

How To Safely And Effectively Taper Off Psychiatric Medications

Guest: Dr Hyla Cass

Niki Gratrix: Hello everybody and welcome to the Trauma and Mind Body Super Conference, and I'm very excited to have a distinguished guest here today, it's Dr. Hyla Cass.

She's an internationally acclaimed innovator and expert in the field of integrative medicine, psychiatry and addiction recovery. She's highly followed and very quoted, national media, been on major TV shows and she's got an awful lot to offer and a lot of clinical experience.

So welcome, Dr. Cass. Thank you so much for being part of the Summit.

Dr. Hyla Cass: Oh, it's my pleasure. Thank you so much for inviting me.

Niki Gratrix: Lovely. So we're talking about a really critical topic that's relevant for so many people in the United States and internationally, this is the mental health summit and it's the issue of meds, going on medication. And there are millions of Americans. I was looking at the stats before we spoke, 15 million Americans are on antidepressants, for example, that's almost 13 percent of the population. It's even higher than that, people who've been on meds for just two years and they're so addictive.

So let's talk about going on meds, how long for, the decisions people need to make and perhaps start with your history, your background in terms of your experience on this as well. Because you obviously work with clients and patients every day on this and share your experience in what you see going on there as well.

Dr. Hyla Cass: My experience was in my training, I happened to be fortunate I was in the day before there were this huge number of medications. So we had far fewer medications to choose from and at the same time, I was in a more psycho dynamically oriented residency at Cedar Sinai, which was affiliated with UCLA, but UCLA was much more meds oriented.

So I very much appreciate that I had that understanding of communication, the psyche, the unconscious, all that stuff that psychiatrists used to pay attention to. Now, unfortunately, psychiatrists are pretty much just prescribers. They see you for 15 minutes, prescribe something, you come back every month and get a refill. And it's not a good situation because so much has to do with the psyche that has to be dealt with, feelings, emotions, relationships, community, all of that. And then the other thing that has been totally left out, which is crazy, is biochemistry.

So you asked me, how did I get to do this? I began really almost right after the residency looking at other things. I became interested in diet and nutrition and I was seeing reports about blood sugar and low blood sugar affecting mood. And I began to take this seriously, follow people who were doing that, eventually started going to conferences with psychiatrists. Who were then called orthomolecular psychiatrists who were talking about the influence of nutrients in food on our mood and then intervening by correcting it like, wow, that makes a lot of sense.

Rather than covering over a symptom with a drug, which has a lot of side effects and very often it doesn't work and you have to increase it, and that doesn't work, and you add another. What's really terrible is like several go on Prozac for depression, but it also makes me more anxious. So they put on something to make them more of a tranquilizer kind of supplement medication to calm them down. And then they won't be able to sleep at night because of the agitation from the Prozac. So they're put on a sleeping medication. And before you know it, these people are on all kinds of meds and there's interactions among them. And the person doesn't feel good, but they can't get off them. And then they go to the doctor and they ask, I'm not feeling so well on these meds. Is there a possibility that I can get off of them? Oh, no. You're on them for life. You have a biochemical deficiency. You have an imbalance, and you need to be on them for life. It's like a diabetic with insulin.

Well, the fact is that diabetics don't even have to be on insulin necessarily. I'm not going to intervene right there and say, hey, diabetics, get off your insulin. But we also know that with the proper diet, with a low sugar diet and all the only appropriate nutrients.

Diabetes is quite, quite treatable. So by the same token, it's the same with mental illness, it's an imbalance in our biochemistry. It's not a Prozac Rasoulof deficiency, though. It's an imbalance in our natural chemistry in our brain, neuro chemicals called neurotransmitters.

Niki Gratrix: Yes. This is so important what you're saying here and it's so sad the number of people who were just taking the drugs to suppress symptoms don't know it. They are giving that advice and don't know that there's these lifestyle factors and biochemical natural interventions that could help them avoid all that. So maybe you could highlight, you mentioned blood sugar control.

Maybe expand on a few of the things like diet and lifestyle things. What would you say are some of the most important things? A few things people could do that would prevent them even needing to go on to the meds? And then maybe you could say, when is there a situation when it's very valid that someone maybe should do meds? If there's a situation like that where you would say, yes, do the med?

Dr. Hyla Cass: Well, I think that people who come to me are self-selected to not want medication, so hard to tell. I do know that if someone is in acute psychosis, it's a good idea to medicate them because they could hurt themselves, they could hurt someone else, they're extremely agitated, they need to calm down.

So they do need something to bring them down. But in most cases, like a serious depression or severe psychosis or whatever it is, or bipolar out of control. So you medicate, but you don't medicate for life. In fact, in countries, by the way, in countries where people who are so-called chronic schizophrenics or schizophrenic, they have the first break. They may or may not be put on medication, regardless in these communities and I'll say it's really sort of a country, culturally the way they do it. In those that don't put people on medication, the episodes of psychosis are few and far between, easily handled either through supportive measures or a small amount of medication for a short amount of time. They come through and then they go back to work, marriage, relationships, life.

Take the same population in most of the Western world, and particularly in the U.S. and Canada. People are put on these medications that are very strong and they're put on them, as I was saying for life and they don't do well. Very often if it's younger people, they'll drop out of school.

Often the first break comes at the beginning of college or university and it's a life lost. And its life lost, not by the illness that they had by that illness being medicated, rather than properly diagnosed as a biochemical nutritional issue and treated in that way. And when we do that, it's a world of difference.

Niki Gratrix: Amazing. I couldn't agree more. And do you help a lot of people? Do you have people come to you who are trying to get off meds as well? Like specifically, they've had enough and they come to you to say, how do I do this?

Dr. Hyla Cass: Yes, they do, because their own doctors either are unwilling or unable to take them off. What is horrifying, is what I was saying earlier, when the doctors say, hay, you're on these for life. Like insulin for diabetic and I know how to put you on, but I can't take you off. But if you really insist, go to a half dose for one week and then the next week stop or something really, I have to say stupid like that. And what's the result? What would you suppose the result would be?

They go into a severe withdrawal. Because your brain has gotten used to it, your brain cells, the receptors have gotten used to a certain level of the medication. And it needs to be brought down very, very slowly. And if you bring it down very, very slowly, then your body has a chance to, receptor sites, have a chance to regrow and open up and do what they're supposed to do. And then on top of that, and this is where I add in something.

I will add in support of nutrients that also help in the process. So when I'm weaning someone off meds, it may be a slow process, but not as slow as it might be if we didn't have the access to nutrients. And it's quite amazing, sometimes people have just gotten, this is another story. I get people who've taken themselves off, went through terrible withdrawal but didn't want to go back on. So they toughed it out for something like three months, six months.

Then they come to me and then I give them the nutritional supplements they need to help rebalance their chemistry and they're good. And the sad thing is, the regret is, I'd wish I'd known that, a person says, I wish I'd known this when I first started to go off the medication.

Niki Gratrix: Wow. That's so interesting. So essentially, the message to take away is there's total hope people can come off the meds, it just has to be managed carefully. And you could actually really help people not go through hell in the process or maybe minimize it.

Dr. Hyla Cass: That's right. Pretty much minimize it and its titration, you do it slowly and gradually and within the person's comfort level.

Niki Gratrix: Lovely. Yes, go ahead.

Dr. Hyla Cass: It can take a few months, it could take, well with the benzodiazepines it could take even up to a year. The benzodiazepines are really hard to get off, they're Klonopin, Xanax, Valium, Librium, Ativan.

Niki Gratrix: Okay, so they're the difficult ones. Before we talk about the nutrient, specific nutrients it would be very interesting to just name a few and talk about those. I mean, obviously this is a trauma Summit and I'm thinking some people, you must know this.

They probably have trauma that's unresolved and they've got depression because of the trauma and that then caused a whole set of other problems by starting the medication. And of course, have never dealt with the trauma and actually gone to address that. Like, for example, maybe they have PTSD and need to go and get some EMDR or something like that.

Dr. Hyla Cass: Totally. So I can do wonderful, quote functional medicine that's what I call what I do. Which is looking under the hood, looking at the root cause and treating it there. So you can do the most elegant medicine in that regard. So you have the chemistry really good, dialed in. But if you have a post-traumatic stress disorder hanging around in the background.

You will never get totally better because you are in stress response, fight or flight, fight flight or freeze all the time. And the worst first thing is, you don't know. It is just a certain level of tension that you're oblivious to. But it's not only running in the background, but it's running you. It's affecting your immune system.

Right now, we want our immune system to be affected, digestion, ability to relax. Anything to do with the parasympathetic nervous system, the repair, digest, rest. So none of that's working properly and you don't know it. It's like having a computer with a bad old program that's in there and you forgot about it.

In fact, somebody put it in and you even know, you don't quite know what happened. And your computer tech comes and you say, it's just not running right, it's running slowly. And they go, hmm, there was this bad old program there, it was a corrupt program and you don't need it, it's old and I took it out. And then your computer starts to work just beautifully. So there you go.

Niki Gratrix: That's it. That's so important, so critical of what you just said, I just focus on what you said. It's so interesting because obviously I've been trying to present the functional medicine practitioners, so that people who only do psychology actually might want to look into the fact there are functional medicine and nutritional approaches.

But there's the functional medicine community that it'd be really good for them to know that there's these psychology techniques that are actually really important. And you can't make the biochemistry good, even with natural nutrients, as you say, unless that autonomic nervous system, the brain and any trauma is in balance.

That's so true. That's been totally my findings as well. If that vagus nerve is out of whack because you've got trauma that's stuck there a supplement won't fix that.

Dr. Hyla Cass: And at the time, having that stress response was appropriate. What's not appropriate is having it go on and on and on and on, the same as, you may have needed medication for a little while.

But you weren't meant to take it on and on and on and on. So lots of times a good thing, an appropriate thing, something that's protective ends making you very dysfunctional.

Niki Gratrix: Yes. So your true holistic practitioner, truly at all senses of the word. And there aren't many, as people get caught up in just the functional medicine or they're just doing psychology. And you have the vision of all of that, you see the picture, the whole picture. So that's so rare and it's so good.

You probably have tons of people who want to come and see you now. When you're assessing somebody you'll be checking out, checking history that this person probably has some trauma to clear, that you might need to refer to get maybe EMDR or some other treatment. And then when they've done that, do you come back and say, right, we've got that in place, here's some nutrition and do these lifestyle things?

Dr. Hyla Cass: I'll tell you what's interesting and this goes way back. When people started, therapists started sending me their patients. These patients were in therapy, could have been in therapy for trauma, some of them for eating disorders, whatever it was.

They come to me ostensibly for medication, but at that point I was transitioning into supplements. So I'd have to convince the patients that they didn't really need meds, let's try nutrition. And I would put them on specific nutrients and adjust their diet, balance the blood sugar, and they'd be continuing in their therapy, this is a parallel process. But the therapist would report, oh wow, the therapy is going so much faster, it's so much better, because the brain is running on all cylinders.

Niki Gratrix: Wow. OK, that's the next level. So are you saying, suggesting concurrent is best?

Dr. Hyla Cass: I mean, it's really hard for addicts to be in a recovery setting and medication. They've gone from being addicted to, whatever they were addicted to, from cocaine, to meth, to alcohol, to now being on these heavy medications. And here they are in these treatment centers kind of like, they can't think straight, and they're in groups, and they're in therapy and it's not working. Why isn't it? I mean, their brains aren't operating on all cylinders and they're at such a disadvantage. Because not only are they withdrawing from their substance abuse, but the medication is adding side effects. And if instead, with addicted people, we adjust their blood sugar, give them the right amino acids, it's totally amazing, the addiction can stop, the cravings stop. And this whole idea of cravings being forever, once an addict always an addict, you have to go to AA forever.

Look, I have to say, AA has done some very good things. But one thing I don't think it does well is get people truly better because, it's like I'm so-and-so and I'm an alcoholic. And you could be 30 years sober, but you're still in alcohol because you're still having visions of that drink and cravings, that you conquer because we have willpower and we can do that. But would you rather have willpower and have to have to do it that way? Or would you rather, like, you just forget about alcohol? It's not even, it's not there in a very short time.

As the Alliance for Addiction Solutions, which is a group out of San Francisco, and it's actually an international group, and I was one of the founding members. And in fact, right now we're having a series for people to learn about how to administer their own amino acids to overcome addiction. And you can apply this also to any other mental health issues. But the focus right now on addiction, because with the forced isolation, the addiction rate is going way up, trauma rate is going way up. There is a lot of pathology emerging, so it's bad.

Niki Gratrix: So interesting. This is so interesting. So just coming back, I was reading a book and I think it was Dr. Jordan Peterson, and he said in the book, he's a psychologist from Toronto, actually, I think which is your home town. And he said in his book, that's just, I think essentially he alluded to just managing a circadian rhythm and blood sugar control.

Like half of the anxiety in his patients disappeared just with those two lifestyle, functional medicine type interventions. And I'm sure people are being diagnosed with things like bipolar disorder and they just have a blood sugar imbalance that can be fixed with diet.

Dr. Hyla Cass: Yeah, exactly. I mean, fix your blood sugar and you have it, a lot of it handled. The other thing is thyroid issues. A lot of women and particularly after childbirth, they may develop thyroiditis,

Hashimoto's thyroiditis, which is an autoimmune disease. And that can give them crazy mood swings, they're up, they're down, and, oh, you're bipolar. Nobody bothers to check their antibody level. And here I am, I'm a psychiatrist, I check antibody levels and what do I do? I treat Hashimoto's thyroiditis and they're not bipolar. And then they lose their anxiety.

Niki Gratrix: Yeah. We just need to put a headline on a marquee just to get this out. It's so important, it's just so tragic that people are suffering and not knowing this, what you're saying. So did you what to get into talking a little bit more about amino acids, or is that too detailed in this context?

Dr. Hyla Cass: I could give a little bit about amino acids. For example, you want to adjust blood sugar, that's a big one. And that was the first thing I approached too when I was learning about how to affect mood with food. So there's a good book called *The Craving Cure* by Julia Ross, who explains all this, she also has, *The Diet Cure and The Mood Cure*. And when you adjust your blood sugar that is eating regularly throughout the day, eating protein at every meal.

Eating enough protein for women it's usually 20 grams each meal, three times a day. So don't let yourself have blood sugar dips, but something else that helps blood sugar dips a lot are nutrients like chromium, alpha lipoic acid, and I've been actually using a lot of CBD as well, and that also helps to balance blood sugar.

As well as reducing anxiety in other ways because it influences the neurotransmitters which are the chemical messengers of the brain. So we have a very full armamentarium and I want to mention again, The Alliance for Addiction Solutions because they actually have a free course for the public. Because we were very concerned about the rampant increasing addiction.

So if they're not drinking or using, they're using sugar and carbs or what Julia calls techno carbs, which are horrendously addictive foods that have been engineered to be addictive.

Niki Gratrix: Yes. Yes, exactly.

Dr. Hyla Cass: Foods that addict you, contribute to obesity, to brain fog, to mood swings and I mean, I could go on and on. Something else that's affecting our moods, are EMFs.

I have somebody who suddenly becomes anxious when they've moved, or I asked them to see if a new cell tower is going up? And now with 5G, we have something else to worry about. It's very much like having a microwave on your corner.

So we are delicate beings, we're electric. There was a book by Becker called The Body Electric. So can you imagine having this powerful current, electromagnetic frequency affecting your cells? Because every reaction in your cell is biochemical and electrical.

So I think we're in a lot of trouble. So, like, if somebody has been put on anti anxiety medication for that, it's not really what you should do.

What you should do is use your cell phone as little as possible. Don't carry it right next to you. Turn off your Wi-Fi at night. That's really easy. I mean, I thought I'd turn it on, how do I do that? I haven't plugged into a power strip and then I just turn off the power strip, and turn it on, it's great.

Then there's different protector's for your phone, so things you can do. That's a bit of an aside, but since we're talking about anxiety and how traumatizing the body. Trauma is not always psychological, trauma can be physical.

Niki Gratrix: Absolutely. Yes, it's absolutely. It's so important what you're saying, I hope people are listening because this is lifesaving advice for people, especially it's only getting worse. And the thought now of people is the worst thing you do is go on to a med really, when you've got all these things, the other things you could do, the diet, the lifestyle. I mean, haven't mentioned exercise, right? That's got to be huge.

Dr. Hyla Cass: That's really important. It's so funny because I'm looking in my place and I have my mini trampoline.

Niki Gratrix: I've got one of those. Yes.

Dr. Hyla Cass: It's all in one room. The sauna, high weights. I'll count my air filters.

Niki Gratrix: Yes.

Dr. Hyla Cass: You have a healthy home. And we have to bring the gym inside and go for walks, get in the sun. I mean, should be taking vitamin D anyway. But also get some sun and some exercise by going outside and walking. Running isn't for everyone, by the way, a lot of people end up with bad knees and bad other things from running. Depends on your own constitution.

Niki Gratrix: Yes. What you're saying there is common sense, but it's not common. Common sense isn't commonly followed. And you're saying it sort of so eloquently and just mentioning it and it's like people have to get this and do it.

Dr. Hyla Cass: I know. And I'm so happy to have the opportunity to talk about all of this.

Niki Gratrix: Yes. Yes.

Dr. Hyla Cass: All in one place.

Niki Gratrix: Yes, exactly. You mentioned about the experience of people doing the psychology work with people and doing your nutrition protocol, and the psychology works going better.

Do you ever have it the opposite way round where you may be speaking to a functional practitioner, and they're sort of just not getting the results they need? Because they do actually need to focus on the psychology side like that.

Dr. Hyla Cass: If your body is in fight or flight, I mean, we can do all kinds of nice things for leaky gut, repair the gut. We can give all kinds of supplements for the immune system. But if you're suffering from post-traumatic stress disorder and you're in a chronic sympathetic response, that's not going to be enough. You need to rule the body into the relaxation response, the relaxation and repair response. Then you have everything working together.

Niki Gratrix: This is it.

Dr. Hyla Cass: Functional medicine practitioners are wising up to this.

Niki Gratrix: Yeah. When we were at the clinic, we called it being in a healing state. You're either in a stress state or a hearing state. And it was all to do with whether someone is stuck in fight flight, you just can't fully heal. I mean, we are understanding now about the cell danger response.

A lot of people love the work of Dr. Robert Naviaux saying the cell danger response, and that's all part of it as well. You are literally switching off the cells, you're switching off digestion, you're suppressing immunity.

All of this autonomic nervous system piece and the brain that's kind of dictating all that. That has to be in alignment or you're just not going to get the results otherwise, you just can't heal basically. So we're just reiterating that we've got a lot of people talking about how to switch off the cell danger response and stimulate the vagus nerve, like 40 different ways to stimulate the vagus nerve. **Dr. Hyla Cass:** I know it's really wonderful that all this is coming out, all this information that people can get.

Niki Gratrix: Yes. And it's practical.

Dr. Hyla Cass: It's really cool. And another part related to the sympathetic and parasympathetic nervous system is the endocannabinoid system. Which we didn't really know about before the endocannabinoid system is a master controller, really works with the parasympathetic nervous system to rebalance everything. It helps the gut talk to the brain, the hormones talk to the brain and to the different organs that are affected by the hormones.

So there's a very elegant network, it's really a network with receptors everywhere in the body, in the brain, in the periphery, in the blood for the immune system and all the organs. And this is all part of the endocannabinoid system. And we have cannabinoids, endocannabinoids that we make. We make our own endocannabinoids, one of them being anandamide, which is a word for bliss, and it's related to endorphins and we make that ourselves. And when people are low in that, they're low and in anandamide they're not going to be very happy because they don't have the bliss molecule.

So a way to enhance that is to rate up the endocannabinoid level, to raise the level of anandamide. There is also 2-AG. That's another one, but there's more of anandamide. And we can do that with specific phyto cannabinoids, phyto meaning plant. So these endocannabinoids that we make inside and we make them from essential fatty acids. And then the phyto, p h y t o cannabinoids from plants. And the most common plant supplier of the phyto cannabinoid is the cannabis plant. And that's why we coined the endocannabinoid system because it was first discovered in relation to THC tetrahydrocannabinol, which is the part of the cannabis plant. So the cannabinoid in the cannabis plant that gets you high. And it was not till, not that recent, fairly recently that we, well we didn't, I didn't. Somebody discovered CBD and that CBD has a lot of healing properties. And then there's also CBN, CBG there's a lot of other cannabinoids that have amazing healing actions, help you to sleep, reduce anxiety, good for pain, for migraines, balancing hormones, PMS, menopause. I mean, sounds like what, this is a panacea, come on its snake oil, it isn't.

It interfaces with the endocannabinoid system, which controls everything. And so we have in, and the in is hemp oil extract and you can have hemp oil extract that has, it's anything with only a trace or zero everything, anything from a trace to zero of THC.

So it's not really going to have the tetrahydrocannabinol, you're going to get high from it. But it will have all these very good healing effects and it's been amazing. So when you read about CBD, it's really not just the CBD isolate, it's CBD plus some terpenes and some other cannabinoids that are minus most of the THC. And it will raise the endocannabinoid system, so even if you have a low one and you tend to be depressed and anxious and in pain, it'll raise it up. And those symptoms have a really good chance of clearing up, and it will affect your neurotransmitters as well.

So that's why you're feeling less anxious, you're feeling happier, calmer and so on.

Niki Gratrix: And so just for people who may not know. Are there any known side effects of CBT or addiction? Can you get it?

Dr. Hyla Cass: It's an excellent question. But the CBD, unlike THC, THC tends to be a wee bit addictive, it really depends on the individual. Some people can do it occasionally or they'll do a little and they won't be and other people will. And they are people who have a low endocannabinoid system. And the treatment for that, if somebody's become addicted to THC, is to give them CBD. And that really cuts down on this craving for the THC, for the high, because all they want to do is feel normal. And give CBD and it'll neutralize it. In fact, there's a whole new phenomenon because the THC is so high in the recreationally bred plants, people want to get high.

So they have really like 20 to one of THC, to CBD, huge amounts. It wasn't like in the old days when it was grown the way it came in nature, it was pretty balanced and people did OK on it. We didn't have a lot of disasters or problems. But what's happening now is the young people taking their first say, they're taking their first hit of a joint. They can become highly irritable, very uncomfortable, they can become kind of hallucinating, psychotic.

Then the really sad part is they go to an emergency room and they're given a shot, they're psychotic. And then they're put on antipsychotic medication and that's the start of the slippery slope. And I've seen this and I've seen young people that ended up unable to concentrate on school because of being on the meds. And they still have their low endocannabinoid system, which was the original problem, which is why they had this hyper reaction to THC and it's a disaster.

And had I seen them first, I may have medicated them just to take the edge off. But very quickly added in the CBD and when I say CBD, I really mean full spectrum hemp oil. I mean, I have a product that I carry that I really like and I call it full spectrum hemp oil, because that's the real term, so because it has all these other good stuff in it. And those people will calm down, they'll feel better. And some pre existing issues, like maybe they had a little depression, a little anxiety clear up because they're finally getting what they need for their endocannabinoid system.

Niki Gratrix: That's awesome, it's brilliant. So just rounding up everything we've said. This is your amazing toolbox that obviously customized to each person, so we've got blood sugar control, things like circadian rhythm, exercise, getting out in sunshine, getting the EMFs out, balancing the brain chemistry with nutrition, amino acids and CBD, address trauma, early life trauma, go and get that side of things, stimulate the vagus nerve. Last question. If people I just did that. The last one, how about the toxins? So everything, heavy metals, maybe mold. Is this the other thing people, have you really noticed that if people address that. Do a chemical cleanup.

Dr. Hyla Cass: This is where it's really nice when people are seeing a functional medicine doctor. You go to a psychiatrist to get put on meds. You go to a functional medicine doctor, we'll check for chemicals, heavy metals, infection, people have Lyme, people have hormonal imbalances. All of these things will contribute to a mood issue. So as I said, they're not from deficiencies, they're actually a message from the body.

The symptoms are messages from the body telling you something out of whack, let's look at it. So people have to just get the right practitioners to holistic M.D. N.D. That's naturopathic doctors, nurse practitioners who do it, nutritionists, acupuncture, many different kinds of practitioners have different levels of what they do.

They do a lot of the same things, a lot of different things and often they'll refer between them. Like sometimes I'll want to send someone for acupuncture because I don't do that. Or the energy psychologies like EMDR, or sensory experiencing, somatic experience sorry. So I will send someone for that.

So I know how to do EMDR, but it's not a good use of my time when I can do the functional medicine part, because there are a lot more EMDR practitioners than there are functional medicine psychiatrists. And even so, I've cut my practice way down. So I've been doing it for a lot of years. So I'm trying to educate people rather than just treat or I'll refer them to the right person I think who would benefit them most.

Niki Gratrix: Yes. So this has been an awesome interview, this is one of the most powerful, it's been truly holistic. We've defined it and we've demonstrated everything that someone potentially needs to look at. Is there anything that you would add or final messages for people that you would want to share with people and anything?

Dr. Hyla Cass: Yeah. You did a beautiful summary. I really appreciate that.

Niki Gratrix: Yes. Thanks.

Dr. Hyla Cass: I just want everyone to know it's your body, you know it better than anyone else. When you have a symptom, it's a message, it's sort of like dream interpretation, which is more esoteric. If you have a symptom, you need to have somebody who can look at it as deeply as possible, uncover what is going on and treated at that level. And in the meantime, you can always start off in mood issues, you can start off with amino acids.

And I keep saying we didn't really get into any details, but actually the Alliance for Addiction Solutions will give you some really substantive information. So I'm not leaving you high and dry and as I said, CBD may not be a panacea, but it is really, really useful for most of the conditions we're talking about, including blood sugar balance. So blood sugar, mood, hormones, pain.

And don't be afraid of it, sometimes people are afraid of it because they think it's like THC and it's actually the opposite of THC, so even though they come from the same plant. And they may be a use for medical marijuana and I'm not, I don't really deal with that, that's not my area of expertise. My area of expertise is CBD, in fact I have a lot of information about it on my website, what is it? Because there's so many questions people have, and I have some blogs on it.

Because it's only been around for a few years and I'm always surprised, but maybe not so much, how little people understand about what it is and how to use it. So I try to give as much education as I can on my website.

Niki Gratrix: Lovely. And what's your website? Where can people find you and any events you have? Anything else you'd like to share about your website?

Dr. Hyla Cass: <u>CassMD.com</u>

Niki Gratrix: Lovely. And it's all there?

Dr. Hyla Cass: It's all there. And it's undergoing transition but I guess everyone's website is always undergoing transition.

Niki Gratrix: Yes, absolutely. Thank you so much, Dr. Hyla Cass, it was absolutely awesome, one of my favorite interviews on the Summit, I'm trying not to be biased. You are a true innovator and you inspire people like me. So thank you and thank you, everybody.

Dr. Hyla Cass: And you too, Niki, you're doing an amazing job here with this.

Niki Gratrix: Thank you.

Dr. Hyla Cass: I'm so happy that you're doing it. I'm very happy that you invited me. Thank you.

Niki Gratrix: Thank you. So thank you, everybody at home as well, watching at home. I hope you've got as much out of that as I did and I guess we'll see everybody in the next episode. Take care for now.