

## Episode 00015 - Interview Derek Kozlowski

[Tom Faust] (0:27 - 1:15)

Welcome to Veteran Voices. I am your co-host, Tom Faust, and I'm here with my son, Chris. In our continuing series on alternative therapies for PTSD and other post-military issues, we have a special guest today.

He's a Gulf War veteran who has suffered from PTSD for 30 years and recently has undergone an alternative treatment for PTSD, which we'll be talking about today. While we strive to provide accurate and informative content, the opinions and perspective expressed by our guest are his own and do not necessarily reflect the views of Veteran Voices. We aim to provide a platform for diverse perspectives, but we do not endorse or promote any specific treatments or therapies.

We encourage listeners to do proper research and consult with a qualified healthcare professional before making any decisions about their treatment. With that said, I'd like to introduce Derek Kozlowski.

[Derek Kozlowski] (1:16 - 10:41)

So I'm Derek Kozlowski. I was a sergeant in the Army. I was stationed at Fort Bragg in 20th Engineering Brigade for most of my time as my permanent duty station.

We deployed to the Gulf 1st of September in 1990. I can remember it was two or three days past my 21st birthday. It was E4 when I deployed.

As soon as I hit the beach, I was thrown in the Gulf and pinned with my stripes. So I was a sergeant at barely 21 when I hit the Gulf. It was an interesting time.

I was assigned to a tactical command for the engineers in country. We stayed in a small group deployed north. I thought about it a lot, and I wish I could put my finger on exactly what it was that caused me issues when I came home.

I can't. I don't have a This was it. This was the thing that caused the problems.

I just know that when I came home, I was a problem. Rage, anger, sleeplessness, sweats, nightmares, night terrors. It was bad.

And I got out of the military and I got out of the military. And two weeks after I returned from Iraq, I was out of the military. I out processed that fast because they had a stop loss in effect.

And I went to my colonel and said, hey, I've got papers to start school, you know, in August. And he said, if you want to get out, don't go on leave. Show back up here Monday and start out processing.

So I returned on I think a Friday. I started out processing that following Monday. So my unit was on leave and I was gone before they returned, which is a terrible way to exit the military after wartime operations.

I understand they don't do it like that anymore. I slipped through the cracks and it was a huge mistake. I paid dearly for it.

You know, I'm high functioning. I graduated with an engineering degree, held a middle to upper level engineering management position with several different companies. But, you know, things weren't good.

It was a constant struggle. And, you know, about somewhere between 92 and 94, you know, my medical records were sketchy back then, but I started seeing a psychiatrist to help get over the issues. A vet had a Vietnam vet had grabbed me and he said, hey, do you understand what's happening to you?

And, you know, I was pretty defensive, but I was like, no, I don't. And he said, you do you need to go see the VA. I went to the VA, was promptly told I was just suffering from separation anxiety.

And it would it would be fine. But, you know, I wasn't sleeping, was getting migraines and, you know, the temper issues were bad enough that I saw private health and probably was put on benzodiazepines. I think 92 or 94 was when that started and stayed on him.

The doctors were willing to keep writing prescriptions. It allowed me to get through the days and be reasonably normal. What I considered normal at the time.

And it continued until 2023 when I realized that my the medications were not. As effective and I've been through this before and I realize I was starting to have mood swings, started to temper snaps, not sleeping as well. So I knew, you know, the medications probably needed to be up.

And I also realized at that time that my memory was going. I was having lapses and in thought and speech. And I was like, you know, it's time to find something different because the meds are starting to affect my brain now.

And that's when I really started searching for. Something different, something other than being medicated. Part of the problem with that is after 30 years on benzos, your body no longer produces mood leveling chemicals.

So you can't control anxiety. Your body doesn't go to sleep. You can't control depression, anger, sadness.

All the emotions that someone would have just imagine being completely unchained

from any type of regulation on all that. It's really a pretty debilitating state to be in. So and, you know, I did that as I was searching for something.

I knew I found the Ibogaine treatment. I heard about it on a podcast and started in the Special Forces community is a lot of people are talking about it. And I've got enough friends in tier one operators that I started canvassing and saying, hey, have you heard about this?

Do you know anyone who's been through it? Have you been through it? Is it worth doing?

And the answers I get back were resounding. Yes, but there's a but in the bud is you can't be on other medications to go down and do this treatment. They're very strict in their protocol health wise and no meds.

So you've got to be off of everything for it with benzos. It's a month. So for me, it presented a significant challenge of how in the world do I get off medications and not blow my life up?

And, you know, what I'll tell you is it's not possible to do both. If you're going to get off, you're going to blow up life as you know it. I started tapering in November of twenty three.

I knew a year prior that I was going to go down to Mexico and started planning. And I was in some stuff at work that I needed to clear up. I had some things personally going on.

I had my own business. So as I wrapped up in twenty, twenty three in November, I started tapering off the medications to enable me to do the Ibogaine treatment. And it didn't go well.

It it's really pretty sad. And I just say this medications are easy because they do help, but they're not long term solutions. And when you set your body up for that, you're setting an individual up for failure.

My doctors had told me they didn't think I would live through getting off them. The dosages were high enough and I'd been on them long enough that it was a struggle. Golly, brain fog, not being able to think, not being able to articulate words, migraines, complete lack of sleep, just sleep, sleep doesn't come.

You get three or four days of being awake and you'll crash for a couple hours. And it just you know, I had to quit working in February, which was difficult. But I had prepared ahead of time knowing that this was coming and that I might not be able to work.

So I left work in February of twenty, twenty four. I knew I was going down to Mexico to the Ambio Clinic for May for April 1st and just settled in. I did a week of detox, inpatient

detox, mainly for, you know, I lived alone.

So for fear of seizures, it's the main fear coming off benzos and in particular Klonopin. It made it, you know, anyone who's done an inpatient detox knows that that's it's a miserable experience for benzos. Because you had to be in a level seven hospital hospital wing, which is a locked wing.

And it's it's a rubber room, to put it mildly. It's not a fun place to be, especially if you're a vet. So that's where I was leading up to my journey down to down to Mexico.

[Chris Faust] (10:42 - 11:06)

In a little bit of research that we were able to do on this, because there's a lot out there. You mentioned that the place was called Ambio Life Sciences. And what can you tell us kind of about, I guess, the facility itself after that, after that detox and then their use of ibogaine and five MEO DMT as a treatment for PTSD?

Yeah, absolutely.

[Derek Kozlowski] (11:06 - 16:06)

So Ambio was started by a doctor, a Mexican national who had been into psychedelics and psychedelic research since the late 90s. So he has been working on it quite a bit. Trevor, one of the other partners in the firm, started around the same time.

He's from Canada. He was practicing ibogaine treatments for opiates, opiate addiction in Canada at the time. And when the Canadian laws changed, he was searching for someplace where they could legally continue their treatments because with opiates, you know, they're reporting about an 80 percent addiction cure rate.

And most places that tell you 20 and they're probably 10. Ambio's ibogaine does wonders for opiate addiction and heroin addiction. And as much as a single dose can get, they say, can get people over it.

I wasn't addicted to opiates, but the research is powerful and it's been ongoing for about 30 years. Ambio, they have doctors on staff. They have nurses on staff.

Our patient to staff ratio was never less than one to one is oftentimes more two to one. Even they were always staffed with medical personnel with with emergency services ready. When you when you attend the treatment, they have private estates in Tijuana.

You go to within gated communities, it's a safe, safe locations, very large house. The one that we were in. So there was plenty of room for us to meet, for the doctors to have their quarters, you know, for night staff to be there to take care of us.

So it's really it really ran it first class. And I will say also, you go through an extensive

medical exam. Prior to going down prior to them accepting any money, accepting you into the treatment.

So they'll they'll go through your history, all your medications, EKGs, all that stuff is sent to them. As soon as you get there, you do labs. They draw blood several times while you're there.

The main health risk with Ibogaine is for heart issues. There's a certain issue with your heart rhythm that they're looking for. And that can preclude people from getting the treatment if they if they have this certain condition.

So they're really looking for that. And you're monitored while you're there. So while you're undergoing the treatment, Ibogaine, you're hooked up to an EKG.

So they're actively monitoring your heart and bodily functions and stuff while you're going through it. So it's really was really very well run. And I was surprised at the the amount of staff that was there primarily for our health.

So I went down. I was with five others. There were six of us total, which is about what they were.

They try and keep it six to eight. They don't try not to go over eight. But it was a very well run, very professional.

And from a medical standpoint, I've been poked and prodded a lot. And there was there was no exception down there. I mean, they they were testing us multiple times a day for four different things while we're down there.

So very well run, safe environment. And it felt like I was at danger or was doing something. Elicit that, you know, there was there could be, you know, I mean, there could be a problem for it.

And I kind of worry about that because, you know, psychedelics, the U.S. government's done a pretty good job of putting out information that says they're bad. You know, you destroy your brain and all this. And the science now is starting to say to say differently when they're not used in a recreational manner.

So when you're using them clinically for treatment of something that they tend to work rather well. And then I'll say with Ibogaine, you know, I was worried about going down there because I'm I was, you know, a child of the 80s where LSD was bad and acid is going to destroy you and all these things that that were told. You know, I worried about that kind of stuff before I went down.

So I did a lot of research on is this going to make me worse? Is it going to hurt my mind more than I've already suffered? Will it work?

You know, it's a big question. So, yeah, there was a lot of a lot of questions around that as I went down there.

[Tom Faust] (16:07 - 16:16)

Can you walk us through what the session was like? Is it more than one session or is it all done in one? How did that go?

[Derek Kozlowski] (16:18 - 28:26)

You can expect 12 hours of being under the influence when you take it. And I don't mean like you kind of feel the effect. I mean, you're you're in it for a hard eight and you're feeling it with visuals for a full 12.

We you arrive at the clinic on a Monday. We did a sweat lodge and some other things, some medical tests. And Tuesday night was the treatment.

So it started out with that. You take it orally. It's a in capsule form.

It is a plant based medicine. It comes from the the root of the aboga plant out of Africa. And we did it in three doses.

And we asked him why. And they said that when you dose it three times, it's it's less there's less purging because Ibogaine is pretty strong in the stomach. It's it's horrendous tasting.

So your body really doesn't want it in it. It was some of the folks. It worked pretty hard to get to get out of them, to put it mildly.

They suffered a little bit with it. I didn't have too much purging was a little bit, but they could be from the spacing. But you do it in three doses.

You start about eight o'clock and by 10 o'clock, you're fully in the grips of the medication. We we had a room in the upstairs of the house where it's laid out. We had six mattresses on the floor with our EKG monitors.

And when we took it, there's a lot of tradition around Ibogaine and ceremonial use. There was ceremonial music playing African beat. It was pretty surreal.

We each had a rattle in a mirror and, you know, to kind of to bring it on. But I think the music more than anything starts to to usher in the experience. For me, it wasn't a negative experience.

I know some people have had negative experiences with it. I didn't see, you know, they say the way Ibogaine works is it blocks your default mode network. So the area of your brain that that you're your mental Rolodex is in that your brain takes and compares

every situation that you come upon to something you've seen before.

Says I recognize that. Treat it like this. It interrupts that.

So your Rolodex no longer can use that default mode, those neural pathways. So it forces your brain to use the rest of the brain and thus you see your experiences from a different different part of the brain, different point of view. For me, I knew.

Brain health was a big deal and I was suffering. And when I went down there, I was. I'll say I was.

Mentally impaired. From the getting off the benzos. It was it was actually a struggle for me to get myself to California, to San Diego, to the airports and stuff to attend the treatment just because the brain fog was so heavy and confusion.

And so when I got there, I think my experience was more focused on healing my brain. And actually, when I took the medication, the vision that I that I can remember the most clearly was actually looking down on my brain. It was completely lit up and just it just looked like superhighways, just buzzing lights.

And I realized after a while of looking, oh, I'm looking at my brain. And it was turned on and activated and working. And a lot of my experiences were around having people come in and actually helping me heal.

So, you know, that was that was my my visuals and everything were related to how can we make my brain whole again? And. And they were all positive, you know, there wasn't anything negative about it.

It was a good feeling, but I'll say that. I think it's not fun. It's not something that anyone would would do for fun.

Because it's not a fun experience. It's it's hard to it's hard to get in a position to go take it. And it's it's pretty strong medicine.

So when you know, it's it's not a recreational type high. You're in it. You're basically unable to walk.

You're very shaky. You don't have much balance so that, you know, the floor of the mattresses were laid on the floor. So we weren't trying to get up and off beds.

It wouldn't be rolling and falling out because, you know, there is some movement. But that was that was it. Most of it is it's in your head.

So it wasn't like we were. Awake and like looking at things, you know, at the very first you were, but you you kind of sink into it. You close your eyes and it's all a mental thing.

And so you're in a quiet room other than the music. There's you know, we weren't talking there. There wasn't yelling or shouting or was a little bit of mumbling.

But it was mostly it's an internal thing where your brain is is going to do what it's going to do. So that was my experience, actually, with the Ibogaine. And the next day I started coming around.

Eight or nine o'clock the next morning, so it had been going on since eight the night before. And eight or nine o'clock in the morning, I was kind of waking up and I was still seeing contrails and stuff, but the visuals were mostly gone. But so was the anxiety.

I knew when I opened my eyes and was aware, the first thing I was aware of was the acute anxiety that I'd been experiencing, like just baseline anxiety was lower. And I was like, oh, man, that's different in the brain fog. It's not it wasn't cleared.

It was. Markedly better. As I came off of the Ibogaine.

I was like, OK, so it really did do something I knew right away and most of the other guys that were there and it was it was all guys that I was with. They knew immediately. What had changed.

Because, you know, we had several sessions where we we spoke in a group about what our expectations were. We all talked about what our experiences were, what we'd been through, what we were wanting to accomplish. So the next day when we debrief to be able to say this is what we went through, what we experienced.

Everyone said the same thing. Even we had one guy that had a really rough experience. Really rough.

Even he said this was a positive experience for me, even though it was extremely rough on him physically. And the day after is they call it a gray day. You're not active.

You're you're still very much under the influence of the drug. It's it's kind of like being hung over, but there's no headache or nausea or anything like that. It's just.

Things are slower. You're not super active, but you're. It's a stimulant, so you're you're stimulated.

You can't sleep. You're awake the whole next day. You haven't slept that night.

So, you know, the stimulation and for me in particular, I know I, I slept Monday night when I got to the clinic. I didn't sleep again until Friday because it was such a strong stimulant and I am not able to sleep yet without, you know, medical help. There was no sleep for me because down there, you're not taking any medications, even sleep medications.

I wasn't able to take. So I didn't sleep. And even with that, while that's miserable.

It was OK, because I knew what I had experienced with Ibogaine was healing. And helping. And so.

Like that Tuesdays, Wednesdays, the gray day. So Thursday we did the five MEO DMT. And they call that the God particle.

And so I'm a Christian. I'm saved. You know, I know Christ.

But I didn't know God. Like that. My experience with the five MEO DMT was.

My soul left my body. I cease to be. So whether you want to call it died or whatever you want to call it, I was no more.

And I knew it. Everything that was in me, all the pain, the shame, the guilt. Anything bad that had ever happened to me, I physically felt leave my body.

And it was so, so powerful that I yelled and it was not anything that I could control. I felt it was a guttural scream that I'd never heard anything like that. And it was coming out of me.

And it was completely uncontrollable. It just it just came out with all the emotions that. The pain and the anger and the fear as it left, so did that shout.

And what I'll tell you is I did not want to come back. Because I knew I was in the presence of God. And never in my life have I felt that and it was I told someone the other day.

I felt like I got to see me the way God did. And I've never I've never experienced looking at myself like that before. Of that feeling.

It doesn't last long. It's it's a it's some granules that you smoke. And it's not like you're it's not like smoking a joint or something.

You take a hit, hold it in and. Ten seconds later, it's it's on you. But I'll tell you it.

It it changed me. The five in the most people opt to do it twice. So you do it back to back.

The second time I did it, I honestly don't remember. They say I yelled. I wasn't aware of that.

He I was just aware of just peace. And that's really when someone asked me what I wanted to get out of the Ibogaine treatment. I told him peace.

Just quiet the noise.

[Chris Faust] (28:29 - 28:40)

I was gonna say, so how do you navigate the, you know, any potential risks or concerns associated with, you know, the experimental treatments like Ibogaine and the five MEO DMT?

[Derek Kozlowski] (28:42 - 30:12)

Well, what I can tell you is after 30 years of benzos. It couldn't be worse. You know, and what I've been through and.

You know what I've gone through in my life, it. You kind of know when you've reached the end of your line. When you've had as much as you can take, then you start looking for stuff and you know, the health concerns are real, but it's like, okay.

Is it going to hurt my brain worse than it's already hurt is doubtful. Research says no. Is it going to hurt my heart?

You know, I've got a healthy heart. Research says no. Is it going to cause a lasting negative effect?

There's been no, no reported cases of that. I think the ambio clinics treated 1200 vets now. So.

Yeah, I felt pretty safe with that, and I felt very safe with the recommendations I was getting, you know, when tier one guys are saying this is the place to go, they don't mess around. They're usually not people to be taken lightly. So for me, I talked to enough of them that even though it's anecdotal, all of them said this is worth doing.

So for me, I had struggled for so long. The risk were outweighed by the positives.

[Tom Faust] (30:15 - 30:23)

Have you experienced any ongoing benefits or side effects from the treatment that, you know, in the time since you've returned?

[Derek Kozlowski] (30:24 - 33:32)

Yeah, I have. My. My mindset has changed.

What I want out of life has changed, you know, I realized, and I think a lot of times with PTSD and with vets, even if they don't. If they say I don't have PTSD or that kind of stuff doesn't bother me, if you look at their lives, a lot of us are struggling with. Always going 150 mile an hour because to slow down is to give in or let things overtake you.

So if you just keep running, you can outrun all the bad crap. And yeah, it doesn't really work well, but we all seem to be doing it. And I think that was me, I was I was running,

running, running, pushing, pushing, pushing, always, you know, not able to sit still.

That's gone. So to be actually be able to sit still quietly. To meditate, to be able to clear my mind and stuff like that, all those things have markedly improved where I couldn't do them before the Ibogaine.

I couldn't sit and meditate more than five minutes. Now I can sit for 30 or 45 minutes and really meditate. That wasn't possible before I went down for the treatment.

Sleep is still a challenge. And it's going to be with the with the benzos. That's, you know, I probably have another three to five months of it.

I'll say my taste in music, television, movies, whatever has changed. I'm not surfing social media. You know, no desire.

I haven't drank since I actually haven't drank since I came off. Since I quit all of my meds on February 20th. I haven't had a drink and not because I'm afraid to.

I just I don't feel like having a drink. I have no desire. So, yeah, I think that, you know, they say the medicine continues to work for up to three months.

And. I agree that it does. You can feel it.

And I don't have visuals and stuff like that, but it just. My perspective on a lot of things has changed. And I think it's probably from using different pathways now that different neural pathways in your mind, you're you're processing things differently than previous.

So I can definitely feel that. And anxiety still continues to be better. It's not, you know, I'm not working yet.

I'm not anxiety free. But I'm more able to manage what's there. But, you know, that's going to take take a while to come back.

Your brain doesn't produce those chemicals. Overnight. So, you know, it took me 30 years to get here.

I won't get out of it, you know, overnight. It's going to take a while to work out of the negative effects of the medications.

[Chris Faust] (33:34 - 33:44)

Yeah. How do you how do you maintain your mental health and well-being, you know, post-treatment since you're not actively getting it now? You're just kind of letting it run its course.

How do you how do you maintain that?

[Derek Kozlowski] (33:46 - 36:07)

Meditation is important. I've changed in how I view me. I'm worth changing my actions for.

So, you know, what I eat, what I do. What I'm willing to do. It, you know, I've got a new perspective on those things now.

And I'm it active. It makes you actively want to change things. And, you know, they say if you don't.

If you don't put new habits in place, you go back to the old ones. And. Well, I know that's true.

It's awful hard to not put new habits in place because you're you're thinking differently. So, you know, a lot of the ruts that I was in are gone. Those pat those patterns of thought and I don't have the run on thoughts anymore.

My brain is not running a thousand miles an hour all the time anymore. It actually gets quiet. Man, that's such a huge difference that I'll do anything now to maintain that.

So when I come up to a situation where it's like, oh. Wow. I really don't want to do that.

Like, OK, well, is it necessary? If not. Then why am I doing it?

And if I don't have a real good reason for doing it, I don't do it. Yeah, I'm listening to me now because I know, you know, for 30 some years I was not listening to me. And so I'm I'm really receptive to, OK, what's going to help heal?

And so much so that, you know, I've moved. I packed up and moved from Tennessee down to Florida where my parents live for a couple of things. One, to have support and live by myself up in Tennessee and.

You need to be around family support and just to get a different. I knew I knew I needed to change things in my life. And I said, this is probably the best way you can make a positive change is get up and put yourself in a different area.

So those are the things I've been doing as well as exercise to stay healthy.

[Tom Faust] (36:08 - 36:19)

So how was your treatment for PTSD? How has it shaped your perspective on mental health and recovery and particularly on alternative therapies?

[Derek Kozlowski] (36:21 - 39:10)

Well, I strongly believe it's my opinion and the opinion of the other five I was in Mexico

with. If we did this prior to coming home from a combat zone. You wouldn't have a veteran mental health crisis.

It wouldn't exist. Had I done this 30 some years ago prior to coming home, my life would be totally different now. I know that.

It's, you know. Medications are OK short term. I think they're even good short term.

People get into situations that overwhelm them, but it's not a long term solution. And I think too often the mental health community just wants to give you a script and send you on your way because it keeps you quiet. But that's not good enough because vets are suffering and you see it in homelessness.

You see it in addiction. You see it in broken homes. You see it in suicide and you see it in just miserable living.

I think all that could change. I really do. This is a different path, and I'd say it's not for everybody.

It's an extreme path. And see how long ago was Desert Storm? Thirty three years of suffering.

That's pretty extreme, too. So, you know, for me, I knew I needed something extreme because nothing else was working and I was at the end of my road. We don't we don't have a great system for treating mental health issues.

And I mean, let's face it with vets. We don't have a great track record of even being open about mental health issues. You know, I spent 30 years thinking it was just me because I wasn't around other vets.

It wasn't until I met a buddy who convinced me, go back to the VA and file, go back and get benefits, go back and, you know, reengage with the vet community instead, because I thought something was wrong with me and I wouldn't be accepted. And, you know, even like even going down to Mexico, the five guys I was with, nothing could be further from the I mean, I got I woke up this morning to 47 messages on signal from those guys. You know, it just the lack of acceptance that I felt was there.

The judgment was wasn't there. I mean, they were totally accepted me. And we're still two weeks later.

We still have daily conversations about what's going on, where we're at, what we're meditating, what we're listening to, what's helping, what we've noticed. It's it's a it's a pretty powerful change from what I've been through.

[Chris Faust] (39:11 - 39:16)

You know, what kind of what advice would you give to other veterans that are considering similar treatments?

[Derek Kozlowski] (39:20 - 41:56)

Well, you know, I guess I give two sets of advice. One is if you're not considering alternative treatments and you're sitting there on medications, I would urge you to start looking. Because eventually because what happens with medications is when you can no longer take them, you're going to be in a state you're unprepared to handle not taking them.

So, you know, if you've been on a long term, certainly 30 years, the VA doesn't have any history with that. Most of us are dead. We're no longer here after 30 years on medication.

And the VA tell you that they told me that they don't have any test cases. They can't tell me when the brain fog will be gone because they don't know. You know, they don't have any record of how long this takes.

So, you know, you like to think that your doctors know better than you. But what I'll tell you is some of this is gray area and the doctors don't know. So don't accept not getting an answer or not getting a treatment path that will work for you.

Keep searching. That's the first thing I would say is keep searching. And if you're a long term med taker, start thinking about what you're going to do to get off those.

It's not easy. I'll say that first and foremost, it's not easy for those that are seeking an alternative treatment and specifically are thinking about Ibogaine. I would say, do your research.

I didn't mind. It took me a year. But do your research.

There's enough out there. There's enough people reach out to enough people in the vet community that have done it, that you can get information on it and find vets who've done it. You know, there's enough of us now and especially in the tier one and special forces community.

There's plenty of guys now that have gone down and done it. There are people who will answer your questions. I found lots of tier one operators that answered mine.

So I would say, do your research, but absolutely give it a shot. You know, there's veterans groups that will help sponsor you. I self paid for mine.

And I think for me, the treatment was 6800. I had spent it again in a heartbeat without a thought. It was that powerful.

And I told someone earlier this week is it's probably the single most impactful thing I've ever done in my life. So, you know, it's profound. And I'd say as long as you've looked into the health implications of it, it's well worth pursuing.

[Tom Faust] (41:57 - 42:00)

What insights would you like to leave our listeners with?

[Derek Kozlowski] (42:01 - 43:27)

You know, so I was at the point of suicide in 92. And I haven't been since. But I know how low you can go.

Yeah, and I've had the thoughts I've sat with the gun in my mouth and tried to think of a reason why I needed to stay here. And so what I would say is, number one, if you're struggling, reach out. Reach out.

People will listen. Get help because you don't have to struggle. And the other thing I would say is, you know, for those of us who have been in combat and there's a whole lot of PTSD and just from combat, you know, we think it is, but there's sexual trauma, there's emotional abuse, there's all kinds of PTSD.

And what I've kind of realized is trauma is trauma. And it doesn't have to last a long time to have a long term effect. So don't don't just sit and suffer in silence because that's going to lead to not living a full life.

So I would encourage people to take your mental health seriously and search for answers. You don't you don't have to just struggle. There's there's something better out there than just struggling.

[Chris Faust] (43:28 - 43:45)

That's definitely good advice for anybody with any sort of issues, no matter which direction you want to go with, you know, therapies or treatments. Just make that, you know, make that effort. Take that step.

Get help. Talk to somebody. At least get that started so you're not stewing in your own thoughts.

[Derek Kozlowski] (43:46 - 43:56)

Yeah, you're worth it. And if anyone listen, I don't know if anyone's ever told you that, but you're worth it. So so so take it.

Take the help that's that's that's given.

[Tom Faust] (43:57 - 44:17)

Well, Derek, we definitely appreciate you being on here and your candidness. This has been very insightful and you're opening yourself up, you know, with a lot of real personal stuff that we appreciate. And I believe others will appreciate it as well.

Definitely. We'd like to thank you for taking the time to be with us.

[Derek Kozlowski] (44:18 - 44:34)

I really appreciate you guys. It's it's you know, I hope I hope someone sees it and helps them. I needed help.

I got help from a podcast. Hopefully someone else will see it. And I just thank you guys for giving me the opportunity to to use my voice.

[Chris Faust] (44:35 - 44:54)

Yeah, we appreciate you and the time you took and appreciate anyone who tunes into this for watching. Hopefully it'll help you and at least, you know, give you the nudge if you need it to get help or have somebody, you know, get help as well. So we just appreciate anyone who tunes into this podcast here.

Absolutely. Thank you.

[Tom Faust] (44:55 - 45:06)

All right. Thank you. And on that, we will put a link to MBO Life Sciences if you want to do some research on that.

And until next time, I see you. See.