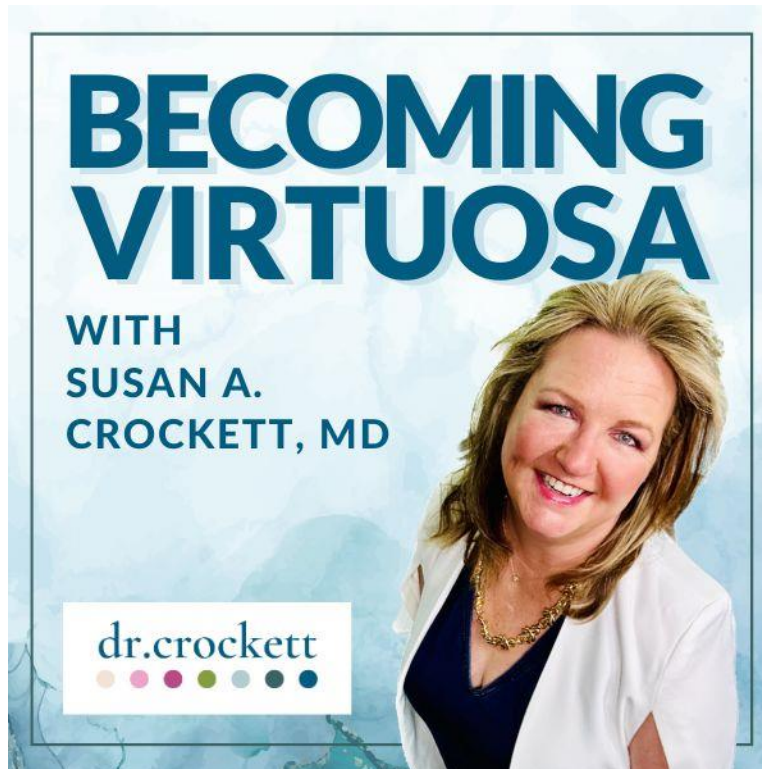


Ep #80: How to Meditate with Dr. Reed Miloy



Full Episode Transcript

With Your Host

Susan A. Crockett, MD

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Dr. Reed Miloy: So 13 minutes a day is all it takes.

Dr. Susan Crockett: Of meditation.

Dr. Miloy: Just 13 minutes in the morning. I'm just focusing on this spot between right here or right there between the eyes. I'm just kind of focused there with my mind. I'm also just focused on the breath. Then if there's a bunch of noise up there, I'm just watching it bounce around. Not trying to control it. I'm just letting it go. Okay, let the noise go. It's okay. Then within about two, three minutes, or even less. The more you practice, the faster this happens. The noise just goes doo.

Welcome to *Becoming Virtuosa*, the podcast that encourages you to become your best virtuosa self. Each week Dr. Susan Crockett goes where the scalpel can't reach, exploring conversations about how to be, heal, love, give, grow, pray, and attune. For the first time ever, she's bringing the personal one on one teaching that she shares with individual patients to you on this broader platform. A weekly source of inspiration and encouragement designed to empower you.

By evolving ourselves as individuals. We influence and transform the world around us. Please help me welcome board certified OB-GYN specializing in minimally invasive GYN surgery, internationally in the top 1% of all GYN robotic surgeons, a certified life coach, and US News top doctor, your host Susan A. Crockett, MD.

Dr. Crockett: Patients want to know how to reduce their stress levels. One thing that comes up a lot in our practice is about meditation and how to meditate. What that is, what it isn't. What do you tell people about that when that comes up? What role does that play in your practice in stress management?

Dr. Miloy: Well, it's really become a lot more popular, thank goodness. It's a tool is how we can look at meditation. It's a tool. It's a tool that helps to

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create separation between the limbic system of the brain, which is responsible for emotions and behavior.

Dr. Crockett: So we call that the lizard brain.

Dr. Miloy: So it helps create separation from the limbic system and the prefrontal cortex where the executive functioning and thinking and processing is taking place. The thing that really gets most human beings, makes them suffer the most, is they're under command and control of the limbic system. There's not enough space being created between their processing thinking mind, the prefrontal cortex, and the limbic system.

So what meditation helps a person do is to create that space. There's a lot of other practices that can do that as well, but meditation is a wonderful habit to develop. The best time to do that, of course, is in the morning because you're going to have probably a stressful day. You go out into the world. It's always one damn thing after another, don't you know.

Dr. Crockett: It is. Yeah.

Dr. Miloy: Yeah, so we have to prepare for it.

Dr. Crockett: So there are a couple of ways that I teach my patients to think about this limbic system and the prefrontal cortex thing. So I called the limbic system the lizard brain, that's because that's like our base fight or flight basic reaction kind of thing. Then the prefrontal cortex, of course, is our higher brain of doing what we want to do.

The one tool that we teach in the coaching circles that I ran in is the limbic system is the toddler in the backseat of the car. Then the prefrontal cortex is the mom in the front seat, or the parent.

Dr. Miloy: Great analogy.

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Dr. Crockett: Because you can feel your body starting to panic or pitch that tantrum or whatever. Often, if you're aware of that's just a reaction, you can feel it in your body, then you can take a second. Just take a beat, and think okay toddler. You're just doing what you're supposed to do brain. You're supposed to warn me of things that are scary and bad and keep me safe, like they did in caveman times. But you're okay. I'm going to make a decision to do X, Y, or Z.

So that's one way that we do it. The other is in that book that's right behind you I recommend a lot, *The Untethered Soul* by Michael Singer. I really liked that book because when I first started talking to patients about meditation, we live in the Bible Belt. Very Christian fundamentalism type. Well, not everybody's a fundamentalist, but very, very devout Christian population. There's been a lot of misinformation within that whole religious scene about what meditation is and what it's not. Meditation is actually a form of prayer. It's what we do when we do prayer.

Dr. Miloy: It really is. I was about to jump in and say hey, Christians have been doing this for eons.

Dr. Crockett: Yeah, prayer.

Dr. Miloy: So prayer is a way of focusing intention.

Dr. Crockett: Beads, when people are doing the rosary, that's a form of mantra, or it's just helping to focus the mind. The thing that Michael Singer says in his book that I like so much is he talks about the analogy of sitting in a movie theater where you're sitting in a chair, and you're watching the movie, and you get completely absorbed in it.

You forget that you're in the chair. You don't feel it. You're like in the movie and being part of it. But then you can step back out of it and realize oh, I'm in the chair, and I'm watching the movie. Then you're becoming the watcher of the movie instead of being the one in it.

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Yeah. So we teach our patients also to become the watcher of their brain. Being able to meditate doesn't necessarily mean you turn the movie off. It just doesn't work that way. We so often think that it means you have to turn your brain off.

Dr. Miloy: That's a key point. A lot of my patients say well, Doc, I tried to meditate, and then it was just chaos. Good. The meditation is just initially for a lot of beginners is just watching the noise in the brain. Just observing it. Just saying to yourself my gosh. Mine is mental noise today. That will take the noise down a notch. That makes a difference.

Dr. Crockett: It does. So what that does to us physiologically is it decreases our adrenaline levels, which decreases the constriction of our blood vessels. It allows our heart rate to slow down. Blood and oxygen to get to your brain so you can actually think. It actually can help you drop your cortisol levels too.

Dr. Miloy: Absolutely. So yeah, the limbic system is going to just go right over to the thalamus, hypothalamus, and boom. All of that is going to interact with the endocrine system through the adrenal glands and so forth and the autonomic nervous system. Yeah. All those cardiovascular benefits you just mentioned, but we should also talk about the effects on the brain.

Because we now know that for every major episode of depression or anxiety that a person has in their lifetime, there's a 13% increase in risk of dementia later in life. So a person in their 20s and 30s and 40s who's going through a lot of stress or depression, there is damage. There are hits being taken by the CNS, central nervous system, the brain.

This is a big concern, of course, because we got all the other things that are going on with the public's health, metabolic syndrome, obesity, and that's affecting cognitive health as well. So immune function plays a big role. We're talking about the microbiome.

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That last step is we want to get the stress out. We want to rebalance. Okay. How you do that, through exercise, through sleep, through mental health. I put meditation under that mental health leg. But you can meditate. I mean meditation, there's a whole, there's just a whole variety of different ways to meditate out there.

Runners, long distance athletes, triathletes, they'll talk about just turning off the mind and going into a quiet still place, a state inside of themselves. So you don't have to be sitting still to do this. You can actually be moving the body. But for most of us, a meditation practice is going to, we need something that's actionable. It's got to be doable. This is great, but it's so, I don't know where to start.

So the easiest place to start is in the morning when you first wake up before you turn on any lights, before you start making yourself beautiful for the day is to sit still. What I like to do, I get at the foot of the bed, get into Indian style kind of cross leg is like a kid, back straight. I'm just going to focus on my breath.

I'll take two deep breaths. I call it a four-two-six breath. I'll inhale through the nostrils to a count of four. It's a belly breath coming from down below. I'll hold it for two seconds, and then exhale through the mouth completely for six seconds. I'll do two of those. Now what's happening there? Matter of fact, you can do this anytime of the day, but I'm resetting my autonomic nervous system.

Dr. Crockett: That's your flight or fight versus relaxation. Sympathetic versus parasympathetic.

Dr. Miloy: You have two branches. You have sympathetic, parasympathetic.

Dr. Crockett: It doesn't mean sympathetic like I have sympathy for you.

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Dr. Miloy: Sympathetic is fight or flight. Most people are walking around out of balance. This is raising blood pressure, raising heart rate, raising stress, anxiety levels. I mean just wreaking havoc on our health. Parasympathetic is the pina colada on the beach. So when you take a couple of big deep breaths, you get this, and it happens within seconds.

We had a very expensive \$70,000 device that I bought 15 years ago. We did thousands of studies, and we could just watch people go in just a couple of deep breaths.

Dr. Crockett: Do you remember when you made me do that? Like it was a year ago almost to the day. I don't remember the exact day we did the first filming together here, but it was when we were still developing the studio. You were kind enough to come and be my guinea pig guru. But you remember I was so wound up that day. I was dealing with the tech. You and I had never met in person before. I had all the food and the stuff wasn't working. You were like just go lay down and take a breath.

Dr. Miloy: came back like a new person. 10 minutes, right.

Dr. Crockett: I did. 10 minutes I went and laid down, meditated for a little bit, and then came back it was like okay let's do this.

Dr. Miloy: Complete reset.

Dr. Crockett: It worked too.

Dr. Miloy: So yeah. So most people are running around in their life like this completely imbalanced, and this is causing all sorts of problems. We now know that this is a risk factor, a major risk factor for having a heart attack or stroke. I'm sure or there's a lot of other things that will probably go into that category. I'm sure we'll find things like malignancies and disturbance of the microbiome, of course and dementia. Stress is it kills, right. That's the old

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saying, and now we know why. Some of those patients that we had them take a deep breath, guess what happened?

Dr. Crockett: Nothing.

Dr. Miloy: Nothing. Now this means there's been damage to the parasympathetic branch of the autonomic nervous system. The sympathetic is a much more robust component of the autonomic nervous system because we basically evolved in an eat or be eat world. You had to be able to react to a threat just instantaneously. So that is more robust and can withstand the diabetes and the high blood pressure longer.

Now, just to let everybody know, it's diabetes, high blood pressure, and these other conditions, smoking and so forth, that are causing damage to the autonomic nervous system. All right. That whole body's being damaged. So it's not a surprise that the autonomic nervous system is affected. With these people, we put them on 150 minutes per week aerobic exercise zone two, which is easy.

Dr. Crockett: Being able to talk while you're walking.

Dr. Miloy: Just can speak a full sentence. That's a good proxy for zone two. Over a six week period, a lot of the, almost everybody improved on the. Not everybody got back to normal, but most people improved with and other parameters improved the course.

Dr. Crockett: You know what else helps? Bioidentical progesterone.

Dr. Miloy: Yes.

Dr. Crockett: So in the old days when we dosed estrogen and progesterone for menopausal women, we only gave them progesterone if they still had a uterus because we were just trying to protect the estrogen from causing endometrial cancer. That's all we thought the progesterone was good for.

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Now what we've discovered is if you use the actual bioidentical one, we call it the Zen hormone in our practice. It'll help us sleep.

Dr. Miloy: I was about to say sleep.

Dr. Crockett: It dilates the blood vessels, decreases stress levels, cortisol levels.

Dr. Miloy: Probably what did more damage to women's health in this country. I saw it at the moment, it wasn't at the moment the study was published but it was like a week later. The Women's Health Initiative study that was published.

Dr. Crockett: In 2002.

Dr. Miloy: I can point to a handful of things, probably five things in my career, that were just like what? We are going way off course here. That was clearly one of them. It has caused immense harm to women.

Dr. Crockett: Yeah. So just for our audience because this is a big topic. I was not prepared to get into this today. So that's true. There were a lot of misnomers from that. A lot of the things that came out of that study that influenced how we dealt with menopause and hormone replacement therapy now has been debunked and reversed.

For instance, one of the things in it was limiting the length of time that a woman should be on a hormone replacement therapy. So now with the bio identical newer generation, there's not that 10 year time limit where they have to stop it after so long because the risk of heart attack and stroke that was shown in the huge study with that was done on non-bioidentical hormones. Another big one that I heard was the breast cancer thing. So.

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Dr. Miloy: That's right. The breast cancer incidence was very low actually. When you looked at those overall numbers, I think there was like eight extra cases or something.

Dr. Crockett: It was actually the Provera that was causing the increase. It wasn't the estrogen. Even the horse mare estrogen they were using. So there is an organization called NAMS, the North American Menopausal Society that put out a statement in 2002 and 2023. A statement in '22 about the update for guidelines for hormone replacement therapy for women. Then last year, they put out one for the non-hormonal replacement guides. So we'll put a link for the NAMS articles there below.

Dr. Miloy: Yeah, very important. I saw that actually. I was like wow, finally. Course correction. It took us 20 years.

Dr. Crockett: Yeah. It's cost lots of lives. Because we're finding out being able to stay on bioidentical estrogen is actually reducing, continuing to reduce cardiovascular risk as we stay on it longer, and that's just the tip.

Dr. Miloy: Yeah. Just listen a woman's had this for decades, right, and all of a sudden it's gone. You have all this just chaos taking place, sleep being disturbed, everything else. This is not oh, honey, you're having hot flashes. No, this is a serious health issue. I hope clinicians, everybody's listening, is addressing this much more aggressively with their patients.

Dr. Crockett: With their providers. I think clinicians in my field are picking it up pretty quickly. One doctor that I recommend a whole lot, and I recommend her book is the Mary Haver. She's in Galveston. She's an OBGYN. I have never met her personally, but I just adore her writing.

Dr. Miloy: Get her on the show.

Dr. Crockett: Yeah, I need her. Mary, come be on the show. It will be fun. Her book's *The Galveston Diet*. Call me Dr. Haver. Her book's *The*

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Galveston Diet. I think I heard that she's coming out with a menopause book very soon. So maybe I'll save the in depth dive or when I get her on the show. If I can't get her on the show, I'll figure something out.

But she's a lot of fun to watch. She's very up to date on everything. She has a menopausal clinic in Galveston. One thing that kind of hurt my feelings was she said she was having patients from San Antonio come down there. I'm like hello, we do have good people in San Antonio that know how to do this. But I think what she illustrated was that it's hard for patients to find.

Dr. Miloy: It's hard for them to find. It's like if they can find the people locally, they prefer to, of course, stay local. There are. They're great clinicians here. Maybe that's part of what you can put together is on your site.

Dr. Crockett: There's some recommendations. Yeah. Well, and this is something that I am going to say yes, you can come to my office for this because I've gotten amazing nurse practitioners that help do the hormone replacement therapy. I focus mostly on surgery. But that's a big part of managing our patients. So.

Dr. Miloy: Sure is.

Dr. Crockett: That's all I'm going to say about that. So yeah, cool. All right, where were we? What else were we going to talk about? Meditation?

Dr. Miloy: Well, I think when you get back to meditation. So I like to, getting back to what I do in the morning, is here's what the data show. I try to be data driven, evidence based driven when I can be because science.

Dr. Crockett: You give me the data. You set it up.

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Dr. Miloy: So the science points the way, right. It's a tool to unveil the truth and get answers. So 13 minutes a day is all it takes.

Dr. Crockett: Of meditation.

Dr. Miloy: Just 13 minutes in the morning. I'm just focusing on this spot between right here or right there between the eyes. I'm just kind of focused there with my mind. I'm also just focused on the breath. Then if there's a bunch of noise up there, I'm just watching it bounce around. Not trying to control it. I'm just letting it go. Okay, let the noise go. It's okay. Then within about two, three minutes, or even less. The more you practice, the faster this happens. The noise just goes doo.

Dr. Crockett: It does.

Dr. Miloy: It goes down. then you kind of start to get into this almost a sensation like you're falling. Okay.

Dr. Crockett: Floating.

Dr. Miloy: Or floating. Yeah, it can be floating or falling. Some people freak out. Okay. Some people have a dissociation with their ego. Okay. It can be very disturbing.

Dr. Crockett: Really?

Dr. Miloy: Yeah. So if you have, that's normal too. You're not going to die. Nothing bad's going to happen.

Dr. Crockett: What does that look like?

Dr. Miloy: It can be a loss of identity. A sense, it's a flash of losing sense of touch with yourself. Because most human beings are over identified with their ego. It's the unconscious condition mind as Eckhart Tolle likes to say.

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I think it's the most appropriate brief definition and effective definition. In meditation, for beginners, they will sometimes, a dissociation from ego will happen.

Because in the meditative state, the boundaries start to go away between ourselves and everything else. We begin to realize that we're connected to everything, which is the truth. The ego says no, no, I'm all about separation.

Dr. Crockett: I'm me.

Dr. Miloy: It's all about me, don't you know. So there can be a little bit of anxiety.

Dr. Crockett: So, I like to do the job in the ocean meditation. That's what I do in the middle of the night when I can't sleep is I'm able to just pretend that I'm a drop of water in the ocean. Sometimes I float on the waves. Sometimes I jump down into the depths of the ocean or get swallowed by a fish. It's a little bit more creative than what you're talking about the single spot in the mind, but it works for me. It does put me in that state of ego dissociation where I'm just like part of everything.

Dr. Miloy: Yeah, you're part of the bigger ocean.

Dr. Crockett: I'm just a drop in a gazillion buckets.

Dr. Miloy: That's actually an empowering concept because I'm not this isolated. It's not just me. I'm connected to something vastly more powerful than just my ego.

Dr. Crockett: Well, I think it's a balance because we don't want to be ego. We don't want to be wholly without an ego either. You and I have talked about this in depth before, but I think there's, I have some new thoughts about it. So I think it's different for men and women.

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Dr. Miloy: It probably is on the surface. At the end of the day, we're all affected by our physiology. I think even we get below that, I think it's the same. I won't defend that position, but I will say that's what I've observed. That's all I can communicate. It's what I've observed with my patients.

Dr. Crockett: So what I think is that men are conditioned throughout their life to feed the ego and to have a strong ego and women are conditioned to let go of their ego their whole life and to become disengaged from their ego to the point of codependence.

So when you start talking to people about letting go of ego, when you're talking to a woman who has no sense of self because she's turned it over to a male partner then that's a very different conversation than when you're having a conversation with the male CEO who is head of the household and then probably needs to let go of it. So I think everything is a balance. But the more I look at those types of dynamics and people the more I think approaching the ego conversation is different.

Dr. Miloy: It is a fascinating topic. I would just add to what you're saying is evolution is playing a role here. A woman, when she, think about it. When a female is thinking about having intimate relations with male, there's consequences. We call those children. So the woman is much more invested in that act.

Dr. Crockett: True.

Dr. Miloy: You think about how we exist for eons and millions of years as hunter gatherers. You're not going to make it as a single mom, or it's going to be extraordinarily difficult. But a clan, a partner, somebody that's there with you and invested in those children. Yeah, that's a different animal. Now, that plays a role on the dynamic of the woman and the relationship with that mate.

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Dr. Crockett: Yes, but also the woman gives everything over to take care of her children.

Dr. Miloy: The woman has got more oxytocin, and she's a nurturer. The one thing that I have observed is that women being just natural nurturers, and they're better at it than men. They neglect their health.

Dr. Crockett: You think? That's my whole career, Reed. That's my whole practice.

Dr. Miloy: But if you really dig deeper, if you dig underneath that even below the surface of that, it's a form of denial and not having to come to grips with their issues and facing their pain. Because there may be a lot of pain there. It's difficult for us to face into our pain. The place I see this is in menopausal women are older whose kids have flown the nest, and they're still following their children around all over the country. Their children are in their 20s. It's just like wait a minute, what's going on here? They've lost themselves in that role.

Dr. Crockett: So then they don't have enough ego themselves.

Dr. Miloy: That is ego. That's part of the ego. So it's like they're lost in the role playing. It's an excuse, when you dig into it, is not dealing with their stuff. There's stuff there that needs to be dealt with.

Dr. Crockett: Well, undoubtedly agreed. How did we get down that?

Dr. Miloy: I don't know. That is a whole other episode.

Dr. Crockett: That was not where I wanted to go with this, Dr. Miloy.

Dr. Miloy: That is a whole other episode.

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Dr. Crockett: But you walked that tightrope of the menopausal aging woman.

Dr. Miloy: I don't make the rules. I'm just a life student. That's all I am. Okay. If you say one thing, what are you? I'm a student of life.

Dr. Crockett: I think it would be really interesting for us to have a discussion about the difference of the patient populations in our practice.

Dr. Miloy: Oh yeah.

Dr. Crockett: Because I do think what you see in your practice.

Dr. Miloy: The patterns are.

Dr. Crockett: The patterns are different.

Dr. Miloy: They're going to be different. Yeah.

Dr. Crockett: All right. So what I was going to say about the ego and the loss of the ego thing, which is where this all went off the tracks, is I think we need both. I think it's balanced. Like we don't want to completely be without an ego at all. We need to have a sense of self.

Dr. Miloy: If you look at the ego as best we can understand, we don't understand it completely. But it is a byproduct of evolution, okay. It is all about not dying. Okay? Rule one is don't die. That's the first rule. Number two is have some kids. Procreate. Okay. So don't get eaten, don't die, and have kids.

Now both of those involve, shall we say, can encourage some unsavory behavior okay that we're now becoming more aware of collectively, which is our great step that we're making as a species. We're beginning to see ourselves and this unconscious conditioned mind and how it plays out.

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So we're all born with this creature. It's like okay, is it all bad? Not bad at all in an eat or be eaten world and one in which you need to procreate. Well, we've overrun the planet. We don't live in an eat or be eaten world anymore. We've changed the world. So we're fighting our evolution here. That is a tall order.

Dr. Crockett: I think we're transforming is what's happening.

Dr. Miloy: We are transforming.

Dr. Crockett: I think that's the next thing we're going to talk about is transformation and change.

Thanks for joining us this week. Please remember to like, share, and subscribe. If you have suggestions about what you want to hear us talk about again, next show, next time, later on down the line, just drop a comment for us. I hope you have a great week. We will see you next Tuesday. Thanks for joining us. Bye.

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