the stuff that you didn't even know was there too. That's probably your experience too. Yeah. So, you know, other bottoms up approach is are things like yoga dance, Hanna somatics, etcetera. I saved in my opinion, one of the best for last. And that's TRE just attention and trauma release exercises. They were developed by Dr. David Berceci. Jana, Have you done TRE before?

Jana Danielson

No, can you, I was going to ask. So are you gonna are you gonna come to this a little bit.

Eric Robins, MD

Yes. Yes. Yes, I definitely am. Yeah. Alright, so just to be clear that series are what cured me. They are what cured me of the chronic fatigue I'm gonna say something a little esoteric here. But I also had something that I think might have been akin to like a kundalini syndrome. That's a weird spiritual thing but where there's a lot of energy flowing and it's getting stuck and had that for a number of years and tried everything and TREs helped me not help me, they cure that as well. So at any rate TRE so I'll tell you a little bit about them. So usually how I'll just kind of share with you how explaining the office. So and by the way usually I'm explaining this to folks in the office who see me, they've got some chronic condition that's not healing despite the best we can do in al empathic medicine and it kind of seems to me that they're probably their physiology is probably stuck in a chronic fight flight free stress state and they gonna heal that well unless we undo that.

So I usually say something like you know, have you ever seen on tv or Youtube? The lion chasing the gazelle and most people of course can relate to that I say you know the gazelle is literally

running for its life, its body is in a high level of fight or flight obviously. But what's interesting is that the gazelle escapes and gets to a safe place and it won't do this unless it feels safe. The gazelle will shake and shiver and tremor and they found out that every animal and every mammal and all of us have this built in shaking, shivering, trembling mechanism that seems to do two things. Okay. Number one, it seems to turn down or you know, normalize the fight, flight, freeze stress response again, that that sentence kind of sounds. Yeah, he said it, but actually if you're stuck in and you're sick and you realize there's nothing in standard medicine including really medications that seem to do that. I mean, I think this discovery by itself literally ought to get the Nobel prize at some point. If you really understand the implication, it's shifting folks out of a chronic fight, flight free stress physiology. Now the gazelle will shake, shiver and tremor and a few minutes later will go back and just hang with the herd and graze and take care of its young and it doesn't have PTSD really? Okay.

The second thing again as I explained to patients this, you know, you can imagine one minute the gazelles eating the grass and grazing and then this cheetah is creeping up and then bam and a half a second because I was running three MPH and zigzagging and there's a lot of charge and survival energy building up in its musculature and example I give is like if I have a can of soda and you you know, you shake the can vigorously and then there's a lot of pressure in the can. Now obviously we don't want to just pull the lid off and spray diet soda all over my room. But what we do is just start cracking that Lynn go we start to slowly safely re pressurize the can. So when someone has a lot of survival energy fighter flight energy built up in their musculature. If you don't release it, attend the area it's these areas that tend to keep clamping up and not letting go. Like we all have the experience. You go to a great massage therapists and the massage you and dig their elbow in and the muscles release. But then like a day or two later you go back to your life and the muscles lock up again.

That's a chronic mild fashion, attention and bracing pattern. So what these T. R. E. Tremors seem to do over time, it's not a one time cure. As the tremors move through the body they start to unwind and release these tension embracing patterns. Sometimes you do have to go slowly and safely if someone has a lot of trauma because you don't want too much trauma released up to the to our conscious awareness too much. Okay. But over time these theories seem to give us a much bigger copper plate or container. They do it both on shifting us out of that fight flight freeze stress state and that diagram I showed of the political curve. They start to unfreeze the physiology it as I said, it healed me at 30 years of chronic fatigue. I have people write to me all the time that just have tried everything and nothing seems to help. And a lot of these people if they do terry and it is the missing link for them.

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And honestly just makes sense. You know, it's not it's not me, it's some great brilliant dude who's healing them, but what I'm doing is teaching them how to down regulate their physiology. And then I know the body's gonna tend to heal itself and I know that as we do that we might have some little hiccups in the road and then have to deal with some emotions that are not that comfortable. But yeah it's fabulous. At the bottom of the slide I've got the web address, it's traumaprevention.com and I've got several YouTube videos that you can watch, you just look under my name. One is called T. R. E. And me. It's kind of a lot of the story that you heard today. The other is called how I do T. R. E. With sensitive and fragile clients. And again it kind of explains much that we talked about today. The porches curve and the need to go slow for folks that are really locked up and traumatized and that is my presentation Ms. Jana. So I'm gonna get out of this slide show that's okay with you,

Jana Danielson

Okay, that was great. And I think it laid a very solid foundation for our audience to start to understand that, you know, these these diagnoses or the, you know, these chronic pain experiences that we have that often become who we are, they become our personality and we don't even remember our life before them, or we can't even visualize what life could be in the future, you know, without them. And so, you know, the porridge is curve your analogy of the lion and the gazelle. I hope it's landing. It's almost like you're you're layering and layering and layering this foundation for us and and I know you've said it and I but I and not, but and I also know that this week as people are here at the Medicine of Mindset summit, they're like sponges, they're absorbing and absorbing and absorbing. And so what would you say to someone if they're like, okay, I get it. What's my very what's what's my one inspired action that I can do today to start this process? Would it be watching that YouTube video? What would you say is a good place to start?

Eric Robins, MD

Yeah. So the T. R. E. Organization Dr. Purcell actually put out a video on YouTube that teaches how to do it. Another guy named Richmond Heath who runs TRE Australia has a really nice course for free. They can find it on the internet. I would just caution folks that you know, one of the challenges with terry is not that it doesn't work, it's that it can work very well at unfreezing the physiology and you know maybe it's just my bias because of the the kind of the cohort of folks that I see in the office all day long are these sensitive and fragile types. I just urge people to go really really slow. You know, you can always build up tremor times and certainly there's any trauma maybe work with somebody and if you have really severe trauma or some you know severe depression bipolar or something like that, you know maybe work with a teary provider who is also has a you know, they're licensed mental health professional. But yeah, I think the

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most bang for the buck for me is TRE. It may not be everything and all things for all men. But yeah it's a really great tool.

Jana Danielson

I want to look back to something that you said earlier that when you were in your state of chronic fatigue and you were you know in medicines, you know medical school doing these long hours in your residency and you were you know, you were at 3%. How is this? So you use your T. R. E. Like you said if you five exit at 15, that was that's I mean if you could five X anything right? Your health your wealth. That's pretty good. Is this a practice that you've had to have? Like it's not a I've reached the destination therefore I am. How do you is there like a maintenance program like once someone starts to unravel the big ball of yarn, maybe you know doing T. R. E. Doing some fashion or whatever it might be.

Eric Robins, MD

Yeah

Jana Danielson

Just become part of your lifestyle to ensure that you don't end back up in that F. F. Situation.

Eric Robins, MD

Yeah. You know I think it's I think it's important for all of us to have some sort of self care thing whether that's terry whether it's tapping. You know I mean Nick Ortner has the tapping solution website and there's a bunch of just tapping meditations, one can go through whether it's a yoga Orchi in practice but it's just finding something and I mean our I think as we evolve and clear trauma, I gotta say I do believe that there's like a light at the end of the tunnel that it's not just stuck in this and drowning and drowning. I think that there's a light at the end of the tunnel. In my case I mean I probably tremor at this point. One once every one or two weeks I just don't need it as much you know way way more functional now. But yeah it's pick a self care tool. Having a self care tool is probably a lifelong thing and you may evolve. You know, your needs may evolve over time.

Jana Danielson

So when you, when you work with your clients and you kind of ebb and flow them through this journey, how do you notice? Because we're here at the medicine of mindset summit, how do you or what do you, what do you most notice when it comes to mindset? Are you noticing the way they speak, the way they carry them? Like what is what's changing about them as you take

them through this process from a mindset perspective, you know, I'm a doctor so I can't put that aside.

Eric Robins, MD

So I am actually noticing their physiology. Like, you know, I notice I know kind of where all those people are on that porridge is political curve at any time. And also notice as they're as they're down regulating their physiology. They're more present. Some of the things they said, they're just there, you notice like voice process and they talking very monotone or their ups and downs their facial movement because when we're, you know, in that ventral vagal state it goes to our facial muscles and we're much more present with folks and and wanting to be with people. So those are some of the things I listen to folks will tell me very very commonly after TRE practice. First of all, before we actually do the TRE I'll say scan your body and just notice where you're at now and again, just even getting people like out of here and into their body is kind of a big thing, Notice what you notice, I don't care what they're noticing, I don't care if they say I'm having the worst anxiety, the worst pain in my life, I'm gonna say good notice where you feel that inside, notice those raw physical sensations, can you allow them to be there because they're there right now anyway, and then we'll do that a lot of times.

Just people being with the stuff they hate and don't like even being with that junk, they take a deep breath. No one's ever asked them to do that before, they're constantly pushing it away. Okay then, what I want to say next ties into something very important, he said a minute ago then I'll ask them, can you notice a part of your body that feels the opposite? It feels calm, relaxed, safe in this moment. You know, no pain, no pain free in this moment. And, you know, so many of our clients get stuck in these mindsets. So you can also, another way of saying it is this kind of well developed neural pathways and we're all really good at having deep and great neural pathways for feeling bad. Like my chronic pain folks, you know, like a fibromyalgia patient, I might say, find a part of your body that doesn't hurt and they're like, what are you talking about? All we heard? So I'm like, no, let's sit here till you find a part that doesn't hurt. Now, after five minutes of them scanning themselves, they might realize it's the little toe on the right foot that doesn't hurt. But you know what, I will take that, that's a huge start. I want them to start developing new neural pathways for feeling different and better.

And the only way you do that is by focusing on what feels different and better. And it may be only 1% of your body or something like that and they'll notice the part that hurts. And I want them to start shifting their awareness and attention to the part that doesn't shifting attention back and forth. Now, a lot of times people like why would I, why would I want to shift away from the pain? You know, how is it ever gonna get better if I take my attention away? They realized

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what you focus on keeps making that kind of a deeper scratch in the record. So you want to feel different and better, spend some time focusing on things that make you feel different better. It can feel very unnatural at first, but that is actually a key to the mindset I think yeah, that's an absolute key is spend some time, it can be a gratitude practice, spend some time focusing on things that make you feel happy. Expansive gracious and it can feel very natural, but it's an amazing practice to do.

Jana Danielson

And I think what you're the other thing that I want to kind of pull from what you're saying is all of these, all of these suggestions and these tools involve choice, right? We have to, as the doctor, you can prescribe them and you can, you know, tell your metaphors and you can, you know, share stories of successes, but until we go within to take that inspired action, you know, it's hard to move in that direction. And so for those, you know, again, I keep referring to for those people who are here today listening to this. It's not a coincidence that your, you know, that you carved out the time for this specific interview. And you know, on one of my earlier interviews, one of the docs defined a miracle. He said, you know what the definition of miracle is and I was like, like the dictionary definition and he said, a miracle is just something that happens that's unexpected, right?

So if you're sitting here and you're feeling like what am I hearing or it's resonating for you and maybe you're feeling maybe your feet feeling something in your gut or maybe you're getting a little bit, you know, hot or sweaty just listening. The fact that you can, you know, you can make these changes, listen, listen to your body. I think the body is a brilliant communicator I just don't think we didn't come with instructions on how to listen to it and what you've presented today is fantastic. And so I want to know based on your years of training and expertise and probably by now the tens of thousands of lives that you've impacted. What do you feel is not being talked about enough when it comes to, you know, your practice and where you draw your line in the sand.

Eric Robins, MD

Yeah. so what I think is important. Well, there's a few things that are important. I think, as you just said, it's really important to spending a little bit of time every day, no matter how difficult it is focusing on something that helps us make new neural pathways for feeling different and better and happy and grateful, you know, that is enormously helpful. I would say that, you know, it's interesting when we used to teach these before the pandemic, we teach these big teary classes at my medical center, there were doctors and nurses and some patients to show up and the most common word, people had to describe what was happening as a result of the theory was

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the word hope. And so it just, it shifted people enough. Like they knew like they knew maybe they don't know how, but something felt different. It allowed that little as used to have that little miracle, that little slip in their consciousness. Some, you know, a slip somewhere that allow them to start seeing and feeling like they could do something different and and again, you know I just keep going back to if we shift our physiology that I think it makes it easier for a lot of us to have to to kind of set our mindset and set that direction a little bit easier.

Jana Danielson

Mm I love it, I love it. And so I've been asking this next question of all of our guests on the medicine and mindset summit, would you allow us access into your own some of the personal you know obviously you share the T. R. E. Is still apart after all these years, it's a tried and true you know tool for you, what are some of the other you know mindset or the choices you make to nurture your mindset.

Eric Robins, MD

So a few things just in no specific order, I meditate pretty regularly I do qigong pretty regularly, I'm studying with a school called flowing zen qigong but I think it's kind of a nice a nice trauma informed qigong school I do block therapy, I think we both do that what else would, you know, I walk pretty regularly and do some other kind of work out stuff and yeah another one that's a biggie for me that I love after having written a couple books on cooperate a couple books on energy healing. What I love, love and love is the Donna Eden five minutes in the morning energy routine? That thing is, is awesome and it just resets kind of the body's energy and, and I love that. And I will ground, I'm a big fan of grounding. We live in southern California. So fortunately most of the months of the year, I can just go outside in the grass and just stand there and I'll tell you, I really feel the effects of that. Well, first of all our whole hospitals on the computer, computerized now and the O. R. S. Have so much equipment and E. M. S. And the grounding has been really helpful for that too. So that's kind of a nut shell of the stuff that I do.

Jana Danielson

Sorry did you say? Can you tell me it was Donna E A T O N or no

Eric Robins, MD

No, Donna Eden. It's E D E N.

Jana Danielson

Okay, perfect.

END CHRONIC STRESS, FATIGUE AND BURNOUT THE MEDICINE OF MINDSET SUMMIT

Eric Robins, MD

And it's the five minute, her five minute in the morning routine. It's on, you can find it on YouTube and her website and stuff but it's, it's fabulous.

Jana Danielson

Dr. Eric. This has been so fascinating. I love how you, you know, you set the stage with the content and how you shared it was so you made it available I think to, you know, a regular person like me that doesn't have, you know the M. D. Letters behind their name. So I first want to thank you for that. And if I mean if people want to connect with you with your, with your work, how was the best place to do that?

Eric Robins, MD

Yeah, I mean honestly, you know, I don't, I think some of the, I don't, I don't really have any products or services that I sell as you know, I'm just kind of in there in the trenches doing the work, I'm not really seeing private clients now, I've got some Youtube videos, there's a good place to start. I've got a website which is, I think it's, I think it's Dr. Eric Robins but it's got some contact information but yeah, I don't know, maybe someday I'll form a big organization and have some of that.

Jana Danielson

And the other way, I mean gang those of you that are here. If you go to we have all the bios of our speakers alright in linked through the medicine of mindset page. So just go there, there's a lot of the books that Dr. Eric has written or has co authored. So if you love what you experienced over these past, you know, 60 minutes dive into some of his work that way as well and that's another really great way to connect for sure. Okay, this was so fantastic, thank you for again, saying thanks for saying yes to this project for showing up the way you did today and for leaving us with all of this amazing information.

Eric Robins, MD

Jana, thank you so much for having me and it was a privilege.

Jana Danielson

You're welcome. Okay, ladies and gentlemen, it is time for we're gonna wrap this call. It's time for a little bit of a stretch break, get your body moving, get some die from out of breathing going and we'll see you back here on the next episode at the Medicine of Mindset Summit.

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