

AJR - Anoop Kumar - Transcript

0:00:01 - Annncr

Julie Ryan, noted psychic and medical intuitive, is ready to answer your personal questions, even those you never knew you could ask. For more than 25 years, as she developed and refined her intuitive skills, Julie used her knowledge as a successful inventor and businesswoman to help others. Now she wants to help you to grow, heal and get the answers you've been longing to hear. Do you have a question for someone who's transitioned? Do you have a medical issue? What about your pet's health or behavior? Perhaps you have a loved one who's close to death and you'd like to know what's happening? Are you on the path to fulfill your life's purpose, no matter where you are in the world? Take a journey to the other side and ask Julie Ryan.

0:00:43 - Julie

Hi everybody, welcome to the Ask Julie Ryan show. It's where we blend spirituality and practicality to help you live a life of purpose and joy. Dr Anoop Kumar is with us today. After experiencing an NDE in medical school, Dr Kumar began to integrate consciousness with medical knowledge. He's board certified in emergency medicine and holds a master's degree in management with a focus in health leadership. Since my work combines spirituality and practicality, especially when it comes to medical issues, you can imagine I have lots of questions for him. Please remember to subscribe, leave a comment and share this episode with your family and friends. Now let's go talk with Dr Kumar Anoop. Welcome to the show. I'm so thrilled to have you join us today. Thanks for making the time.

0:01:39 - Anoop

Sure Happy to be here, Julie.

0:01:51 - Julie

Julie, you had an NDE. I want to hear all about it, and I want to hear about what effect it had on healing in your mind, how to heal as a physician and working with your patients. I'm interested to hear that whole story, so please share it with us.

0:02:04 - Anoop

So, in terms of how it influenced healing, I think it really taught me what healing means. That's the biggest thing, I think before. If you had asked me what it was, I'm not sure what I would have said. I'm not sure that I even really thought about healing, necessarily before that. This happened in medical school, probably at the end of my third year, right around then, and you know we talked about in allopathic medicine, we talked about wound healing. We talked about maybe like scars or no scars from wound healing, but healing is not an everyday word in medicine.

So I think as a result of this experience, I saw that healing is about recognizing our wholeness and I saw what wholeness means what we are inclusive of and yet also beyond the body, what we are inclusive of, yet beyond beyond the body, what we are inclusive of, yet beyond our mind, what we are inclusive of, yet beyond a lifetime. You know what we are inclusive of and beyond our dualities of mind and matter, or spirit and matter, or here and then, or you know, uh, here and later, now and then. You know all these these splits that we come up with. I think if we believe them too much, they can make us feel not whole, because it's like a partition within ourselves, and I saw that healing is really going beyond these ideas and constructs and even these, let's say these energetic partitions within us, to the depth of who we are, and that the main way it influences my work in terms of the work in a hospital would be just in the way I see myself and the way I see my patients.

When I see my patients and I'm an emergency doctor so we see the you know, the heart attacks and the strokes and the trauma and all of that, the people who are suicidal, and all of this I see a person who's whole, even if they don't see it, even if they see partition or disease or sickness. It's not that I disregard that, it's not that I can't see what they're seeing, but I also see that they are absolutely 100% whole in this moment, even as they are. It's usually that we haven't been taught to recognize that, or rather that we have been taught to forget that over time. Why do you think that is? Why have we been taught to recognize that, or rather that we have been taught to forget that over time?

0:04:46 - Julie

Why do you think that is? Why have we been taught to forget that?

0:04:51 - Anoop

You can look at a couple different ways. On one sense, you could just say that that's just the state of this planet at this time. In the bigger picture, the place that Earth is moving through, just as each of us is moving through our lifetime. We're at a particular stage of our journey in this lifetime. Well, earth as a planet also has a stage and this is that stage that when people are born here, you tend to forget early on, by virtue of being born, the greater expanse of who we are, and we kind of get those blinders on and just look immediate and write what's in front of us. Um, that's part of it, but part of it is also that that's our educational system. We teach people this right.

I always say that we, when our parents would, when we teach our kids, this is your nose, this is your mouth, this is your hand, this is your, but we don't say this is space, this is wonder, this is curiosity, this is being settled. Right. So what do we do? We're basically teaching our kids to identify strictly with what we call physical experience, which is basically shared perceptual experience, what you and I can agree on and see, smell, taste, touch here we generally call physical, and we basically teach our kids to dissociate out of that state of association and expansion into just what we call physical aspects. And then, you know, later on in life you have to start going, start looking for what we call spirituality or psychedelics, or meditation or any number of things to try to reassociate with our greater nature. So that's another answer. You know these answers happen on multiple levels and that it's also a power play on this planet.

You know, why is the education like that? If we see this? Why do we teach that there's a difference between mind and matter, or like between the physical and the spiritual? And then we have to go on this whole kind of wild goose chase and we have to figure out what mind body medicine is saying. What is the connection between the mind and body, what is the connection between matter and spirit? When we invented these divisions to begin with and I think people who have started to integrate this let's say mind and matter, or spirit and matter, or science and spirituality what they discover is power. They discover beauty, they discover peace, they discover power, they discover love, they discover knowledge, and so these are the things that make us powerful, that help us heal, and I think there is a power play going on where this knowledge is kept from people so that we can maintain the power structures that we do.

0:07:30 - Julie

Yeah, and follow the money right. Always. There's not a lot of money in. Follow what your intuition is telling you. Yeah, yeah, with that, back to what happened to you when you were in medical school with your near death experience. Tell us about that.

0:07:45 - Anoop

So that was in my parents' house. I was home for a break and I was sitting and reading and sitting just like this, like I am now. I was sitting at a desk and reading, and then it was as if an explosion went off all of a sudden, quite unexpectedly, and the room had fallen away, the body

had fallen away and there I was sitting in the sun, as I call it, which is a strange explanation, but here it is. So it's just a brilliant orangish blaze, let's say, of the nature of knowledge, light love of the nature of knowledge, light love, all the things that we usually hear.

And being immersed in this for some time period was just, it was everything, everything it could be. And then at some point, I was going to move through that, to whatever is next, and I could feel that everything was done, that there was no returning to this lifetime, this was a final step. If I took this next step and that was it and at this moment, being of light came forward and put this thought in the mind that this isn't fair, this wouldn't be fair and there was more work to do, and so that gave me pause, because of the truth and beauty in that statement, and that pause was. It was as if the rubber band snapped back when I stopped my progression and it pulled me back and everything kind of re-imploded. And then there I was, back in the room. You know, I saw my body sitting there. I saw everything, and everything now looked differently the nature of perception and identity and everything had changed.

0:09:34 - Julie

Did you have a medical thing, like, did you have an aneurysm or something? Did you have any kind of a medical symptom? Or it was just like a you know an experience in a different reality, what, what precipitated? It did anything, or it just all of a sudden?

0:09:53 - Anoop

happened. Well, in terms of what precipitated medically? No, nothing. But you could say that you know, I had always been restless in my life. You know, even in medical school I always felt like I had too much time and I always felt like there's something else, almost like this itch that you can't scratch. And I had been exposed to the philosophy of non-duality very early in my life. My family was heavily into that, so I'd been exploring that and learning about that and I'd been doing meditation intermittently and it always intrigued me. I always knew there was something more there. So there was a general dissatisfaction with what I was learning in school and with the standard societal conversation. So I feel like that came to a head. I didn't realize it was coming to a head, but I think in that moment I'd had enough. I was like now or never. And then it just lit a flame.

0:10:47 - Julie

It was like let's give you a little taste of this and help you on your journey. Did that experience help you Because you said this happened when you were in medical school Did it help you choose a residency of emergency medicine, or how did you get on that path? Was that a catalyst for you to go into that specialty?

0:11:10 - Anoop

Well, not consciously, not deliberately, but I do remember I don't know if this was before or after that, I don't have the time sequence down but I do remember in medical school coming down to the ER to admit a patient, to see a patient and admit them. This is when I was a student still, and when I got down to the ER it was full of light. That's the way I saw it. It was kind of transcendent and illuminated as I looked around and it didn't, I guess, like in a thought sense it didn't mean anything. I wasn't thinking about it, in fact I didn't even realize it. I don't think, you know, it's just a different kind of state. But I think somehow I think that was all linked that when it came time to choose a specialty, I chose emergency medicine. I didn't go back and think and think, oh yes, it was like that. But I do remember that feeling of illumination and so I think that led to me also choosing emergency medicine. And also the nature of the specialty, the kind of the breadth of it, and and feeling you, I feel like there's this.

There's this quote by Rudolf Virchow, who was a father of pathology many, many decades ago. He said paraphrasing is something like medicine is a social science and politics is medicine writ large, takes this medicine writ large? And I kind of felt like that. Emergency medicine is like

you know, we don't say no to anybody, you know we don't make appointments, we don't say you know, well, what's your insurance? Well, what time can you make it? Well, I'm open only till now. Like, emergency medicine is just a big yes and everybody and anybody is welcome at any time. You know, and, um, because of that, you see a lot of things that you wouldn't see if you had a choice. There are certain things we would say no to if we had a choice and you don't get to do that. And there is, there is a beauty in that. It is difficult to see, because you see what happens in our society, but there is a beauty in that and I think for me, ultimately, as difficult as that is, sometimes it does lead to my work and the work that I do.

0:13:34 - Julie

Well, and it gives you the opportunity to really be a healer and be that partition between life and death in a lot of instances where you've got a trauma coming in and you're able to act quickly to help that person live, way more so than any other specialty. Certainly, surgeons have opportunities to do that if something goes awry in the operating room or if they're a trauma surgeon and they're trying to, you know, solve somebody's artery while they're bleeding out or something. But I think, way more so in the emergency department you have the capability to really have an effect on somebody from a physical slash, medical standpoint, more so than other specialties. Would you agree with that?

0:14:26 - Anoop

standpoint, more so than other specialties. Would you agree with that? Yeah, I mean, it is emergency medicine. It's the only field with emergency in the name. So yeah, you can see them in their most intense time and that can allow a portal to open when it's an intense situation. That's true.

0:14:44 - Julie

Yeah, yeah, Back to when you had your NDE, you said you saw yourself sitting in an orange sun. And the interesting thing about that, Anoop, is I do this exercise and I teach it in my classes to my students called the walk to heaven, and it's just an exercise that we do with people who are very afraid to die, usually because their religious or cultural beliefs are such that they're afraid they may go burn for eternity in hell and all spirits go to heaven. I've heard that a bazillion times from spirit over my time in this woo-woo space. I call it in the spiritual space and in the walk to heaven we walk into the setting sun and it turns different colors of orange and we're walking through the desert into the setting sun and that's the portal to get to the. It reminds me of a wormhole that they talk about in astronomy.

You know the astrophysicists talk about. Wormholes are a real thing and we go in and that's where we go through to get to the other reality, which I call heaven. Lots of people call it different things, but I just refer to it as heaven. So that piqued my interest when you said you found yourself sitting in the orange sun. Yeah, as a child you say you were surrounded by teachings of Eastern philosophy. Tell us more about that and tell us how that has affected your medical practice.

0:16:30 - Anoop

So we were, our family was very much into the philosophy of non-duality, which essentially says that behind the multiplicity of the world, the cosmos, the universes, the multiplicity of the world, the cosmos, the universes, there is an underlying truth or an underlying reality, and, furthermore, this is our own deeper nature. So this is not an abstract truth, it's not something that's far and away, it's not somebody that you know gives us medals or hands out punishments or anything like that. This is our own deepest nature and therefore it is accessible to each and every one of us, regardless of anything else. This is simply our nature, and so this is the essence of it, and, of course, it goes through many different layers and interpretations and representations and examples and all that, but this is the essence of it, and so this was often talked about when I was growing up, in terms of mind and consciousness and who we

are, what our nature is. How does that relate with the world? How do we make sense of the world then, relative to this and that was always very interesting to me, because it was actually about me, right, as opposed to in school.

School, it's always about what does the other person think and what did xyz say? Like, can you repeat what they said and you know, go study that out there. But this was saying no, look at yourself, study yourself, and by knowing this you can know everything you want to know in the world as well. So it didn't reject anything. It actually brought everything, it valued everything and it actually placed the onus of attention where I thought it should be, which is like in the way we see the world and who we are, whereas in school the whole who we are part and the person themselves was like cut out, that's just bias and that's called bias in science, and so it's to be, it's a bad thing and what you have to do is study the world out there.

So I just said, well, felt like such an incomplete approach, whereas this approach of self-inquiry and understanding felt much more native and like home. So that was part of it and I also you know I was born here in in Washington DC, but my family moved back to India and I lived there for five years. So there was this integration of Eastern culture, western culture, this integration of, you know, living like living on a farm and you know, feet in the soil, being outside a lot, and then coming back and living in suburban Maryland and you know the concrete and that starkness was there. So you can see some of this contrast of East and West, eastern philosophy, western education, but these were all being reconciled and again this goes back to healing, reconciling these various partitions or aspects of who we are, acknowledging them, valuing them for what they represent and seeing the deeper truth that integrates them all.

0:19:33 - Julie

Yeah, well, the other thing, too, that came to mind for me was obviously you were being led because of what you're doing now and we'll talk more about that in a few minutes because of what you're doing now and we'll talk more about that in a few minutes but and what you're doing to really help people look at health a different way, and so isn't it interesting to look back at our lives and go, okay, that's what was going on there, and we can see a trajectory that perhaps we didn't choose. Certainly you didn't choose where you were living as a child and when you were growing up, but you can see now how it was laying the foundation and giving you the information that you were going to need in order to go forth and prosper. I don't even remember who says that, but I think it's from a Star Wars movie or something, something like that. Yeah, all right. So I got to ask you this, you know, as somebody who sees spirits.

We had Jeff O'Driscoll on the show, and he's a retired level one trauma center physician who he'd have patients come in and, let's say, they'd been in a car accident with their family and a couple of them survived and three or four of them didn't? Well, the spirits of the ones who didn't survive were in the ER bay with him, advising him. Along with other surgeons, he waited until he was retired to come out of the closet. He was afraid that he was going to get fired if he came out of the closet with that. Have you experienced that? Do you experience energies in there advising you when you're with a patient? Have you ever seen anything with your mind's eye that would be what we would call a spirit or another entity that isn't in physical form? The energy of the spirit? Tell us about that.

0:21:29 - Anoop

Well, to be honest, I think that happens for all of us. I think we don't really know where our thoughts come from. All we know is, hey, a thought has entered and I believe it's my thought, but it's not necessarily our thought. If you look at, the majority of all of our thoughts are similar to thoughts that are already circulating in the world. So I think that happens to everybody, especially in like in important situations, meaningful situations, perhaps life threatening situations, like in a hospital and an ER. I think this is happening all the time to all of us there. Some people recognize it more, so some people receive it more.

I certainly recognize, let's say, messages like that or intimations like that. To me it's not. It's not. I don't think it's anything that will get you fired or anything, because ultimately it's still the patient. It comes back to the patient and the patient's desires and their wishes and their values and their family's values, to the extent that they want their family involved.

So you know I am, I am there to guide them, to offer expert advice as an emergency physician and and as a human being, of of course, you know we have to remember that I'm trained in emergency medicine and all of us in the ER. We're offering our emergency medicine services, but we're human beings first right. So you know, what tone of voice do you use? How do you stand? You know, do you take their hand? You know what do you say? A lot of these things. That's not emergency medicine, that's human, that's human medicine, that's healing. And so in that sphere, all of us are free to use all of our faculties, as long as, ultimately, we bring that to the bedside, to the patient and say, hey, how do you feel about this? You know, what do you choose, what do you see?

0:23:25 - Julie

choose. What do you see? Well, and I think you bring up a really good point and I talk about this all the time that nobody heals anybody else. You got a patient that comes in with a big old laceration and you're stitching it up. You don't make that patient's skin grow back, they make their own skin grow back.

And you're helping them by helping facilitate them, heal themselves, them heal themselves, as do all medical providers and people like me who are working with people in energy healing and all the different modalities. And that's an interesting concept for people to try and wrap their heads around, because I think in this day and age where we go to the doctor and we get a medicine and it's going to make us better and then we move on and it's, you know, it's just the way that it works, but people are finding out that that's not necessarily so yeah, yeah, I think that's very true.

0:24:18 - Anoop

You know, we, basically everybody, has that intelligence, that intelligence that makes the heartbeat for decades on end, that makes the electricity flow, that makes the blood circulate, that knows how to heal. And you know, people can advise us, people can guide us. Ultimately, we do the work Not alone. You know with everyone, along with this intelligence, that is our own nature. You know with everyone, along with this intelligence, that is our own nature.

0:24:55 - Julie

But it's not a savior that comes to help somebody to heal. It is our own nature that heals, I agree. And people say, well, I just don't buy that whole energy medicine thing. I say, well, that's great. Whatever Believe, whatever you want, but you ever heard of an EKG or an EEG? What are they doing? They're measuring the energy of your heartbeat or of your brainwaves outside of your body and it stops them in their tracks and they say oh, how about an MRI? You know what's an MRI? Doing Same thing and they're going oh okay, I never thought of it that way before. You say people don't know what health is. What do you mean by that?

0:25:31 - Anoop

Well, just like I said, I didn't really know what it was before. It essentially means that health is wholeness. And once we dissociate in our childhood and once we kind of come down and lock ourselves down in this very physical-based view, and then we add on the idea that we can represent ourselves as a collection of Mr Potato Head parts right, protons, neutrons, electrons, those ball and stick models, you put the balls and sticks together and apparently you get Julie and Anoop right. That's, once you get into that kind of dissociated miseducation, that's what it is and frankly it's an insanity. I think it's an insanity that a living, breathing, intelligent life form

then comes to believe that you put a bunch of balls and sticks together and you get this. You know that. That's what it takes and that's our model of anatomy today.

You know, once you get into that kind of dissociated miseducation, you cannot know what health is. You know, blood pressure can be fine, your numbers can look fine, but that person will be searching for something. There will be something missing, because they're missing the deepest part of who they are and there will be a search for that. So in that sense, when we don't know who we are, we cannot really know what health is. We'll always have a limited experience and understanding of what health is, and that's when you have a system like we have now that's really based on popping pills, getting IV medications, doing surgical procedures, but there's no, there's very little deeper narrative of what health is and how to realize health within the healthcare system and even within public health it's very narrow. So that's what I mean by saying we don't know what health is and we have to go on this process of health discovery, this amazing deep process where we say you know, there is something Health cannot just be.

It's not just the cover of the magazine, the person with the six pack or the person in the yoga pants, with the yoga mat, driving the electric car and having a vegan smoothie. You know All great, nothing wrong with any of that. Enjoy all of that. I love those smoothies too. I have an electric car too, fine, but let's not think that that's what health is right. Those are steps to health. That is part of a path to realizing what health is, and it's really important that we kind of step outside the marketing of health to ask what wholeness, the experience of wholeness, is, and what are the steps that will actually take us there.

0:28:13 - Julie

Well and to your point. You talk about that health, well-being and, from our medical perspective, is. I love this line. I laughed when I heard it. I thought, oh, this is epic. And you say that well-being is cloaked in esoteric language. Say more about that.

0:28:38 - Anoop

If you can speak forever about that well-being. Being is just being. It's being who we are, it is our very existing right now is being simply existing. And I don't mean existing in the sense that I'm just barely existing. That's not what I mean. I mean think about the power of existence, think of all that exists, whether it's thought or feeling or emotion, or objects, or space and time, or hopes and dreams, ambitions just all of this exists. So think about how much power and presence, existence is what that represents. This is being. That's the fullness of being right.

And the thing is, when you try to describe something super simple, you can keep talking forever, as I often do. I can keep talking about this forever because you can never approach it, you can never reach there with words, right, so you keep describing it different angles and different ways until that mind kind of starts to see what's happening and kind of falls away. That's being the pure simplicity of existing, the fullness of existence. And then, well, is this process that we're on? What does it mean to be? Well? Well, it depends on the stage of our life. Wellness for an infant is different than for a toddler, is different than for a youth, is different than for later in life, is different than for an elder, because it has to do with meaning, it has to do with functionality of the body, it has to do with sharpness of the mind, and each one is different, right? I don't want to crawl around now at my age, but that would be quite well for somebody who's one year old, one and a half years old, right?

So I think this wellness is this process, which is where we talk about pneumocore at Health Revolution. Pneumocore is nutrition, movement, connection and rest, if you take the first two letters of each pneumocore, and that is the fundamental engine. Those four are the engines that drive human health and sustenance and human development, and that is where wellness comes from. How do I nullify well or how do I become well? It's by activating these engines

nutrition, movement, connection and rest. And that looks different at different ages, in different spans of life, but no matter which span it is, it is always these four engines. So that's how you put together wellness, which is this ongoing process with being, which is our essential nature, and always here, and so you can talk about it in so many ways, but that's the essence of well-being is understanding the process of change and transformation, along with the ever-present wholeness that's always here.

0:31:21 - Julie

Well said and you must be psychic or something, because that was my next question for you was the combination of nutrition, movement, connection and rest. Why is that system not taught in the medical schools? Was it taught since the beginning of time and we've lost it in recent years, like, say, maybe the last 100 or 150 years? What's going on with that? Is it just follow the money again? Is it all about the business model of the medical? And? Certainly, if I'm in a car accident, I want the ambulance to bring me to you, I want you to fix me. As far as much as you can, stitch me up, do whatever, call in a trauma surgeon, whatever's needed, but the fundamentals seem to be lacking.

0:32:17 - Anoop

Yeah, I think it is partially because of the money and because of the power. What I say is that allopathy, what I practice, emergency medicine and all of allopathy, is the true complementary medicine. Right now our understanding is backwards. We believe that yoga and Ayurveda and Chinese medicine, and you know, all of these are complementary medicine and we believe that allopathy is primary medicine. But it's actually the other way around allopathies to be used as and when needed for some period of time.

But allopathy can never replace what nutrition, movement, connection and rest can do. Right. It would be insane to think so. You can't. If, for a plant, you can't replace water, you can't replace sunlight, you can't replace soil, you can't replace the space for his roots, right, you can add on things, you can give supplements, right, to help that, but you can't replace them. Similarly, for a human being, you cannot replace nutrition of the mind and body, movement of our emotions and our thoughts, movement of our range of motion, movement of the full and body, movement of our emotions and our thoughts, movement of our range of motion, movement of the full breath and, of course, movement as exercise, connecting with others, with ourselves, with the planet, the love that is ever-present, with connection and rest. Resting while asleep, but knowing how to rest the mind even while awake these are the fundamentals of human development. There is no substitute.

So even when we go to allopathy, to the conventional healthcare system, that is supposed to be done as an add-on, as a complement to pneumocore, right? So yes, if you need to go to the ER, you should. I'm not saying not to you need to go to your doctor, you should. But you should also be doing pneumocore, activating these engines before your visit, during your visit and after your visit, whereas allopathy you use as and when needed. When this is not sufficient, then as and when needed, and the other one nutrition, movement, connection and rest has to continue. So that kind of reorganizing how we're thinking, undoing the marketing and realizing that wait a second. Allopathy is complementary medicine.

I have to do my part. Pneumocore is my part. That is what every human being needs and that is not something that the healthcare system is set up for, because it is a disease-based system, is based on. To get paid in health care, you have to have a diagnosis. What is diagnosis? It's a disease, it's identification of disease. That is what we specialize in is identification of disease and mitigation of disease.

So we cannot expect we, frankly, should not expect health from such a system. What we can expect is disease medication. Now we have to change that. I'm not saying we should be

satisfied. That's what healthcare reform is supposed to be about. It's supposed to be about asking deep questions. You know you cannot reform a system so long as you're just based on disease. So that is the responsibility before us.

And actually I'll go so far as to say that we don't have a health system, and I think this is something really important to understand. What we have is a healthcare system. So we care about health, but the system is about caring about health, but the system is not about health itself, because we don't know what health is. I know it may sound strange or may sound abstract, but I invite everybody to pause and consider just see you know all the experts in health care, public health. We don't know what health is because there is no deep education that answers this question.

What is health? What is the nature of health? If you're talking about health and wholeness, you have to talk about human potential, right? Because if we are whole, then obviously our capacity is much greater. That's human potential. So show me the curriculum in medical schools and in public health that spends sufficient time on human potential. You won't find it, and so it is naturally a disease-based system. Even the closest we come is prevention, but prevention is still about disease. It's about preventing disease. It's not about moving towards health, wholeness and human potential. So that is what we have to bring to the table those of us in healthcare, those of us who are not in healthcare. We need to develop the world's first true health system, health system at a global scale, and that's what we're working on at Health Revolution.

0:36:45 - Julie

So tell us about that and then we'll come back to the consciousness stuff, Because the work that you're doing is so extraordinary in my opinion, which is why I wanted to have you on today, so everybody could learn what you're up to. It's just beyond anything that I've read about. I mean, I've heard little snippets from others, but not at the scale where you are now and where you want to be. So please tell everybody. I think you've led up really nicely to why you founded this company, but tell us what you're doing.

0:37:21 - Anoop

The first part is this it's clearing out the cobwebs and saying what needs to be said. In fact, I would say this is the biggest part. When we talk about Numacor, nutrition, movement, connection and rest, it always begins with nutrition of the mind, and that's what this is, that's what conversation and dialogue is about nutrition of the mind. Nutrition of the mind is saying what is true. You know, I have. Everything I have said is something true about our health care system, about our society, about what is happening. That doesn't mean you should believe me. I'm not saying believe me, but I'm saying what I, what I'm. I'm saying this based on my experience 20 years seeing patients in the hospital and patients telling me hey, I'm doing this, I've tried this, but this isn't working. Why is this happening over and over again? Well, it's because of our superficial ideas about health that we are teaching and propagating and, yes, about the power and the power disparity. We have to say that. To put it very simply, we need to say that and we need to say that and we need to say that over and over and over everywhere in the boardroom, in the hospital, in our families, never to take down somebody, but to raise up the vision of what can be. If we don't say it, if we don't have the courage to say it, how can we expect things to get better? And the funny thing is that even people who benefit from the system being the way it is today, if they were in a crisis or their family was in a crisis, they too would want this right. So, again, we talked about the split that happens within people. Right, that is the healing that has to happen. So it's not that this whole industry is bad or this whole company is bad. It's not even that this whole person is bad. No, within each of us there's a little bit of this and a little bit of that, and that's the healing that needs to happen. And so that is why, saying this over and over and you used a really important word for us, julie you said scale.

At this scale, our goal is scale. There's so many people doing so many good things in the wellness space. What we need to do is bring everyone together, uplift everyone who's doing good work, who has their certifications, who is actually helping people, and say look, there is a rigorous philosophy that supports this, there is a science that supports this, there are results that support this. I've interviewed 30 to 40 people who have healed from conditions you're not supposed to heal from according to the textbooks. Right, so everything is there, but we need to bring this all together in a cohesive narrative and talk about that. So that's what I'm doing on podcasts is getting the word out about this.

The next step of that is creating a digital platform where we are going to actually deliver this content to different audiences at different levels of content, so that people can, when they hear about a diagnosis or when they have an experience they want to relate to. They can go to Health Revolution, they can go to the app, they can go to the content platform and they can see all the stories that affirm that this is possible, and they can learn about the science that talks about it, and they can even have resources. We have a Jumpstart course, a four-week course that activates nutrition, movement, connection and rest. That platform at scale is what we are building. That platform at scale is what we are building.

0:40:42 - Julie

So your platform is that going to just be for physicians and medical providers, or is that going to be for the average Joe and Susie Schmoe?

0:40:52 - Anoop

It's going to be everybody and there will be different kinds of content and different levels of conversation depending on the person and what they want to engage in. Right, you can think about, for example, somebody who's suffering from a condition. They'll be looking for a particular kind of content. Maybe you can look up something by diagnosis, for example. Right, you can hear about all the people who have healed from certain conditions. Then there might be doctors, for example, who are looking for a different perspective. There's content for that. There might be policymakers or educators who are looking for how do I arrange a curriculum around this, right? So we want to teach that also. So, depending on the kind of person, there will be content. That's at that level. Some people might want to go super deep.

So we talk about mind body flow theory, how the body is, the pattern of the mind and how can we look at diagnosis more deeply and understand it more deeply if we take that perspective instead of the atomic perspective of the human body.

And then, when you go beyond that in the deepest sense of health and wholeness, you know who am I, what is the nature of this world, and we get into what I call the three minds framework, in that sense, the deepest view of reality and who we are. All of these julie are asking are answering one question what is health right? What is health at the level of the atomic body, at the level of the diagnosis, at the level of the clinician, at the level of the policy maker, at the level of the person who loves wellness, at the level of somebody who's just maybe a little confused and they're looking for some inspiring content, at the level of the spiritual seeker? All of these are connected, everything is connected, and that's what we want to show. We want to show that health is so much more than what we have thought it to be.

0:42:36 - Julie

You just mentioned that the body, what'd you say? Patterns the mind or mimics the mind.

0:42:42 - Anoop

The body is the pattern of the mind.

0:42:44 - Julie

So say more about that.

0:42:45 - Anoop

That's an intriguing concept, so if you look at a river, we can see that the river kind of courses this way and that. But what is a river? Essentially it's water. It's a pattern of water. Ocean is a pattern of water. Right, a stream is a pattern. Essentially it's water. It's a pattern of water. Ocean is a pattern of water. Right, a stream is a pattern of water.

And similarly, what we say is that the body is a pattern of the mind. So as the mind is, so the body appears. A good example is ice. Right, ice looks like it's hard for rigid kind of body, like in that sense. But what is it? It is nothing but water in a particular pattern.

And if you want to change the icicle that's forming, if you try to intervene on it directly, you'll have to do surgery, right, you'll have to take off one part and put it somewhere else, et cetera. But if you want to change it constitutionally change the water, you change the water, you change the icicle constitutionally at a fundamental level, right? So allopathy tries to rearrange the icicle on the outside. Mind-body flow theory changes the water and therefore changes the icicle, changes the body. So these are different ways of doing it. It doesn't mean that doing it physically is bad. Sometimes you have to do that. If that's the knowledge base, if that's the only option, if things have reached that state, by all means we should do that.

Every plate, everything has its role, but right now the role of allopathy has been distorted. Um, it's been, it's, it's being used to do what it cannot do, right? It's like using a hammer to try to turn a screw in. And we're using this big, cumbersome hammer. We're trying to turn the screw in and, yeah, sometimes it works, but many times it doesn't. We say, well, you know, that's the science, that's all we know. Well, because we're not using it properly. It's supposed to be pneumocore first, and then look at it through mind-body flow theory. And if you can't find an answer, then yes, by all means, use the hammer.

0:44:47 - Julie

So that contextualization of healthcare is needed. Well, and you bring up a really good point too. It came to mind when you were talking about. I always say that our thoughts control our reality. What we think of controls us, and we have the option to change our perspective, because thoughts don't have a meaning when they come into our heads. We assign them a meaning. And you think about sucking on a slice of lemon. Well, you can't think about that without your salivary glands getting engaged and your mouth starting to water and you can almost taste it. And people say, well, I never thought of it that way, but that's your thought affecting the body.

0:45:29 - Anoop

That's exactly right. That's exactly right. And I always think it's funny when we hear about mind-body medicine and there are these intricate conversations on how the mind and body are related and we're trying to look for examples on how the mind and body are related. And we're trying to look for examples when is the mind and body related? I challenge someone to show me a time where the mind and body are not related. You know, like if you're happy, you'll see it on your face. Happiness is subjective, it's mind, um, the face facial expression we say is objective, it's physical.

There's your mind body connection. If you, you know they'll be slugging, their shoulders will be sagging. There's your mind-body connection. If you're excited, your pupils will dilate. There's your mind-body connection. I mean there is only mind-body connection because mind and body are not separate to begin with. This again is a result of our miseducation. Show miseducation. Show me the person, the scientist who has done the study and discovered the

line between the mind and body. They don't exist because there is no line. It's simply a matter of your perception. How deeply you see yourself is where you draw the line. But it doesn't exist independently of our perception. It is one continuous flow of experience and once we, once we reach that and see that, then all of a sudden our capacity opens up to interface with the mind-body apparatus much more deeply.

0:46:51 - Julie

Have you found and you may not encounter this because you're not with your patients that long. I mean, they're in your ER and then they're sent on wherever to the floor to surgery or sent home but have you come into patients where they're wanting to talk about what the emotional component is going on in their lives and you've seen a connection between that and whatever the symptoms are that they're showing up presenting? The symptoms are that they're showing up presenting. Have you, you have any? You have any examples you can share with us?

0:47:26 - Anoop

on that. I think it's almost every patient I mean literally, I think it's almost every patient is craving that connection and that depth. Now, if you only talk about that, it's not enough because they, you know, there is that validation of having the doctor and the medical science and all that. And that's what we're trained for and that's what I do in the ER is we bring that expertise to the table, to the situation, but they're always, I mean the whole hit. When you talk to somebody, initially it's all about like how they feel and how this has happened and why did it happen and when does it get worse, when is it not worse, when does it get better. It's all basically like their experience and that's often tied into emotion. And, aside from that, once you talk about the situation and you either make the diagnosis or you tell them what's going on, then there's always this space, for almost every person wants more in terms of conversation.

There was a time in my training actually when, on an elective, I chose to go into the ER and spend time with patients when I wasn't on duty. So I wasn't, I was a doctor in the ER, but I wasn't their doctor, so my responsibility was not diagnosis and treatment. So I would just go in and sit with the patient. And I remember it was strange for patients at first because I'd say, hey, I'll just make up a name, Mr Harris. I'd say, hey, Mr Harris, I'm Dr Kulad. You know, I'm just kind of just want to talk to you a little bit and see what's going on, and then they'll say, okay, so you're my doctor. I'll say, well, I'm a doctor of the year, but I'm not your doctor. Today your doctor will come and see you, but I'm just going to be spending time with you. And it took people so long to kind of just like, why does this doctor want to spend time with me? You know, you could see that they never said it, but that was this puzzle that they couldn't quite solve and it would take a couple minutes to even be like okay, this is a little weird, why is this happening? But I saw so much.

I remember one person who was a Vietnam vet and they'd come in, I think, for abdominal pain and initially it was quiet and then he said a little bit and then he said a little bit more and then soon he was talking about his grandkids and then it just like the, the avalanche came, the talking and talking, and talking, and talking and talking, and afterwards he's like they came back in to give pain medicine and he had no pain, you know, abdominal pain. Now, was it because of that? Maybe his pain was waxing and waning anyway, maybe. But there's no doubt this person felt a healing just through this connection that we were forming. And it wasn't, it wasn't any extraordinary connection, it was a simple human connection, um, that of being seen and being heard and being cared for, um.

Another example I think I wrote these examples in my book Michelangelo's Medicine was a person who was suicidal and I went to see him and he started speaking and I kind of got this message that was like just let him speak, just let him talk it out completely. So I didn't interrupt him and it went on for minutes and minutes and minutes, which is a long time in the ER, and he

talked about his wife and he talked about what's happening at home and he talked about all that. At the end he had kind of cried it all out and he said he said thanks, doc, he was not suicidal anymore, you know so, and I hadn't said a word.

0:51:11 - Julie

So, being heard, knowing that people care about you enough to just sit with you and be with you, I think is one of the deepest forms of healing in the ER when people have reached that state of emergency. Profound. That statement's just profound right there, that when people are heard, it's the most profound form of healing that you can have. I think we're on the same wavelength, obviously, because my next question was about Michelangelo's medicine and I was going to ask you about that, and I know you've touched on a lot of what's enclosed and contained in that book. But are there any of the other cliff notes that you want to tell us about? And how did you come up with that title? That's such a great title.

0:51:50 - Anoop

So the first part of the book is about my journey to this. So I talk a little bit about living in India, I talk a little bit about going to school, growing up, a little bit about medical school, and the second part of the book is about, I think, healthcare as a system and some of the misunderstandings. I talk about the operational problem and the informational problem, and I think this is critical for anybody, any policymakers listening, anybody interested in healthcare reform, any doctors, any clinicians, any patients. You know, if you're interested in healthcare or health in any way, this is important to understand. You can divide all of the problems or challenges we're facing in healthcare into two One is operational and one is informational, and this is really important to do because what you will see is that a lot of healthcare reform is about operational change. So I think it was Atul Gawande, the surgeon, who wrote a book about checklists and saying if you make a simple checklist, it helps to reduce errors because it's just a process that you have to go through and make sure yes, a, b, c, d, e, okay, good, that's safe, we're good, right, that's an operational issue. Or another one about care delivery how do we get care to, let's say, rural populations that don't have access? Right, that's operational. How do we get that there, right? Or processes, or drug prices. Sorry, again, these are operational issues. We have to separate that from the informational issue.

The informational problem, the informational problem, is that we don't know the nature of a human being, we don't know what health is and our fundamental model of human anatomy is radically incomplete. That's the information problem. That means that the fund of knowledge that we are operationalizing is grossly insufficient. That we are operationalizing is grossly insufficient and I think it's dangerous. In fact, right, but because of the degree of its incompleteness. It can be dangerous because it feels like it's full. It's not that it's dangerous in and of itself. You have to put it in a greater context and then it becomes what it can be, but in and of itself it's grossly insufficient.

Just as I said before, right? So a person could have appendicitis and a person could have, let's say, what we call hallucinations, and we use the same model of anatomy to understand those two things. Just think about that. So appendicitis, we would say, is a physical disease. Right, it's when the appendix, which is in the right lower quadrant of the abdomen, it's inflamed, it's swollen up. Right. So we could say it's a physical disease. To some extent you can say that an atomic model of anatomy is sufficient for that, right. I still think it's incomplete, I still think we're missing a lot there, but at least you can make an argument for that.

But now you have somebody who's perceiving things that other people are not perceiving, and so we say, well, they're hallucinating now, and the model that we use to understand them is balls and sticks. It doesn't make any sense, right? And so the way that balls and sticks translate is to the brain and then ultimately, to neurotransmitters. So the problem that a person is seeing something that other people are not seeing and, let's say it's causing them distress,

we have to understand that in terms of balls and sticks, I think it's insane. Now, can we understand it that way? Yes, that's a different question. Should we? Is that the only way? Is that the best way? Yes, that's a different question. Should we? Is that the only way? Is that the best way? Those are totally different questions, right? So in an emergency, does it help to see their experience in terms of balls and sticks, what we call the atomic model? Yes, it can, because we can alter the brain, the neurotransmitters in the brain and maybe it can help them feel better. Is that the best way to understand what's going on? I don't think so at all, and yet that is the model that continues.

I'm giving you just one example, but this is a continuum that happens across medicine. Our core fund of knowledge is insufficient. Our core fund of knowledge about the human being and how to represent them is insufficient. Our core fund of knowledge of how healing happens is insufficient. So we need to fill that knowledge in with two things. Number one is whole human anatomy, which is what we think at Health Revolution is a complete model, the entire physical body, from the whole body to the organs, to the tissues, to the cells, the macromolecules, the molecules, the atoms, the protons, neutrons, electrons. All of that and all of their varying degrees of complexity and organization are just the outer, the fifth layer of the human being in a whole human anatomy model.

Deep to that you have the mental body, which is our thoughts, our feelings, our ambitions Right. Deep to that is the energetic body, the chakras, the meridians that are represented in so many cultures. Right are our electrical nature, our prana, our chi. Right, our magnetic nature. Deep to that is the informational body which is across space and time. This is what. This is what psychics use to tap into other places. Right, it's not that they have to travel and get on some communication network, it's that they're everywhere. This deep part of ourselves is across space and time. There is no barrier. That, again, is a. The barrier is a product of miseducation and dissociation that happens in childhood. So this is the informational body where we can access anything at any time.

This is why in quantum physics you can have spin on different elementary particles, separated by great distances, that are complementary to each other. So a property changes on one particle and it changes instantaneously on the other side of the globe or the other side of the country. How? How can it happen? Faster than the speed of light? Because they're part of the same informational body. It doesn't have to travel, it's known instantaneously.

And the deepest body, the first body, is consciousness itself.

This awareness, this intelligence, this love, this knowledge, this existence, they're all synonyms.

You know this is a place beyond language. But this fundamental love, intelligence, knowledge, existence that we are, because of which we can know our informational nature, our energetic nature, our mental nature and our physical nature, these are our five bodies, this is whole human anatomy. And when we know this we can access multidirectional healing. Right now we have unidirectional healing. That means you intervene at the level of the physical body and you cross your fingers and you hope that it permeates and penetrates and propagates deep enough for healing to happen. But when you're aware of the different layers, you can as you know, I'm sure you do that in your work you can operate at the level of the informational body and it can spread outwards to the other layers of the body and they experience healing. So the fund of knowledge regarding who we are, which is whole human anatomy, the fund of knowledge in terms of how healing happens, which is pneumocore, nutrition, movement, connection, movement connection and rest this has to be brought to the core of health care to solve the informational problem.

0:59:19 - Julie

Then only we can be maximally effective when we solve the operational problems well, and you bring up a really good point because with the quantum physics, which is the space that I play in, I can scan anybody anywhere, even in a galaxy far, far away, if I need to, and I'm like a human MRI and I can see inside somebody's body. I can see broken bones, torn ligaments, viral infections, bacterial infections, malignancy, metastasized malignancy, whatever in a nanosecond. I just raise my vibrational level. It takes me a nanosecond and I do that. I believe the work that I do is complementary to the work that you're doing in the emergency room in your allopathic medicine, and I think you bring up a really good point and it spurs a couple of questions. I've just got a couple more questions for you as we're winding down. Number one is it seems to me that the database that you're envisioning and putting together is complementary to Dr Google as we know it. You know somebody hears something, well, or they've got a pain. What do they do? They go to the internet and they're looking it up and Dr Google saying oh, that might be an appendicitis. You probably better go to the emergency room or whatever. And certainly I can see an appendicitis attack when it's happening and I'll say you need to go to the emergency room. You need to go be seen right away. I was talking to somebody yesterday who was having a situation and I said you need to go be seen now, don't mess around with this, just go. And so I do think that there are applications for everything and it's best when we join them together. It's best when we join them together.

What's the bottom line here for people to help themselves? Because we all have intuition. We all come in with it. What can we do that combines all of this? I think that the generations of my parents and my grandparents my parents were born in the 20s. My grandparents were born in 1900 and 1902. If a doctor told them to do something, they just did it. They didn't even question it. What can we as individuals do to combine Western and Eastern medicine, our own intuition, energy healing, these other modalities together and know that we're making the best decision for ourselves. Trust in that. Do you have any advice on that for people?

1:02:05 - Anoop

I'd say you know, open up and get multiple perspectives. This isn't about rejecting anybody's perspective, you know. You said earlier that you know this would be complimentary to Dr Google. I actually think Dr Google is complimentary to this, actually, because pneumocore is primary. This is what is primary and I don't think I hope there is nobody who would say, yeah, don't worry about nutrition, don't worry about movement, don't worry about connection, don't worry about rest. If we really come down to it and ask it pointedly, most people would not say that, right, we know that that is fundamental and it doesn't fully make sense to do a whole bunch of other things and not take care of the fundamentals, which is what the body needs. So if you're asking what a person can do activate these engines of nutrition and movement and connection and rest you can go to healthrevolution.org and we'll show you exactly how. There's a simple course on how to do it.

The other thing is that this is simply the process of life Nutrition of the mind, of the body, movement, all the things we discussed earlier connection, rest. This is what we do as human beings. So it's not like well, I did this and now I'm done. Now, what it's like? No, you know, I say it's kind of like reading a good book you read it again and then you read it again. I mean, you put it down for a while and then you read it again, and every time you read it you see something new. You see more deeply, you see yourself differently.

You say, huh, I never saw that in myself. Right, and it's just like that. This is simply the process of life that repeats itself, like the seasons. Every spring is similar to the previous spring, but it's never quite the same, right, because I am different. Now this spring I'm different than last spring, and the next spring I'll be different than this spring. So there's a similarity to it, but there's a depth to it that keeps on deepening every time we move through it, and along with

that comes increasing wisdom, increasing love, increasing intuition, and then we will know what to choose when.

1:04:11 - Julie

As we keep doing this, so why do 80% of Americans not do this now?

1:04:19 - Anoop

A couple of reasons. One is that the marketing tells them that this is complimentary, that don't worry about it, blood pressure, don't worry about it, you can take this pill. I have so many patients who have an underlying diagnosis of, let's say, hypertension or diabetes, and if I ask them if they have any medical history, they'll say no, and later I'll find out that they're on a couple medications that treat hypertension, diabetes. They'll say yeah, I don't really have those medications or take care of it. So the understanding that the disease is still there, it's being acted upon through the medication and it's being managed or it's being changed or, in some cases, it's being suppressed, but the disease process is still happening, right, that understanding isn't there, and that's again because of the marketing and the miseducation. We should be telling people that actually, you can get off of those pills by activating your engines and so, to the extent, you can keep doing this and it's a matter of um. Do we want to get by with the bare minimum messaging or do we really want people to heal? Because it's in the details that makes the difference, right? So I can say well, you know, eat your veggies. All right, have a good day. And here's my prescription, right?

That's very different from having them come back, you know, for an hour once a week with family to talk about these changes and talk about how they can be implemented for the spouse and for the kids, right? Do we have that level of commitment investment? We don't in health care because that wouldn't pay the bills, to be frank. So none of this is rocket science. That's the other part about it, you know. That's why, when we talk about health revolution, a lot of this is rocket science. That's the other part about it, you know. That's why, when we talk about health revolution, a lot of it is just saying what's true and saying what's happening. It's important to me that people hear from an ER doctor that healing is possible, that reversing heart disease is possible, that healing from cancer is possible, that healing from autoimmune disease is possible from schizophrenia and so on, because all of these are ways of looking at processes and those processes, in many or most cases, can be reversed and people have reversed them, and the key is activating your four engines.

1:06:24 - Julie

That's been my experience in working with tens of thousands of people, especially on their health journeys is that everything's healable. Now, sometimes the healing is death, but most of the time it's not, and I've seen miraculous things of people that were told hey, get your affairs in order, You're gonna be checking out of here, You're gonna be dead in a week. And here they are. They're moving around 10 years later, symptom free and disease free. So everything is healable.

1:06:58 - Anoop

And it brings up the really important question of what is healing? That's for each person to answer for themselves. When I say healing, I'm not saying only that you know the diagnosis has to go, the diagnosis has to be reversed. This isn't about reversal, it's about advancement. It's about advancement, it's about going forward, and many times, if you go forward, the diagnosis will drop away. But I'm not claiming some utopia. I'm not saying that everybody's going to heal of every disease condition. That's not what I'm saying. I'm saying healing is possible for every single person. Sometimes that includes a disease reversal, and that's where we are and that's a journey that each of us can make.

1:07:35 - Julie

Yeah, last question why do we incarnate?

1:07:39 - Anoop

It's the nature of things. The fundamental nature of things is potential. What is potential in human language? What is potential? It's simply I can, I can, and so it is naturally the expression of this intelligence to put out forms in many, many different ways, and some of them we call them life forms, and that's living beings, like human beings. Some of them we consider inanimate, quote unquote, inanimate, like rocks and things like that. But all of these are expressions, all of these come and go from a more particular or from a, let let's say, a smaller reference point. These are learnings, is the entire process of you know when the cosmos began.

Let's let's take the example of the big bang bang and then the universe expands, right, and then eventually it contracts again, disappears, bang and it contracts and then bang like that, similarly, within each one of those banging is a human lifetime. Bang, bang. That's also the cycle of the seasons, right? One cycle of four from spring to summer to fall to winter, spring to summer to fall to winter. So this is the nature of this intelligence, is that it expressed itself, expresses itself through rhythmic cycles. That's what we call time the rotation of the sun around the Milky Way, the rotation of the earth around the sun, the spin of the earth on its axis, the seasons, lifetimes, everything that's the nature and the Big Bang itself, the expansion and contraction of the universe itself.

So that's the nature of things. That's how potentiality expresses itself, because we are complete. If we were incomplete, we wouldn't keep coming back around, it would just be one and done. But we are complete because we're starting with the whole, because the potential is whole and it's complete. It has to make a circle right. If you stand in one place in the earth and start walking, you'll come back to the same place. You'll come back to the same place. You'll come back to the same place. Everything is cyclical. Why? Because our original nature is whole, a sphere is whole, a circle is whole, and that's why we keep coming back. And each time we come back, we come back with something more. We spiral higher and higher and higher.

1:09:50 - Julie

Wow, beautifully said. I think you're an extraordinary guy and I'm so impressed with the work that you're doing and a big fan of you and your work. How can people learn more about you and the work that you're doing?

1:10:07 - Anoop

Please visit us at healthrevolution.org. You can go to the About page to see what our vision is for health and for this world and you can help us out. If you want to help us out to spread the word, check out healthrevolution.org. Slash champion. You can be a champion and help us get the word out and build this platform that we're talking about so we can help this planet transition.

1:10:31 - Julie

All right. Well, I've got lots of other pages of questions for you, so we'll have to have you back until we can get to those too, but in the meantime, everybody thanks for joining us today, sending you lots of love from Sweet Home, Alabama, and from the DC area, where Anoop is too. We'll see you next time. Bye, everybody.

1:11:01 - Annrcr

Thanks for joining us. Be sure to follow Julie on Instagram and YouTube at AskJulieRyan We'll see you next time.

1:11:08 - Disclaimer

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