



Brain Types and How to Overcome Mental Challenges

Dr. Cheng Ruan interviewing
Dr. Daniel G. Amen, M.D.



Dr. Cheng Ruan, M.D.

And now we have Dr. Daniel Amen and Dr. Amen is a fabulous human being and one of my recently discovered close friends now and he is a physician who's hosted 16 national public television shows about the brain, which have aired over 130,000 times across North America. He is the most popular psychiatrist in America, according to "The Washington Post" and he's a veteran and he served in the infantry medic and he did his psychiatry residency at Walter Reed Army Medical Center in Washington, DC. He's a 12 time New York Times bestselling author and some of his books, my favorite one is "The End Of Mental Illness," it's a fabulous book if you haven't read it. "Healing ADD," "Memory Rescue," "Change Your Brain, Change Your Life" And "Your Brain Is Always Listening" and he's gonna come out with another one in March of 2022 called "The Seven Neuroscience Secrets "of Feeling Good Based on Your Brain Type." And so Dr. Amen is also the founder of Amen Clinics with multiple locations across the United States and he has the world's largest database of brain scans called the SPECT CTs, over 200,000 scans related to behavioral and brain disorders and him and his team has published more than 85 scientific articles and it's the lead researcher on the world's largest brain imaging and rehab study on professional football players, NFL and whatnot. So it's really awesome to have Dr. Amen on today and I can't wait for you to hear what Dr. Amen has to say about our physicians brains, our brains and burnout. Well, welcome to the show. I appreciate you for coming on.

Dr. Daniel G. Amen, M.D.

Well, thank you for having me.

Dr. Cheng Ruan, M.D.

Yeah, so, one of the most important things that I really wanted to talk to our audience about is really the topic of burning out and I think that burnout is just so common and there are studies showing that about half the US physicians are burnt out and maybe the other half is just in





denial, I'm not so sure. So, we've always done done pre pandemic in 2017 I did a clinic study so I really wanna ask you, why do you think physicians are so burnt out, especially right now?

Dr. Daniel G. Amen, M.D.

Well, I mean, the pandemic has something to do with it but also the business model of working for other people. It's, when we became physicians, we weren't thinking about insurance companies, paperwork, getting our decisions second guessed over and over and over again and having people who were less trained than us judging us and that sort of constant judgment and there's really a decreased relationship with the patients because in order to pay back your loans, you have to make a lot of money and that is not a prescription for happiness, that's a prescription for sadness and stress and I've not struggled with burnout much because I don't take insurance, I think that really helps but we really focus on whole people and getting people well, biologically, psychologically, socially, spiritually, but our primary value, we have written values at Amen Clinics and the number one value is authenticity, we live the message because if you don't live the message of health, brain health, mental health, physical health, if you don't live it, you can't give it because people understand, they want leaders that are healthy themselves.

Dr. Cheng Ruan, M.D.

So, we talked about this before but let's talk about is there a distinguishment really between mental health and brain health? What do you think?

Dr. Daniel G. Amen, M.D.

Well, I'm actually not a big fan of the term mental health, I hate the term mental illness, I think it shames people, it's stigmatizing and it's wrong. These are brain health issues. Somehow psychiatry got divorced from neurology and it was a bad divorce because psychiatry got the mind, neurology got the brain and psychiatry got screwed in that process because your brain creates your mind and if your brain is not healthy, it's inflamed or it's toxic, or it's been hurt, then your mind is not gonna be healthy. And you know, I often think of it like hardware and software. You got to get the physical functioning of the brain working right. When you think of burnout, our first principle is you got to get your brain right, which means you need to sleep, you need to eat right. You need to know, supplementation, I think is really important. I mean, you have to like, is this good for my brain or bad for it? And overworking and not sleeping and eating bad food, and alcohol, marijuana I know nobody wants to hear about it but marijuana, they're not good for the brain and so if you wanna decrease burnout, first thing, step, number one, you have to optimize the physical functioning of the physician's brain.





Dr. Cheng Ruan, M.D.

You talked earlier about authenticity, were you speaking about like authenticity to ourselves, to other people? Like what you mean by authenticity?

Dr. Daniel G. Amen, M.D.

Well, I have a sad story. In 2010, the pastor at Saddleback Church called me and wanted to lose weight and I created the Daniel plan for Saddleback Church, which became an international bestseller, thousands of churches around the world did our program but the pastor did it for a little bit and then he didn't and it just infuriated me because if you would have been authentic, live the message, we would have helped a hundred times the number of people that we helped and I love him, but it just became crystal clear to me. If you don't live the message, you can't give the message, which means physician should go to bed and get seven or eight hours of sleep at night. They should turn off their gadgets at night. They should really not let pharmaceutical reps bring donuts to the office or cookies, or like you walk in my clinic with that stuff, you walk right out. It's like, no, no, no. 'Cause you know, I mean, if you, I want my employees to be healthy and some people think that's heavy handed and I'm like, it's just science. You eat bad, you're gonna think bad.

Dr. Cheng Ruan, M.D.

So that level of authenticity is basically a kind of live in the message, right? If I, as a physician, what my patients to do well, I should really live along that path and be the proof that it actually works, is that what you're saying?

Dr. Daniel G. Amen, M.D.

Absolutely plus you're less likely to get burned out. Plus you're likely to make better clinical decisions because your frontal lobes work better and you know, at Amen Clinics, we look at the brain, I know you're a fan of evaluating, the organ that we treat and if, once you start imaging the brain, you realize there's a whole bunch of things that people probably shouldn't do like hit soccer balls with their head or play tackle football or drink. The biggest blog I wrote last year is called I told you so and I start the blog with, when I dated my wife 16 years ago, she told me, I'll never tell you I told you so and Tana completely lied to me, it's like her favorite thing to say.

And for 30 years, since I've been scanning the brain, I'm like, alcohol is not a health food. We went through this whole phase in the United States alcohols is a health food. No, it's not. When you look at the brain, it prematurely ages the brain and then last year The American Cancer Society came out and said you shouldn't drink. Any alcohol increases your risk of seven different types of cancer and obviously cancer's bad for your brain. The stress that chemotherapy and so on and so I wrote a book called "Feel Better Fast and Make It Last." It's about, am I making decisions that





help me feel better now and later versus now but not later? And so we think of a lot of our patients, whether it's marijuana or alcohol, bad food but we have to ask ourselves, are my habits good for my brain or are they bad for it?

Dr. Cheng Ruan, M.D.

So even I think, even beyond habits and I'm getting this out of your book that's right behind your left shoulder, right there, "Your Brain Is Always Listening" is that we as physicians, especially physician leaders and physician business owners, we sort of start our day and we wear many hats and a lot of these hats have to do with the clinical side, a lot of have to do with the administrative side, so there's a lot of input over and over and over again and it's almost like we don't breathe, right? And so, but you said earlier that we sort of deal with insurance companies, we deal with patients who do all these things and sometimes there's like a low level of resentment that's within the back of our brain and that low level resentment spikes once in a while and then there's an act out from that low level of resentment and I see this a lot in my colleagues as well. And so one of the things that we just talked about is not butting the soccer ball with your head and stuff like that but I think that I wanna talk about like micro mental traumas, if you will, these micro traumas are really coming from different things that happen throughout the day that absolutely physiologically shapes more of our brains. So you kind of talk about how psychological stressors really affect actual brain as an organ over time.

Dr. Daniel G. Amen, M.D.

Cheng, I know exactly what you're talking about, having run Amen Clinics for 32 years and part of the stress physicians have is most of us had no business training and we're running businesses and sometimes big business and we often second guess ourselves and I find the more business education I have and the more I say no, see when Tony Blair was the Prime Minister of The United Kingdom and he said, the number one hallmark of a leader is being able to say no and Steve jobs said the same thing he said, we say no to a lot of very good things so we can do great things and so I think I love this book "Scaling Up" by Verne Harnish, that's how we manage at Amen Clinics, it decreased my stress so much. Like we have a one-page strategic plan, we have quarterly rocks and priorities and I think what's decreased my stress the most is having a system to make decisions against and so, with our values, we're authentic, we're science-based, we're patient outcome centered and so when we make decisions, we really make it with our values in mind and we always ask our self, this question, does it fit? Does what we're gonna do now fit the goals we have for the organization? And another thing to help with the micro traumas is you don't have to believe every stupid thing you think. So I talk about killing the ants, the automatic negative thoughts, the thoughts that come into your mind automatically and ruin your day, they should have taught you this in second grade and I couldn't believe I was 28 and I was in my psychiatric residency at The Walter Reed Army Medical Center and I'm sitting in a lecture and the





doctor said, you don't have to believe every stupid thing you think and it was this huge epiphany for me. And then a couple of years later, I coined the term ants, so you have to develop an internal ant eater to patrol your mind and the exercise is super simple. Whenever you feel sad or mad or nervous or out of control, write down what you're thinking and then just ask yourself if it's true. In "Your Brain Is Always Listening," I have these five questions, take a deep dive into these negative thoughts and it's just, I think of as basic training. All of my patients like on session one or session two, I'm like, I want you to write down a hundred of your worst thoughts and I want you to answer these five questions with each of those thoughts and when you learn to manage the noise, it helps you so much. Another fun technique I think you'll like is give your mind a name. It's based on a concept called psychological distancing.

If you can distance yourself from the noise in your head, you're just so much happier and when I interviewed Stephen Hayes, he's the founder of ACT, of certain forms of psychotherapy, I'm like, well, what name would I give my mind? And this is a raccoon. I named my mind after my pet raccoon, I had a pet raccoon when I was 16, her name was Hermie and she was just a troublemaker. I mean, I, like my mind. I loved her, but she tee peed my mom's bathroom, she ate the fish out of my sister's aquarium, she'd leave raccoon poo in my shoes and I can choose when you name your mind, one of my patients, her name is Sandy the psycho another is Ducky. It's like pick whatever sort of fits for you and then you can choose to listen to it or you can choose, for me, I'll just put Hermie in the cage if Hermie is acting up too much or I'll put her on her back and tickle her. You just then don't take yourself too seriously and also, one more thing, you wanna have the no asshole rule at work.

There's a great book by a Stanford professor called "The No Asshole Rule." So when I hire somebody I think, are they kind? Do I wanna work with them? 'Cause you know, you spend a lot of time at work. Are they competent and are they passionate about your mission? And I have the best executive team, I am so honored to work with them because we have no assholes and over the last 32 years, I've hired plenty of them, I'm just not doing it anymore. Do you elevate the team or do you stress the team? Now, the no rule starts with me, that I can't be an asshole. I can't throw stuff, I can't yell at people and you know, MD stands for minor deity and as a specialty we're a little on the rigid side and you know this 'cause you're trying to do something new, we think a lot of like, which then the haters out and the haters are often the rigid people, they can't like think of new ways of doing things.

Dr. Cheng Ruan, M.D.

And that's such a great way to put it. So your brain is Harmon, that's the raccoons name?





Dr. Daniel G. Amen, M.D.

Hermie.

Dr. Cheng Ruan, M.D.

Gotcha. So I feel like you're taking something that doesn't seem to be tangible, like your thoughts and actually putting into something tangible and then manipulate it in the physical world. Is that basically what it is?

Dr. Daniel G. Amen, M.D.

Let's see, well, you know thoughts are powerful and we know this from our patients, right? I mean, it's why placebos work because patients think they're going to. Thoughts are powerful and most people have undisciplined minds and if you wanna be mentally healthy, you have to work out just like being physically healthy. You have to, we have talked about eating the right foods, you have to think the right thoughts and you can develop mental discipline over time with just like building the right habits. I start every day with today is going to be a great day. I knew were you and I were gonna chat and I end every day with what went well today and as I go through my day, is this good for my brain or bad for it? And 19 times out of 20, I make good decisions because I love myself. And you got to get your mind set right 'cause some people go, but I love Rocky Road Ice Cream but it doesn't love you back and I don't know if you've ever been in a bad relationship, I've been in bad relationships and I'm not doing it anymore. I just turned 67, I'm married to my best friend, we're kind and purposeful to each other, I'm not gonna love food or drink that abuses me and the research is pretty clear about sugar and bad fat and it's like, no, I only wanna love things that love me back.

Dr. Cheng Ruan, M.D.

Love things that will have me back, I think that's a great lesson and you talked earlier about like, don't have the reps, pharmaceutical reps come in with donuts and all the stuff like that and I think that's a great start for a lot of people. My practice is named Texas Center for Lifestyle Medicine so not many people are gonna bring donuts. So that's the bonus there but I think it's like a, it's sorta like the one millimeter shifts that we really have to do within our lives because I imagine like, I mean, you have such a great mentality. I imagine that it took you a while to become who you are right now right?

Dr. Daniel G. Amen, M.D.

So my daughter just went off to TCU, which I'm excited for her but sort of broke my heart but when we had the last supper, the three teenagers that live with me, they just, they gave me the best compliment and they said, you're the most consistently predictable happy person we know and I love that because they wouldn't have said that 30 years ago that, one of the reasons I love





being a psychiatrist is I'm always learning about how to be happy and as I teach, I learn and you put these things in your life because you know, I've had plenty of stress over the years but learning how to grow through it rather than being buried by it has helped me.

Dr. Cheng Ruan, M.D.

Absolutely, I think that, well, I think you're beyond a psychiatrist in my book, you're more of a neuropsychologist because I actually work with an Amen Clinic in Dallas on several patient because of the SPECT CT that you do and one of the things that I noticed is that you can tell a lot by this scan about a person in every different demeanor you can possibly think of so it's been absolutely amazing to have that technology on hand at The Amen Clinic. Do you think that our daily behaviors and not necessarily what we do or what we drink but our daily ants. Do our daily ants, automatic negative thoughts and behaviors correlate with some actual brain damage or abnormalities that you see on the SPECT CT at your clinics?

Dr. Daniel G. Amen, M.D.

Yes, actually I did a study on negative thinking and negative thinking drops brain function in your frontal lobes. So the more negative you are, the worse your decisions are going to make. Now, mind you, some anxiety, is important, people who have low levels of anxiety go to jail because they make bad decisions. So you need a little bit, too much is obviously a problem but when I had, when we did this study, we just saw the drop in the frontal lobes and the cerebellum meaning people are less likely to be coordinated. I just got to see Michael Porter Jr yesterday. He's a forward for The Denver Nuggets and we talked about, when you think you're gonna miss the shot, you're gonna miss the shot because you're gonna be a little bit less coordinated. So developing that mindset, that mental toughness is so important. I have a mnemonic, I think people will like called bright minds, it's really how to do integrative medicine for psychiatry and for example, B is for blood flow.

So let me, I'll quickly go through it and then I'll go, well, what's the hack to do? So low blood flow is the number one brain imaging predictor of Alzheimer's disease and anything that lowers blood flow damages your brain. Caffeine, nicotine, being overweight, marijuana, alcohol, hypertension, any form of heart disease, being sedentary. The one thing you can do is walk like you're light, wherever you go, just walk, like you're light and that will be helpful and if there beets on the menu, eat them because beets increase blood flow. Retirement and aging is the R for bright minds, learn something new. Don't, you know, as physicians we've been learning for a long time, but pick up something else whether it's a language or an instrument or a game, I particularly think table tennis is the best brain game. I is inflammation, floss your teeth. Gum disease is a major cause of inflammation and then take an omega-3 fatty acid every day. G is genetics but what I tell my patients genes aren't a death sentence, they go, oh, I'm overweight





because it's in my family and it's like, no, you're overweight because you have bad habits. I have obesity running in my genes, in my family but I'm not. I have to work harder than most people but genes tell you what you need to prevent. For the most part, H is head trauma, major cause of psychiatric problems that nobody knows about 'cause nobody looks, protect your head. T is toxins. Take saunas whenever you can. There's actually a study in "JAMA Psychiatry" showing one infrared sauna had antidepressant effects. M is mental health, kill the ants. The second I is immunity and infections. You should know and optimize your vitamin D level. N is neuro hormone disorders, I don't know if you've seen, I've seen this rash of low testosterone in teenagers and young men and I think it's all the toxins they put on their body. So I, we have an app or I, it's not mine, Think Dirty, I love that app where you can scan all of your personal products and it'll tell you on a scale of one to 10, how quickly they're killing you. And then D is diabetes. I published three studies as your weight goes up, the size and function of your brain goes down, work to get to a healthy BMI and then S is sleep in um, seven, eight hours and the scans will actually tell you if you have sleep apnea 'cause it looks like early Alzheimer's disease.

Dr. Cheng Ruan, M.D.

Yeah, sleep is just so integral piece, you know? Well, all those are are very important. So, I think that there's a big disconnect in I think between the physicians and just brain health in general and self care in general. Sort of this mentality. I think that that doctors tend to have the heroes mentality which means that they're always supposed to say yes and you said earlier than no can potentially set you free. And I think this mentality is pretty rampant amongst people who really are just want to please people, we wanna be able to help people but how do you start saying no to things that aren't essential to yourself? How do you start doing that?

Dr. Daniel G. Amen, M.D.

I have my patients practice in front of the mirror saying I have to think about it. So I treat a lot of ADD patients and they're, many of them are people pleaser and they say yes without processing the cost and it's so essential. Now, if you know you're not gonna do it say no but if somebody's pushing you to do something and you're anxious about it or it doesn't fit, go, I have to think about it and then ask yourself, well, does it fit? Does it fit with the goals you have for your life? And I talked about the one page strategic plan from "Scaling Up." Well, one of the things I've been doing with my patients and if you asked me, so why, why do you think you've been successful? Since 1986, I've done every year an exercise I call the one page mirror. On one piece of paper, I write down what I want. My relationships, my wife, my children, my family, my friends, what do I want? My work, what do I want? I'm pretty clear, I wanna disrupt psychiatry and create something brand new. My money, my physical, emotional and spiritual health and so for example, with my wife, I want a kind caring, loving, supportive, passionate relationship, always want that, don't always feel like that. Hermie will show up with rude comments and I'm like, you





need to go away. Does it fit? And so when someone asks me to do something, I think of what I want and I'm like, well, does it fit? And the answer is no a lot and I'm like, you know, I'm so sorry, I'm over-scheduled I just can't do that. Now, when you asked me to do this, I'm like, well, does it fit? Well, we have a friendship and you are talking to other physicians and I'm like yeah, that'll fit but a lot of things, you know I probably say no 19 times out of 20 because there's only so much energy and if I'm not happy, I'm not as effective as I can be.

Dr. Cheng Ruan, M.D.

So that's such a powerful statement right there. First of all, thank you for saying yes to this, I really appreciate it and so do all the listeners as well. I think another topic I kind of wanna hit on is the stigma between mental health issues, brain health issues, let's call it that and physical issues and that most doctors don't want to seek help or are fearing seeking for fear of evaluation and because of employment and because of licensing, what do you think we can do about that?

Dr. Daniel G. Amen, M.D.

Well, we have to change the paradigm. As I said earlier, I hate the term mental illness. It shames people, it's stigmatizing and it's wrong. In 1979 when I decided to be a psychiatrist, I told my dad and he asked me why I didn't wanna be a real doctor. Why I wanted to be a nut doctor and hang out with nuts all day long. And you know, my dad would never have gotten father of the year award but that's what a lot of people in society think that if you get help you're weak and I tell people, no, no, no, it's this smart person that asks for help, it's not the weak person. The person who raised their hand in class was not the dumb person, the dumb person was lost.

This is the person who wants to do well, who wants to be their best but we need to end the term mental illness, call these things what they really are, brain health issues and when you're gone for help, you're not going to help because something's wrong, it's 'cause you wanna be better and I want a better brain and who doesn't want that? I've been blessed to see some really wonderful people like Miley Cyrus and Justin Bieber and like many celebrities, Justin would do what I asked him to do sometimes but most of the time not and then one day he got it. He walked into my office and he said, my brain is an organ like my heart is an organ. If you told me I had heart problems, I'd do everything you said so I'm gonna do everything you say. And then over months he got dramatically better. So let's not go to get depression treated, let's go to get my brain optimized and in the process, my depression will be better.

Dr. Cheng Ruan, M.D.

That's the paradigm shift there. Let's go to get my brain treated, my brain looked at and take away that exact paradigm and I think that's so important. Physician suicide is on the rise, we know that depression is on the rise So this is something that we 'cause most people in the





summit are really looking to change some things up. It is all the physician automation upgrade summit for a reason because I think it needs to be, they feel like something that needs to be automated to allow them to have the margin for themselves and for the healing process and for relationships. And I think that we're in this world, a really crazy world where now there's like social media censoring of physicians talking about different topics, there's the cancel culture that's going on and there's a lot of fear that really drives into a physician's mind, especially after speaking with my colleagues and I think that triggers ants, triggers negative thoughts to occur in a sort of way and that really takes away the energy and takes what it depletes what we are trying to do as individuals, it takes the individuality and so I think that this is such an important time to talk about brain health. So let me ask you, are there things that doctors can do right now, like immediately within the next 24 hours, other than the couple of techniques that you mentioned to help with the brain? Whether it's supplements or specific foods other than beets, that can be useful?

Dr. Daniel G. Amen, M.D.

Well, I say brain health is three things, brain envy, you got to care about it. Freud was wrong, penis envy is not the cause of anybody's problem, I haven't seen it in 40 years. You start, you need to care about the three pounds of fat between your ears. So I say it's the only organ whose size matters and then avoid things that hurt their brain and do things that help their brains. So you just have to know the list and the tiny habit I worked with BJ Fogg, a Stanford professor for six months on how people change and he's like, they have to develop these, tiny habits or micro habits and the one we ended up coming up with is just ask yourself this question, is this good for my brain or bad for it? And if you can answer it with information and love, you're gonna start doing the right thing. And yes, there are certain supplements.

I think everybody should take a multiple vitamin because we don't have balanced diets for the most part. Everyone should take omega-3 fatty acid, know your vitamin D level and optimize it. We're in a fucking pandemic so I like to keep my patients somewhere between 50 and 90 and I'm a huge fan of saffron. There are 24 randomized control trials showing that 30 milligrams of saffron is as effective as Prozac, Lexapro, Zoloft, to Imipramine but without side effects. In fact, the problem with antidepressants are the sexual side effects. That's pro sexual and pro memory. So we make something I love called happy saffron and 'cause I followed the research and I'm like mood, sex and memory, okay, I'm taking it.

Dr. Cheng Ruan, M.D.

Happy saffron, I love that. So, I think that whenever we talk about taking supplements and doing things for ourselves, there is another category that I really wanna talk about is what do you think the role of movement, activity and exercises is to reduce ?





Dr. Daniel G. Amen, M.D.

Well, head to head against Zoloft, exercise was found to be equally effective at 12 weeks. At 10 months, it was more effective plus at 10 months, what do you want? You wanna be dependent on a medication or do you want to be cuter? 'Cause Zoloft is not making you cuter but walking 45 minutes four times a week, walk like you're light has antidepressant effect and you've lost weight. So I think movement is essential and one of the things the imaging work has taught me is coordination exercises are more essential because the cerebellum in the back bottom part of the brain has half the brain's neurons and we know the cerebellum's involved in coordination but it's also involved in focus, in organization, in planning, in thought coordination. It's low in people who have ADD, it's low and people with autism and so coordination exercise can be so helpful.

Dr. Cheng Ruan, M.D.

So that's why I guess you were saying you like ping pong or table tennis earlier, right?

Dr. Daniel G. Amen, M.D.

People who play racket sports live longer than everybody else. So football, less long, football, less long but table tennis, squash, not handball but racketball, badminton live longer than everybody else and I think it's the coordination piece to it.

Dr. Cheng Ruan, M.D.

That was completely unexpected. I was thinking more like an Olympic runner or a sprinter or something like that.

Dr. Daniel G. Amen, M.D.

No, not at all. I mean, swimmers were second but racket players were number one.

Dr. Cheng Ruan, M.D.

So, we're thinking that has to do with coordination, developing the cerebellum and then keeping that active as well. All right so I learned something here. Great, I got to pick up my tennis racket again. So, let's talk about discipline for a second. You kind of touched on it earlier but I wanna dive into it. I think discipline is something that we need in every professional, especially as physicians, especially as business leaders and physicians and so what do you think are the the main inhibitions of someone to become a more disciplined person?

Dr. Daniel G. Amen, M.D.

Well, I think it's developing these tiny habits. Is this good for my brain or bad for it? It's, one of the business things I do that I learned from "Scaling Up" that is so helpful is we have a huddle every morning with I have two of them 'cause I also run the marketing team for Amen Clinics or





supervise it is I have an executive team huddle and I have a marketing huddle. So I spend and while I'm doing those two huddles, it's about 40 minutes, I'm walking because I always love to multitask in a good way. Plus if you walk, you get you boost serotonin in your brain and you're more flexible and I wanna be flexible on the huddles and it's basically what did I do yesterday based on our goals, what am I doing today? Where am I stuck? And I think you can just have a five minute huddle with yourself every morning. Start with today is going to be a great day, get your mindset right and then go, okay, what did I do yesterday? What am I gonna do today? All fitting my one-page miracle.

Dr. Cheng Ruan, M.D.

Yeah, I'm totally gonna do walking huddles now, I do a lot of them but we're usually sitting.

Dr. Daniel G. Amen, M.D.

Yeah, I mean, you know what your team looks like. I mean, Zoom is causing obesity because you're just sitting so long. It's like, no, no, no, you guys know what you look like, it's like, let's go and when I have a hard conversation with one of my people that report to me, I often will take them for a walk because after 10 minutes, they're going to be more receptive, especially if they're the persistent brain type and a lot of physicians are the persistent brain type, based on our imaging work, I came up with 16 different brain types and too many physicians, the first word out of their mouth is no, they tend to be argumentative a little bit oppositional, things don't go their way, they get upset, they can hold grudges and so a little bit of exercise just helps them be more flexible.

Dr. Cheng Ruan, M.D.

So you're saying there's different categories. Is that based on what? Like behavioral patterns?

Dr. Daniel G. Amen, M.D.

Based on the imaging. So it's basically five and it's not SPECT CT, it's just SPECT. SPECT CT is different, it's where you actually get a CT scan as well but that's more radiation but so we have the balanced type where their brain is healthy, this spontaneous type, where they have sleepy frontal lobes, so that's our ADD group. The persistent type, their frontal lobes work too hard, worried, rigid, inflexible. The sensitive type, their limbic system is active and the cautious type where the fear centers are working too hard and then from six to 16, they're combinations of two, three, four and five.

Dr. Cheng Ruan, M.D.

Wow so it's like predictive, you can kind of see a SPECT and categorize people in one of the categories and you kind of walk in and know exactly what to expect.





Dr. Daniel G. Amen, M.D.

Oh yeah. When I met my wife and I really liked her and two and a half weeks later, I'm like, hey, you haven't seen the clinic. Don't you wanna come see the clinic? And I scanned her because I'm like, you need to know what you're getting into.

Dr. Cheng Ruan, M.D.

Oh, that's brilliant. So and it's so fascinating that this is a physical scan of the brain and then you have the categories of personality types or however you call them. And as you're talking about different types, I think I have subconsciously categorized in a very familiar category within our patients as well. Just because we spend so much time with them, we do a lot of brain health stuff as well. And so the fact that you can actually see this really validates someone's personality, their drive, their genetic makeup and so, do need to tell your patients that hey, this is your type of brain, this is what it looks like or do you just kind of keep to yourself?

Dr. Daniel G. Amen, M.D.

No but we never say it in a shaming way. We always go, you tend to be this based on what we see and if it serves you, if it serves you like our spontaneous people, they're good salespeople and they're often very creative and you know, many actors are that way, they just talk to the IRS too much 'cause they don't do their taxes and they tend to be late for appointments and that's why they don't have shaming names. I used to call it impulsive, compulsive, sad and anxious and I'm like, no they're strengths for each of the types and you probably want your neurosurgeon to be persistent, you want him to count the sponges that went into your skull and did they come out of your skull?

Dr. Cheng Ruan, M.D.

Right, right. And so it's like, okay, well here's your type but we can do something about it but here's your strengths as well so let's celebrate what you got is that right?

Dr. Daniel G. Amen, M.D.

Right and people, we have a questionnaire that has been taken by three million people called our brain health assessment and based on how you answer the questions, it will give you your type and also a brain health score. So brainhealthassessment.com and you can give it to all of your patients, it's free and it we'll tell you based on your type, these are the supplements that can help but here are the behavioral exercises that can help as well.





Dr. Cheng Ruan, M.D.

Oh wow, so that's brilliant. Do you think that you're able to look at someone's brain type and see why perhaps have fights or conflicts or miscommunications with another brain type? Maybe like a husband and wife or something like that, is that, is that predictable?

Dr. Daniel G. Amen, M.D.

Well it's, we did this study called the couples from hell study, it's couples who failed marital therapy and still wanted to be together and we scanned 500 of them and it was so helpful. And I got the idea for the study from this one couple I saw. So right after I started doing imaging, I did a lot of marital therapy and really loved it but this couple, I was completely failing at and this woman had a PhD in grudge holding. I mean, she just beat things to death and one day, I didn't say it but I thought I'm like, she's going to beat this into the afterlife. I mean, on and on, over and over and she's married to a guy called the sniper because he was always late to his appointments and he would say the most hurtful things like he had no judgment and one day I woke up and I was taking a shower and I'm like, these people are on my schedule and my stomach started to hurt because I hate being ineffective, is the one thing I've learned about me, I hate it. I want to help and I'm like, I'm gonna tell them to get divorced today.

But growing up Roman Catholic, that's like a really bad thing and the Catholic voice visited me that day and started screaming at me because you're not a good enough therapist, you're gonna damn their eternal souls to hell and I just started looking at the water faucet, like how much therapy is this gonna take to get over? And so I got out of the shower, called my friend who owned the imaging center at the time and I'm like, will you give me two scans for the price of one? Because I was always negotiated for my patients. And he's like, why? I'm like Jack, I have this couple and I have no idea what to do for them and I'm failing miserably and it's breaking my heart and he's like, that's so interesting.

He said, I've been married twice, I can't figure it out. Maybe we could do a business and call it brainmatch.com and so she had the hottest cingulate gyrus, it's the gear shifter in the frontal lobe and he had sleepy frontal lobes and I'm like, he has ADD, she has OCD personality disorder, put her on, Prozac him on Ritalin, told them I didn't wanna see him for a month and when they came back, they were holding each other's hand. She stopped looping and he started paying attention. And how do you know, unless you look right? I mean, it's easy to come up with theory but most of the psychological theories have no neuroscience to them, at least we're trying to add a little bit of neuroscience.





Dr. Cheng Ruan, M.D.

Yeah once again, something physically tangible from behavior so that we have this thing that we can mold and now I understand why you hate the term mental illness because you can physically see some things, the word mental means that I may not be able to do anything about it but at least do about it and that's the most powerful statement that I think we can, we as physicians can really think about our own brain health, our own automatic negative thoughts, our ants, our ANTs and then we had to develop our own anteaters, like you said. And so I, you know the, I'm most curious about this point is how long does it take? I think as physicians and as me, myself I always, I always wanted the things to happen pretty quick. How long does it take to get to where I want to be? How long does it take you and your patients to get to where they truly want to be?

Dr. Daniel G. Amen, M.D.

Depends on how serious they are. So for example, I saw we're doing a series on Instagram called scan my brain and we've done like some really special people like Jennie Garth, the pretty actress from 90210, and AnnaLynne McCord, we just did Michael Porter Jr, Jay Shetty who's this young internet phenom and my friend, Karianna Nava from Dancing With The Stars. and she was a mess two months ago but she just did everything I asked her to do and I love that. I'm like, you're gonna get better and she did. I mean, we test people, we do something called total brain. It's a computerized neuropsych assessment, we had her in May and we just did her again, it's just dramatically better because she doesn't believe every stupid thing and it's not, you have these symptoms take this drug, that is a flawed model. Well, you know that right? Texas Center for Lifestyle Medicine, it's like medicines can be super helpful but it's not the first and only thing we think about. She doesn't believe every stupid and the ants I'm like, you need to write down a hundred of these bad thoughts and she had bad thoughts and we need to do the work and too often people expect to feel better tomorrow and that's like, say you're 50 pounds overweight on Monday, you have a salad and you expect to be trim on Friday, that's insane, that's like stupid that if you're struggling because you've had a lifetime of bad mental habits, it's gonna take a little time but if you put in the work, you can feel better fast.

Dr. Cheng Ruan, M.D.

Yeah, it's all about putting in the work and we see it with our patients too. We have a mind body medicine practitioner in our facility, Jenny and the people who go through that process with her, that coaching, transformed significantly faster because there is a seriousness to what they truly want to accomplish and the minute they could pierce it, they're like oh, that wasn't so bad, it only took a couple months but I feel a lot better than where I am and that was something, that's the most rewarding thing in clinical practice that I can see and I'm sure you see the same thing.





Dr. Daniel G. Amen, M.D.

Yeah and if they're not getting better and they're putting in the work, something else is going on, they have Lyme disease or they had COVID. COVID impacts the brain in a negative way, it's not a good thing for the brain or they have heavy metal toxicity or they're living in a mold filled home. It's like, we have to look at all of those bright minds risk factors and go, what am I missing? But first they have to, I mean, obviously with physicians and you know, one of the reasons for burnout is the decreased time with patients because of reimbursement patterns and you're just not happy seeing 40 or 50 people a day. There's no happiness, 'cause there's no bonding and guess what gets people well, bonding between physicians and their patients. Your patients need to know you care but you can't do that if you're starting your script three minutes into their appointment and I've been so disappointed seeing doctors 'cause you know as soon as they walk in, they're thinking about walking out, which means they don't see me and if they don't see me, why am I gonna do what they said?

Dr. Cheng Ruan, M.D.

Wait, you know, it's interesting 'cause we got trained this way, that's what residency's kind of taught us. I went through residency in 2009 to 2012 and a lot of people in my generation, I'm 38 so a lot of people in my generation have that demeanor of getting to the next patient, finishing your day. Here's my day with 35 patients. Here's my inpatient list, here's my outpatient list. I went to internal medicine training and then you're taught that if you finish early, you're a good resident. And I just think that's very wrong because you bypass so many fantastic and beautiful people, that there's no joy in that type of practice of medicine.

Dr. Daniel G. Amen, M.D.

Well, I think that's why doctors who do concierge medicine have less burnout because they take more time and what do relationships require, two things, time, actual, physical time and listening and so many physicians are terrible at that. I teach all of my parents active listening. You wanna have a better relationship with your child? Spend 20 minutes a day with them do something that they wanna to do and keep your mouth shut. Be really good at listening. That is like money in the emotional bank for your children. If you have rebellious teenagers, it's often because you're not bonded to them. Bonding is just critical and if you have rebellious patients, it's because they're not bonded to you and it's hard to bond with 35 or 40 people a day. I mean, that's hard, I mean, as a physician business leader, if you can't do it 'cause we see 8,500 patient hours a month, I can't do it but I have a staff that does it right. Going back to KCP kind, competent passion, hire the right people and then don't make them see 35 patients a day.





Dr. Cheng Ruan, M.D.

Exactly and that's exactly right. If you can't see people very long have staff that do it, that's why it's so important. 2021 you have new insurance reimbursement guidelines for health coaches, for example. Health coaches, I can't imagine doing a clinical practice without health coaches It doesn't baffles my mind, I would just be very angry person because the health coaches really drive so much connection, they give so much information. Last week, my health coach pointed out something that alerted me that this patient probably should be in the hospital. We actually caught an aneurysm right before rupture so that was quick. Without health coaches, I don't know what would have happened to our patient. So there's so much more to the engineering and medicine, especially going from 2021 forward that that we can automate using technology using and hiring different people that like you said are not assholes.

And there's a whole taxonomy of professionals now like health coaches that are actually trained not to be assholes which is a very good thing that we want to incorporate into clinical practice. So, I think that relationship is the key and providing patients with certainty, with significance, with connection, and then with a purpose. So those are the four things that think make clinical practice very addictive and with the average time of a primary care patient, primary care doctor to spend with a patient is seven and a half minutes in the United States without any additional support staff nurturing that relationship, it's just not possible and I think that's what's wrong medicine. That's why we fire from the hip with the script and that's how we were trained and that paradigm needs to shift a lot.

Dr. Daniel G. Amen, M.D.

That's it. It's and that's what happened in the early nineties that when managed care took over medicine, when doctors stopped owning their practices and doctors became beholden to insurance companies where insurance companies are not about health, they're about quarterly profits, I mean, you just have to like own it. They're not about health, it's about quarterly profit and that's not what's good for patients and in 1992, I had CHAMPUS, I guess it's now Tri-Care denied a stay like a whole stay for a patient that was suicidal and I couldn't let her out of the hospital 'cause I was worried she would shoot herself and when they denied it, I'm like, I'm done with you people, this is not why I became a doctor and it was the best decision I made. But you know, if you don't take insurance, you have to be so good that people wanna come see you but I know you take insurance and you've figured it out and God bless you for it but that's when medicine changed and burnout skyrocketed because all of a sudden they're not working in the best interest of their patients and that makes you sad.





Dr. Cheng Ruan, M.D.

It is. In the residencies were trained under usually university programs, I trained in New York Presbyterian in Queens. So the doctors there aren't necessarily worried about insurance reimbursement, they just get a salary and they kind to go home, but all of us are trained in that environment and there's no training for business and revenue cycle and all this stuff within the insurance side and that's slowly changing. Actually at the University of Texas there's actually a whole court on the business of medicine now actually, one of the, the lecturer is actually part of this summit as well. So I think we're starting to shift the paradigm a little bit, but we're no where close to where we need to be so but we're, I think we're getting there on the insurance side.

Dr. Daniel G. Amen, M.D.

Well, you know, you're only 38, I was sitting here thinking, I'm just so excited for you. You're doing so many things right that the next 20 or 30 years, you're gonna be involved in changing medicine in a healthy way and I'm just happy to be helpful.

Dr. Cheng Ruan, M.D.

I'm honored for you to say that. So thank you so much. So in the interest of time, we've been talking for a good hour now but we're gonna close it off really quickly and I ask all my guests this. What have you learned recently that you wish you knew 20 years ago?

Dr. Daniel G. Amen, M.D.

Recently, um. I was on a podcast a couple of weeks ago and they said, what's the one piece of advice is the best piece you've ever gotten? And I love it so much. It's argue with reality, welcome to hell. And you know, we're just coming out of a, well I don't know that we're coming out of a pandemic but we're in a pandemic and it's humans have survived because of our ability to adapt and I think too many people are like, they're focused on what they hate, whether it's masks or vaccinations or government intervention or the political environment and they're not focused on what they can do and that'll just help decrease burnout so much and I prayed the serenity prayer thousands of times since the pandemic started, God grant me the serenity to accept the things I cannot change, we're in the middle of a pandemic, the courage to change the things I can. Okay, how are we gonna do tele-health better? How are we gonna reach out to the people who need us? And the wisdom to know the difference. So it's can I intervene here or do I need to let that go? I'm gonna do something a little bit on what I call mad, mask anxiety disorder and it's like if it's mandated, there's nothing you're gonna do to change that. Obviously, I mean, you can lobby and do what you can do but then you need to just let it go.





Dr. Cheng Ruan, M.D.

Right, right. And so on the physician side, and this, I'm so glad you brought that up and that's a great point. Here's what I hear. So, I'm part of a very large hospital system here where I get access to the critical care doctors and the nurses and the who's been vaccinated, who's not vaccinated? How many COVID beds do we have? How many ventilators do we have? So a daily list that comes so I know where to send our patients. We see about 15 to 20 COVID patients per day, by the way, so that's actually quite a bit. And so and I hear something that really hurt me that I kind of liked your viewpoint on is that all of these critical, a lot of these critical care doctors and this they're like, I am so tired of treating this patient because this patient chose not to get a vaccine. And to me, that was something, we as physicians, we care for our patients but to create resentment in, within a patient, even subconsciously just seems wrong to me and it didn't really sit well with me. What do you think about that?

Dr. Daniel G. Amen, M.D.

So that's probably the persistent brain type. In my new book, "Your Brain Is Always Listening," it's the judgmental dragon. The world is black or white and if they're not my way then I think it's not helpful that we have a choice in this country be vaccinated or don't and if you don't get vaccinated, you're at higher risk but you have that choice. I think our job is not to judge our patients, our job is to serve them and judge judgmental dragons increase burnout because you're angry a lot and I love forgiveness. I mean that provider can't change that person's mindset, that takes a while and that takes bonding, it takes trust and when I talk to my patients, I'm like, I think it's a good idea for you to get vaccinated because the vaccine takes COVID from a dirty bomb that can affect every system in your body to a cold, basically that's my viewpoint but if my patients don't get vaccinated, I don't shame them, it's not my decision. Remember informed consent? We learned this first year of medical school. It's not my job to tell you what to do, that's not my job. My job is to do a good assessment and then to give you options, it's your job to decide and then I support it as best I can.

Dr. Cheng Ruan, M.D.

Absolutely, what a great way to end this, I love that. Thank you very much for coming on, taking the time out of your really busy schedule and your walk huddles and I'll totally incorporate that now. So we have links to all your books that you've written. "Your Brain Is Always Listening" is the most recent one that I've read and it is just a fabulous book and then I believe you have one coming out right? In 2022?

Dr. Daniel G. Amen, M.D.

I do, it's called "You Happier; The Seven Neuroscience Secrets Of Feeling Good Based On Your Brain Type."





Dr. Cheng Ruan, M.D.

Great, I can't wait for that one. So wonderful. Thanks for being on, I really appreciate it. Have a good one.

Dr. Daniel G. Amen, M.D.

All right, take care.

