

GLOBAL WELLNESS SUMMIT

**11th Annual Global Wellness Summit
Q&A with Dr. Andrew Weil**

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MS. ERICA ORANGE: --those of you who are driving our Q&A session. My name is Erica Orange. Our company is the future Hunters and we're based out of New York. Our company looks at long-term trends, and just like all of you, I had the pleasure of seeing your keynote presentation this morning and thank you so much for carving out the time to kind of get questions, and one of the things that really struck me about your presentation in particular, and obviously I know this is an overarching theme of the event, but the whole nature of education, modeling, collaboration and one of the first points you made in your presentation was the whole nature of contagion and I find that to be particularly fascinating and just to kind of start off our Q&A session, I want to talk about this whole notion of contagion because you talk about proximity, but if we extrapolate that out and think of it in more technological terms, do you think that same notion of contagion of healthy or unhealthy behaviors be thought about in social media? And I think about that because we know that Facebook, for instance, the behaviors of those within your network can influence your own, so do you think that other channels can affect that as well.

DR. ANDREW WEIL: Is this mic on? Well, let me tell you a story. 20-some years ago I started, it was then the program of - - medicine at the University of Arizona. It's now a Center of Excellence there, and we began by training physicians, intensively training them in this new field of integrative medicine, teaching all things that were left out of regular medical school, nutrition, mind body interaction, strength and weaknesses, systems and so forth and we started off by having a residential fellowship of we trained four people a year. We had them for two years in a really hands-on situation and the main criticism we got was how are you going to change medicine by training four people a year, but first of all, over the years, we graduated about 35 people from that residential fellowship and many of them are now in positions of leadership around the country training other people and so forth.

But more importantly, it gave us a chance to develop a curriculum that we could then translate into other forms to

get more and more people in learning fellowship, also two years, 1,000 hours also taught online with two residential weeks also taught in Tucson at the beginning, middle and end, so my concern was, you know, when we had people on site and I was directly working with them, obviously there was a great potential for changing them. I wondered whether in a more virtual setting, you know, what would hold true. You know, very interestingly, what we found was that the, in the first few years of doing this distance learning fellowship which now by the way has expanded. We now have classes of 80. I think the next class coming in is 88 physicians. We train about 160 a year. We've graduated almost 1,600 from that.

These groups that although they had spent only three weeks total out of two years with this group, that they were not closer to them than their colleagues in their home communities, and many of them had said that after their first year of training, they had made significant training in their own lifestyles and after, and had made significant changes in how they practice medicine, and in the end, when they graduated, said this had really felt like a community. That was very interesting to me to see how you could create community in the virtual setting. We're translating this is a virtual format. We're getting this into residency programs and the eventual goal is to train all physicians, so whether you go to a psychiatrist or a dermatologist, they will have had basic instruction in all of these things that we consider so important in healing, so I think it's possible.

MS. ORANGE: Yeah, and just one other question to piggyback off of that, one of the things you had talked about in your presentation was putting the fun back into wellness and healthy lifestyles because the fun has been stripped from it in a lot of ways and one of the things that I talk about audience is from gaming to game-ification and we always talk about it in the form of leveraging gaming mechanics in a non-game setting so the notion of leveling up or rewards or alternative currencies, so I'd really like you to just speak a minute about that whole notion of game-ification and if you think--

DR. WEIL: Frankly, I never heard the word game-ification until yesterday, so would you expand on that? Tell me what game-ification is. What do you mean by game-ification?

MS. ORANGE: So, game-ifying the whole process, making it more fun. We know that especially among younger generations, they respond to behaviors that can be linked to accruing points that can then be exchanged for goods or items, basically as I was saying that leveraging of gaming to as it applies to other sorts of behaviors.

So how do you really re-instill that sense of fun and more importantly play and kind of, and I quote, game-ify this entire experience?

DR. WEIL: So first of all, this comes naturally to kids, right? And somehow we outgrow that. In my own life, I can tell you that I've tried all sort of forms of physical activity over the years and a lot of them felt like work to me, and for me, the best forms of physical activity are when I'm unconscious of exercising because I'm doing something that's fun and time passes, I'm unconscious of it and at the end of it, wow, I got a lot of great physical activity and I wasn't even aware of the passage of time and wasn't even aware of this being effort, so I think that's a major secret, if we can make things that are healthy more fun. That's what I was saying this morning.

MS. ORANGE: Yeah, absolutely and that resonated because I think at least among younger generations, sense of play and whimsy and imagination is being coached out of them and we need to re-instill that sense of adult play in many ways, so I was particularly struck by your comments around that.

DR. WEIL: You know, I love to cook. That's one of my hobbies. It's relaxing and fun, and I got into it when I was really in medical school. I found, I was in medical school and really things were much grimmer back then and I found I had to work long 72 hour shifts in horrendous hospitals, terrible environments at every level. I found that when I got out of that, if I could visualize something wonderful to make for myself and get the ingredients and prepare them and make something to put me back in a great mental state, I find there are so few people today who cook and like to cook, and many of them because they think it's work or difficult, I try to show people how it can be fun, especially if you do it with other people, so I think that's been a guiding principle of how I try to teach.

MS. ORANGE: Yeah, I think that's great and I think a lot of people especially today with the disintermediating effects of technology we are looking to kind of get back to basics in a lot of ways, the very sensory aspects of whether it is cooking or something that you can touch, feel, smell. So, I don't want this session to be just about my questions. This really is about all of you interacting and asking Dr. Weil your questions, so there's going to be a mike going around. Let me please remind you that it is, please save any personal comments and kind of get to the meat of your question because we really want to pick this brilliant man's brain here. And before you ask your question, please make sure to identify yourself and your affiliation and where you are coming from.

DR. WEIL: And feel free to ask me about anything and any subject far from what we've talked about.

MS. ORANGE: So open playing field, folks.

MS. SUSANNA LONG: Hi. I so appreciate your music analogy and I'm a sound healing artist. Kimba Aaron [phonetic] is a friend of mine who came later actually.

MS. ORANGE: Name?

MS. LONG: I'm sorry. I'm Susanna Long and I live in Lafayette, Colorado and what else do you want me to say? We develop environments that deliver music tactically through the body so you feel the music you hear resonating through you like a musical massage, and my question is, we actually, I've been doing this for a while, but I'm sort of doing an 11-bed, we've sponsored a lot of children with autism who are sleeping through the night by putting the technology through the bed like a lullaby experience, and we're using less anesthesia in dental office, but I'm really want to get support and figure out, we're starting an 11-bed hospital study, but I look at you as kind of the one that would really, with yourself healing with sound of music brought that to the table, so I would love to understand how we would collaborate more to bring that forward.

DR. WEIL: Well, I could talk the whole time about sound and healing and how it affects us. It's something I've been fascinated with for a long time. Sound is very powerful energy. It goes directly into the nervous system. It affects physiology. It affects mood. Often we're totally unconscious of the effects of sound on us because we're

exposed to it all the time. I'll just tell you a few random things that occur to me. I used to do some work on the staff of the field museum in Chicago on botany and one night I happened to be there, it was founders night and I was invited to come and they had all their big donors come from the reception, and in the main hall, they had owned one of the largest gamelan collections and they had gotten a troop of Indonesian gamelan players to drag this out and play it and one of the pieces they played was a war chant that was supposed to prepare people for battle. It was about a three minute piece. I mean, I felt, I wanted to tear the columns down in the building. Incredible surges of energy through my body from that. That's just one example.

I am driven crazy by the sounds in most restaurants. You know, the word restaurant comes from the word restore. This is supposed to be the place you go to for a little peace and quiet. Not only can you hear people talk but I think a lot of the sound in American restaurants today is really bad for digestion. You know, it revs up the sympathetic nervous system, which shuts down the digestive process. When you're in high sympathetic state, digestion is none-essential. It's preparing you for emergencies, so you shut down the digestive processes and blood and energy go to the brain and heart and so forth. That's just one example of the unconsciousness.

Or a car pulls up next to me with a boom box going, and I think people have no awareness of what that's doing to them. Think of your reaction to the sound of a siren, for example. There's so much ambient noise that we become inure to and are unaware of its effects on body and mind. I would love to see us take greater consciousness, better use of body and sound, how to make use of it consciously. In many medical settings, the sounds are horrible that people are exposed to, and there's no thought about that, so I think it's a wide open field, tremendous potential.

We teach about sound healing in our trainings. We bring some sound healers and energy healers in to work with our physicians.

MS. ORANGE: Incredible. Yes, in the front.

MS. CHASE MULLEN: Hi, my name's Chase Mullen. I work in personal care. Please forgive me. This is not a perfectly formed question yet. One thing I love so much about your work is

how you blend spirituality with science and evidence-based research and one of the challenges I'm finding in my work is trying to quantify separate from or distinct from biological markers like cortisol the benefits of spiritual practice, especially in relationship to the body, and to your point that you just made about sounds and how unconscious we are, we don't know sometimes that some things are bothering us. We're not always conscious of what's actually ailing us, so self-reporting in studies isn't always the best way to quantify this. Do you have any models regarding research, spirituality, the body, relationship with self that manage those challenges?

DR. WEIL: Well, I'll just mention that the research director of our center, Dr. Esther Sternberg, this is you know, a major field of her work. She's developed non-invasive technology for developing stress responses and this is a sweat patch that eventually will transmit data wirelessly and it measures levels of cortisol, neurotransmitters in sweat, and you know, in a lot of conventional research, if you do this, you try and go into blood samples, that's a major disturbance of the environment. So, that's a major disturbance. I'm very interested in her work. She's very interested in the effects of the environment, both the build environment, so that's one possibility for documenting some of this, so there are ways of doing that. So, one of them is looking for physical physiological correlates of changes in the non-physical sphere.

What you run up against in medicine is that medicine, science are so dominated by a materialistic paradigm, and in that paradigm, and in that paradigm, the only thing that's real is that which is physical, that which can be touched, measured and so forth. And the idea is that they, there can be a nonphysical cause of a change in a physical system just is not allowed for in that paradigm and this is the big obstacle to doing research in that area, so we need a paradigm shift for people to see how to begin approaching that.

MS. MULLER: Yes, okay. Thank you.

FEMALE VOICE: First of all, Dr. Weil, thank you for your support of the - - wellness industry through the years, but I live in LA and my husband and I love True Food Kitchen, and I just wondered, I don't know if you're still involved in it-

DR. WEIL: I am.

FEMALE VOICE: --but I just wanted to find out what you've learned from consumers in trying to feed them better.

DR. WEIL: Good question. You know, I was, I'm a very good home cook and over the years, a lot of people said to me, you ought to open a restaurant. I was smart enough to know that I know nothing about the restaurant business and it looked like a very tough business, so that never tempted me, and then about 10 years ago, I was introduced by a mutual friend who's sitting here, Richard Baxter, who's my business partner to a very successful restaurateur in Arizona, Sam Fox, and I talked to him about the concept of a restaurant that would serve very good food that was also good for you and he didn't get it. He said, health food doesn't sell. I think he thought I meant tofu and sprouts, and I invited him and his wife to my home. I cooked for them. They like the food. I saw his wheels beginning to turn and he thought, okay, he was willing to give this a try.

So we opened the first True Food Kitchen, it's almost 10 years ago, nine years in Phoenix just as the economy tanked. People said we were crazy. He was very skeptical and it was an interesting collaboration because his favorite foods were cheeseburgers and steaks and we really butted heads a lot and had to compromise over things, and I realized that some of what I wanted probably would not work in a commercial setting, and he had expertise in that area, so there's a lot of conflict and compromise with this successful concept, and from the moment the first restaurant opened, it was wildly successful, to his amazement and he said, for the first month, he said well this doesn't mean anything because people always come to a new restaurant. After three months, he said, well, it still doesn't mean anything because it's only three months. Six months, he said, well it still doesn't, and then he said, somewhere around eight months, the said, well I've never seen anything like this. He said he'd never had people come up to him on the street and hug him for opening a restaurant or beg him to open one in their home location. He's never had a restaurant where people came and ate four times a week.

It appeals to people of all ages, and I think, so one of the secrets of True Foods Kitchens success is there's something there for everyone. It's like meat eaters can get something,

vegetarians, vegans, gluten free people, so mixed parties can go there. We don't push the fact that it's healthy food. It's good food. It looks wonderful, tastes great. It happens to be good for you, adheres to a coherent nutritional philosophy and you feel good when you eat there. And we sell wine.

But, you know, also interestingly, it's the most profitable restaurant per square foot of anything out there and it has the lowest percentage of alcohol sales, which is very interesting because most restaurants make most of their profits from alcohol sales and the clientele that come to True Food, you know, doesn't spend a lot of alcohol and because meat, you know, animal protein is not major front and center there, we can afford to spend more on high quality vegetables and produce.

It also amazes me that nobody has imitated it so far. It's been out there almost 10 years and nobody has done the same thing, and wherever we've opened it, it's been incredibly successful, so it's been very gratifying to me to see that.

I was in the original Phoenix one some years ago and a mother came up to me with two young kids and she said, tell Dr. Weil what your favorite food is? And the little girl who was younger was sort of embarrassed and hid behind her and the little boy said kale salad, kale salad. I mean, if anybody had told me that American kids would be eating kale salad. I don't think I would have believed that. I take some credit for popularizing kale and kale salad in this culture.

[applause]

DR. WEIL: So, it's been very fun for me to do that. It's my passion and I love seeing people turned on to the kind of food that I like, and I've even been able to get some of my old hippie things in there under other names, like that yeast dressing that we use that they call Umami sauce that's made with traditional yeast, that's what I used to put on popcorn back in my old hippie days.

MS. ORANGE: And the question is, when are you opening up in New York?

DR. WEIL: Well, we actually had a site in the World Trade Center that fell through, so I'm hoping we will be there eventually.

It's coming. We've got 20 of them now and we're planning on opening many more.

MS. ORANGE: All right, so, yes, right in front.

MR. MARK GOLDMAN: Dr. Weil, Erica, good morning. Mark Goldman, Aspen International. Our business model is designing spas and wellness centers and if we take the, let's say the spa industry that's hitting a glass ceiling right now and we take the broken hospital industry on the far right which is totally broken, we try to develop something in the center called a wellness temple, would you be so kind and walk us through what you would be your wellness temple?

DR. WEIL: Okay. I haven't seen anybody do it right yet, in terms of what I like.

MR. GOLDMAN: I hope you do it.

DR. WEIL: I want to see integrative, medical wellness centers in which there is a real marriage of integrative medicine and spa and wellness, and these are places not, first of all, it has to be available to far more people than just the affluent. It would be great if eventually insurance would reimburse for stays in them. I would see these as places where you could go not for treatment of critical illnesses, but you could go if you had routine kinds of complaints, or if you were well, to have your lifestyle adjusted, and then when you came out of a stay in these places, you would know more than when you went in about how to live, which would include things like maybe how to grow some of your own food, how to cook, how to make use of the range of natural and alternative therapies, but with a strong medical you know, emphasis there that physicians and other practitioners trained in integrative medicine who can help people analyze their situation and direct them in the right ways.

And I'm waiting to see that happen. I've been approached by a lot of people. I've just, I haven't seen it yet. I think the culture is ready for it?

[inaudible male voice]

DR. WEIL: I think people are ready for it now. I think if there were such a place that did it right, I think it would be incredibly successful.

FEMALE VOICE 2: Dr. Weil, you certainly have been an amazing person. For so many years, you've touched the lives of so many amazing people and truly touched my life. I work in the school district of Palm Beach County, which is the 11th largest district in the nation, and we do have 193,000 students with 22,000 employees. \$2.4 billion corporation. As a manager of wellness, could you give me three tips and advice. You know, we work on policy try to influence, move those mountains, change the minds of teachers and parents and students and we do go through a lot of challenges, but since you are so well rounded and have given so much to people, I would ask you if you could give me free advice.

DR. WEIL: Well, I would teach simple breathing techniques to everybody, kids and teachers and staff. You know, use my four, seven, eight breathing technique. That is everything to recommend, it's free. It takes no time. Secondly, I think really work at making good food available in schools. I don't know what you've got there now, but we could do much better at providing good food. I think it's even, I don't know, what is your population like? What demographic?

FEMALE VOICE 2: I've been with the district for seven years and our free and reduced was 32 percent and now it's 64 percent, so we are quite a diverse community. We have over 154 languages in our district, so it's pretty diverse and we will see an influx or more coming in the near future from Puerto Rico and so.

DR. WEIL: Okay, well I mentioned this morning that I thought we have a long way to go in terms of health education. I think really work to develop a really robust health curriculum, K-12, you know, based on principles of integrative medicine and wellness. I think that would be terrific to start doing that.

MS. ORANGE: You know, I have a follow up question of my own and this is a bit of a personal question for me. Yesterday, we heard a lot about the first 1,000 days and how important that is to kind of build a longer-term sustainable past towards wellness. I became a new mom this summer and what are a couple tips you have for those prior to kindergarten, kind of in those first 1,000 days, to even instill those sorts of behaviors so that even the youngest can thrive longer term.

DR. WEIL: I think that the breathing stuff is so important. I mean, I place an enormous emphasis on proper breathing and this is something you can do with kids, even very young kids to breathe with them to teach them to make breathing deeper, slower, quieter, more regular to really practice that four, seven, eight relaxing breath. It's really useful for changing the tone of the nervous system, and that's marvelous, and then to plant, you know, the seeds of these ideas that the body is capable of healing itself, you know, that you have this innate healing ability and you want to learn about it and take care of it and protect it, and simple things you can do.

MS. ORANGE: Yeah, that's such a powerful message I think at every age.

DR. WEIL: By the way, I mean simple things, kids get a cut, an owie, say watch what happens over the next few days, as it heals, just notice that, this is your body doing that.

MS. ORANGE: Yeah, the magical healing power of their own bodies. Yes. There are a couple of questions. Did one of you right up here have a question?

FEMALE VOICE 3: Yeah, I have a question. Dr. Weil, thank you so much for all that you do. I have a quick question. You were talking about sound and sound healing and how it's directly related to the nervous system and how important that can be and how it's somewhat overlooked in our society. I come from a very extensive background of competitive athletics and professional skiing, actually. And I think it's interesting, from that perspective, you're always looking for the littlest thing to give you the edge, right? I've skied professionally for 16 years and we're always trying to invoke the zone on comp day, so that feeling and emotion of skiing perfectly, and as athletes, we listen to a certain type of music which gets us pumped up and basically helps us match the frequency of the reality we want. We drink a certain type of thing, we visualize a lot. We cover all of our senses but smell, and smell is directly related to the part of the brain associated with memory and emotion and so this caught my interest, and I started making like neck gaiters that were sparkly and pink and all the boys wanted to use them because we would scent them with essential oils of their frequency, and I just wonder what sort of research you know about or have done in the area of-

DR. WEIL: [interposing] I was just, I was just going to talk about that as you started talking about sound. One of my fantasies is to create the olfactory police who would go around and ticket people for polluting my immediate environment. I have no idea what people think they are doing. I have a really hard time with fragrances. I cannot stand going into hotel rooms where they put these pellets in the vacuum cleaners. They make me dizzy. They really affect me, or to be trapped in an elevator with somebody that's doused in perfume, I think people are completely unconscious about that. Smell is a unique sense.

It's a very primitive part of the brain and it goes in there without being processed by the higher brain in the way that the other senses are, so it's a direct thing that kind of impacts us on an emotional level and as you said also connects with memory.

I think there is a whole world to be learned about this that goes way beyond traditional aromatherapy. I think odors affect us very woefully and as with sound, if you're opposed to an odor constantly, you become tolerant to it. You become conscious of it, so I think that's one reason why people are just completely unconscious of what they're putting out there. I think there is a lot to be learned about that. I don't claim to be an expert on it, but there are some odors that again have very powerful effects on physiology. Little research in this area, but again, some of it basic stuff that lavender has actually been shown to produce calmness and affect brain waves. Peppermint causes alertness and so forth, but that's just scratching the surface.

MS. ORANGE: Yes, we have a question in the front.

MS. TONYA BENNINGSON: Great. I'm with you on the smell thing. So my name is Tonya Benninon. I'm an internist. I live in New York, and I left private practice because I was frustrated with the lack of preventative care and the lack of reimbursement, so I went corporate not necessarily to escape the pain of private practice, but thinking I could affect more people in corporate America. So, now I'm the chief medical officer for Comcast NBC Universal. We have 153,000 employees across the U.S. that mimics the U.S. population, so now I feel I have the obligation, the opportunity to help shift the market, so you mentioned that this morning that we have to do things politically. As corporate America, and I

have people who share my vision, how do we influence the market to help get us to this transformation that we're all here to achieve?

DR. WEIL: Well, here's one idea. There's tremendous need in my field of integrative medicine for outcomes research. You know, I talked this morning about the problem is that there's, these very powerful vested interests control healthcare and don't want anything to change. We have to be able to show the people who pay for healthcare that it's in their interests to support this, that integrative treatment is going to produce better outcomes and save money, but we have to document that.

To do outcomes studies is difficult and NIH does not support this. It's hard to know where the money comes from or incentive to do it. It would be great to get the corporate world behind this because corporations are so hobbled by healthcare costs and I think, they're not constrained by ideology. They're going to do what works, so if we could get corporations maybe in partnership with government or universities at least to sponsor pilot studies, pilot outcomes trials, we pick some common health conditions that are costing corporations most money and you get conventional management versus integrative management and see which produces better results at what cost, and I'm totally confident we could show that integrative treatment works better and is cheaper and that, with policies of reimbursement, would sure free up a lot of stuff.

MS. ORANGE: Excellent, all right, so we have time for one more. We have two minutes.

MALE VOICE 3: I'm coming from that part of the world middle east. We have a hospital. I'm a medical doctor there. We have initiated a wellness program with the help of MGH. It has been almost two years, but my difficulties are within my colleagues, rather than patients the doctors themselves, so my question is, how can you bring them on board to say that this is the way to go forward?

DR. WEIL: Well, you know, in your part of the world, you are also seeing epidemics of lifestyle related disease, you know, tremendous increases in hypertension, obesity, type II diabetes, and those are exactly the conditions where we can make a great difference by applying this kind of methodology

and new way of thinking and again, I think just even to have some trials showing how an integrated wellness program works and how successful it can be, that would go a long way to getting other people interested and getting behind it.

MS. ORANGE: Yeah, I would have to imagine, oftentimes this is viewed within a developed world lens, but as more people are prepared into the middle class in the developing world and have access to cheaper and more unhealthy foods and all of the kind of ills that middle class affords will start hopefully start to see everything that you're talking about trickle to, hopefully trickle to let's say China, for instance and even parts of India.

DR. WEIL: Yes. I mean, America, unfortunately has been very successful at exporting its worst lifestyle habits all over the world and we're just seeing those results happening everywhere.

MS. ORANGE: Okay, and we have one last question in the front.

MS. CHRISTINE CLINTON: Okay. It's really just a statement, thank you. Christine Clinton from Wellness for Children, so I want you to know we are using your program, your four, seven, eight.

DR. WEIL: Great, fantastic.

MS. CLINTON: --with children in Ireland and our pilot program, 300 children, and we've just been amazed at how quickly they've adapted to this, two year olds, three year olds, and then of course the older children, as well. So between your work, and I've done some training with Dr. Herbert Benson and Harvard for the relaxation response and so on, so I've been drawing from those expertise and I just wonder if maybe afterwards we can have a moment to talk about what else we should be doing with the children, because that's who we really want to influence the most. Thank you.

DR. WEIL: That's great. Good work.

MS. ORANGE: So, I am sure that we could keep doing this for much longer than the 35 minutes allows us. A huge round of applause, thank you, and a funny story, on my way into the room, a good family friend stopped me and she's like, I've been following your work for decades. I have the biggest mind crush on him, so I think I speak for all of us when I say the mind crush is universal, so thank you.

[applause]

[background music]

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