

Dr. Jill

Your Functional Medicine Expert®
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[#72: Dr. Jill interviews Dr. Hyla Cass on Brain Benefits and latest Research on CBD](#)

Text:

Dr. Jill 00:12

Hey, everybody! Thanks for your patience with us. Both Dr. Hyla and I were just getting through some other things today and here we are. Today I am super excited, not only about my guest but [also] about the topic. I think you'll find it very, very relevant. Whether or not you use CBD or know much about it, we're going to dive into some of the science behind the effects for the brain, for sure, and also for the body. I have been very surprised and interested in continuing to learn more about how beneficial it can be for neurological inflammation.

Dr. Jill 00:47

Before we do that, just a little background: I'm here most Tuesdays and some Fridays, and we always love when you join. I will try to keep track of some questions along the side, so if you have questions in real time or want to say hello, just type into the feed there. If you're watching this recorded on the podcast or YouTube, you can certainly comment there and subscribe as well.

Dr. Jill 01:06

Anything that you want to know as far as old shows can be found on my YouTube channel, which is just under my name, Dr. Jill Carnahan. So go there. We have 70+ hours of interviews with great experts like Dr. Cass and so many other things. If you want free blog information, that's on my website, JillCarnahan.com. And the last thing is, if you aren't part of the newsletter, please do subscribe. I'll leave a link there. I have all kinds of free stuff we share every week in the newsletter.

Dr. Jill 01:33

I want to introduce my friend. We have traveled in the same circles with functional and integrative medicine for probably over a decade. I always have such great respect for the information that Dr. Cass brings to our field, and today will be no different. You will really enjoy hearing from her. I'm going to do a formal introduction and then we'll jump right in.

Dr. Jill 01:54

Dr. Hyla is a recognized pioneer in holistic and functional medicine and psychiatry in particular. She's a frequent guest on radio, TV, podcasts and documentaries. She's written several popular books, including *The Addicted Brain: How to Break Free*, *Natural Highs* with Patrick Holford, and *Eight Weeks to Vibrant Health*. She helps people enhance their mood and mind, as well as overcome addiction, using targeted nutritional supplements. Her latest addition is CBD, which we'll talk all about today, which enhances the effects of the other nutrients as well as having many positive effects on brain health. Welcome, Dr. Cass. Thank you so much for taking the time to be here!

Dr. Hyla Cass 02:32

It's such a pleasure. I'm just delighted to be here.

Dr. Jill 02:36

Me too. And we've tried several times. I just told you before we jumped on: Thank you for your patience. I think I canceled twice. It's just those crazy schedules of ours, and I apologize. But I'm so glad we're here. I'm glad we made it work. It's so good to see you, even virtually. So let's dive in. What I love to start with with guests is the story—how you got into medicine first and then how you navigated to functional/integrative. And then we'll go on to CBD. But tell us just a little bit about your journey.

Dr. Hyla Cass 03:04

I think I was destined to be a doctor. My dad was a doctor. My earliest memories are of going on calls with him. He also had his office at home. We lived in Toronto and we had this beautifully furnished basement. It was not a cellar; it was beautiful! He had beautiful office space and I would be the greeter. Here, I am five or six years old; I'd be answering the door and letting them in. I felt like I was part of the club. As I got older, he would discuss cases with me. He acted as if I were a colleague. You know how you play fake until you make it? I just kind of fell into it.

Dr. Hyla Cass 03:54

He took me to a women's college hospital one time with women doctors and said, "See, women are doctors," because this was a time when there were very few women doctors. [I got] a lot of encouragement from my father; may he rest in peace. He really inspired me. He inspired me to be the kind of doctor I am because

he was very, very kind, and very personable. I'd see people walk into the office feeling very upset or worried and walk out smiling.

Dr. Jill 04:25

So he really modeled that bedside manner. And how cool that, from such a young age, you got to witness and see the power of that. What you're talking about is like holding space for people—making a space for them to feel comfortable—because [with] what we do in medicine, there's a lot of vulnerability. And I realize more and more the more I do it how precious it is: The gift of sitting with a patient and having them share some deep, dark stuff—sometimes happy but sometimes really difficult—with us. It's, like, sacred, isn't it?

Dr. Hyla Cass 04:58

It is a sacred trust, yes. By the way, medical school was allopathic, regular old medicine, but very interesting. I just found it fascinating. What I didn't like, however, was the way patients were treated and the medications being full of side effects. I was always empathizing with the patient and trying to find a better way to do things. It became clear to me that the medications were not the answer. Very early on, even in the residency, I started looking at alternatives—diet and lifestyle.

Dr. Jill 05:37

I love that because you started right in, even during education. I did the same before we got out into practice. And just like you, I think the allopathic model is beautiful. I learned so much [from this] great foundation. But then it's like allopathic plus—we've got a bigger toolbox, right?

Dr. Hyla Cass 05:54

Right. So I expanded my toolbox and continued to [do so], always going to conferences and learning new methods. It's such an evolving, exciting field. There's no end to it. We see the results. We get results; we get amazing results!

Dr. Jill 06:11

We do. And especially in the field of psychiatry, which is your expertise. I love your perspective because it's so needed. And I'm curious. You started delving into this very early. You mentioned and alluded to this but I want to talk more because, right now, most of the tools of conventional psychiatry are medications. There's a place for those; we all use them. But tell me more about when you saw that model and the

limitations and then how that allowed you to go into other options because there's not a ton of allopathic options besides medications.

Dr. Hyla Cass 06:48

When you work with the body's chemistry, we have the best pharmacy inside us. Nature knows how to heal us, so it's ludicrous to think we can take a strong medication and clobber our brain into submission. It doesn't work. It really does clobber you, and the side effects are terrible.

Dr. Jill 07:16

Yes. That's what I've seen too. And often the body is so smart that it will change neurotransmitter production or become immune, which is also the changing of the neurochemistry over time so that even if a medicine initially gave some benefit, often over time I find it to be much less effective.

Dr. Hyla Cass 07:36

Exactly, it wears off. The effect wears off. But going off the medication can be a problem because there have been brain changes. The same brain changes that make the drug not work anymore also interfere with your being able to get off it. Getting off it suddenly is really dangerous, really bad and you can have terrible effects that last for months, even years. The way to do it—there is a way to do it—is to do it gradually but also to support your own chemistry with the right nutrients, starting with diet, lifestyle, and specific targeted nutrients that help make your neurotransmitters, your brain chemicals. Our brain knows how to do that if we give it the right material.

Dr. Jill 08:29

Let's talk just briefly about nutritional interventions and then I want to go mostly to our talk on CBD specifically. But obviously, for your decades of practice, nutrition has been primary. What would you do if someone came in, say with depression or anxiety? The gut has an effect. Toxicity has an effect. How would you frame that and start to get them on the path nutritionally?

Dr. Hyla Cass 08:56

The interesting thing is, of course, that it doesn't stop at the brain. Your mental health doesn't end at your neck. It's a whole-body process. Of course, we look at the gut. We look for infections and toxicity, like heavy metals and chemicals. We

look for a history of head injury; we look for any source of inflammation because when the brain is trying to tell us something and a person shows up with anxiety and depression, those are symptoms. Those aren't conditions; they're symptoms. The brain is saying: I'm inflamed. I'm missing something. Something's out of balance. Then we test, take a good history, and give them what they need. Very often, the microbiome is out of balance. There's a very strong gut-brain connection, so we have to heal the gut. Psychiatry is not just the study of the brain. In fact, in allopathic medicine, they're not even looking at the brain, really. It's probably the only specialty where they don't look at the actual organ.

Dr. Jill 10:11

Yes. It's so interesting to think that way, right? And something you mentioned was really interesting. I was just talking to a friend who's a neurosurgeon for the Denver Broncos and he's got functional medicine training as well so I love talking to him because he's got this very conventional [background]. He was talking about the data on TBIs, traumatic brain injuries, and concussions. And he was talking about how if a human just gets a traumatic brain injury and they don't have any underlying infections, mold toxicity, or anything else, they often recover and do pretty well. But it's like the traumatic brain injury concussion plus the inflammation from something like Lyme disease or inflammation from autoimmunity, infection, or toxic mold escalates the traumatic brain injury to be an issue—the long-term consequences of that.

Dr. Jill 10:57

So he was almost saying, the bottom line: If you just have a head injury and that's it, you can often recover, especially if it's mild. It's that plus the underlying infection and inflammation that cause what we could call autoimmune encephalopathy, toxic encephalopathy, or whatever other term we'd use. And you're more of an expert than I am, and so is he, but I was fascinated to hear him say in this conventional concussion professional athlete world that it's really not the concussion by itself; it's concussion plus inflammation from an infection. I'm sure you see that and would agree.

Dr. Hyla Cass 11:29

Absolutely. And you take the patient where you see them. Somebody is an accumulation of their lifetime of whatever experiences they've had and it could be environment, mold—

Dr. Jill 11:40

As far as their history, it really does matter. So let's talk about CBD. I agree. As I read the neurological benefits, the science, and the literature, it's amazing to me how many benefits it has. Let's talk a little bit about: When did you find the benefits and start to use it in your practice? Take us through some of that with CBD, the benefits, what you're seeing happen, and what it is being used for.

Dr. Hyla Cass 12:07

A few years ago, it came crashing onto the scene. I looked into it. I was a little curious because I'm not a particular fan of THC. I know people enjoy getting high, but it was not something that interested me so much. When I first heard about CBD, I thought, "It's probably an excuse to get high." What did I know? Some friends of mine had written a book about it. I did read the book. And then it's like a light went on: "Wow, there is something to this!" The effects it can have on psychiatric conditions are amazing—for anxiety, depression, seizure disorders, and traumatic brain disorders. We were just talking about TBI. It's excellent for TBI and Alzheimer's. I began to take it really seriously.

Dr. Hyla Cass 13:01

It sounds like: Is this panacea? Is this the placebo effect? But it isn't really because you can use it on animals too and have very good results. The reason why it works in so many different ways and does so many different things has to do with its influence on something called the endocannabinoid system. Once you understand the endocannabinoid system, you can get why CBD works in so many different ways. Do you want me to explain?

Dr. Jill 13:32

Yes. Let's talk a little bit about that system because these receptors are all over our body, right? That's what's really cool.

Dr. Hyla Cass 13:39

Everywhere! We have them in the brain, in our organs, in our immune system, in the gut, in our endocrine system—everywhere. It's a system of communication and homeostasis. It facilitates communication among all those systems, and its job is to help us rest, protect us, de-stress us, and heal.

Dr. Jill 14:05

They're really important things.

Dr. Hyla Cass 14:07

It's a very important system—really important. The difficult thing is that a lot of people have a low endocannabinoid system, which means it's not doing all of those good things that you want it to do. The two main endocannabinoids—we actually make these endocannabinoids, these feel-good chemicals. One of them is anandamide, the other is 2-AG, and then there are a bunch of others. But these are the most studied.

Dr. Hyla Cass 14:36

Anandamide was first discovered in connection with THC tetrahydrocannabinol, which is what gets you high in weed. It was postulated that when THC makes you high, it has to have a corresponding molecule inside us because there is a receptor for it. Then it was discovered that it was the anandamide receptor that THC was going for.

Dr. Hyla Cass 15:06

The product that we make is anandamide. We make our very own THC, as it were, but it's called anandamide. While THC attaches to that receptor, CBD also facilitates the receptor in just a little different way. If you're low in your endocannabinoid system, you don't have enough anandamide, and if you're not feeling good and you're feeling anxious, you can't sleep, and you can have GI problems. All of these things are going on because you have a low endocannabinoid system. We can come in and use a phytocannabinoid like cannabidiol and it comes in and makes the anandamide work better. It works with your own inner pharmacy to do what needs to be done and it does it so much better than a drug because you're working with an already existing system. You just have to feed the system, recognize it, and feed it, and you have an amazing treatment.

Dr. Jill 16:11

That's what I've seen. For the patients that come in, their stress system is out of whack. All the signs and symptoms that you mentioned are related a lot to the stress hormones. Is there evidence that it decreases cortisol or that it changes some of the stress hormone response?

Dr. Hyla Cass 16:32

Sure. In the stress response, what is it? It's fight or flight. We're in danger. When we're in danger, what happens? Our heart rate goes up, our hearing becomes more acute, our vision becomes more acute, and the blood all goes to the periphery so we can run. We're built for that. We're built for fight or flight because we had to run away from predators.

Dr. Hyla Cass 16:56

However, these days, we're not running away from predators. We're sitting at a desk. And what's going on? We're stressed. There's financial issues, deadlines, there's kids, there's family, and there's all kinds of stuff going on. So our stress response is going, but we're not running. We're not dissipating that cortisol and adrenaline. It's just coursing through us. And what happens? Everything is going to the periphery: The blood flow and the energy. Our more vegetative aspects, our hormones, our reproduction, our gut function, digestion, our heart working the right way, and our blood pressure being normal—all of that goes by the wayside because we're in fight or flight and our body is acting as if we don't need those other things going on right then. Some people are having sexual dysfunction and infertility. Everything goes offline. It's a physiological response. It's a normal response to an abnormal situation. So you're right. The endocannabinoid system is there to de-stress us. The problem is—this is a big problem—when we're stressed, our endocannabinoid system goes low, so we don't have enough of that to counterbalance all this stress.

Dr. Jill 18:27

We can actually tap it with CBD and say: Hey, come on, help us out. You're tapping the system to produce internal endocannabinoids.

Dr. Hyla Cass 18:35

Exactly. So there you go.

Dr. Jill 18:37

Wow, very simple and it makes sense. I was just like you; I wasn't a prescriber of marijuana. I wasn't a fan of THC. I was initially very averse to getting into that field. But as I, like you, looked at the literature on CBD, I found it to be profoundly beneficial.

Dr. Jill 18:57

Let's talk a little bit about the indications that you would use it for. It sounds like a lot of people could benefit, but neurologically or otherwise, I found in my patients seizures and brain inflammation. What else? What would be the types of patients you would prescribe this for or recommend it for?

Dr. Hyla Cass 19:13

Any form of anxiety. One big issue that is rampant is post-traumatic stress disorder. People often don't even know they have it because it may have been a very early trauma or a cumulative trauma. It may have been issues with early attachment. And they don't know what it is, but they have this deep anxiety that's going on. What's been shown is that CBD is really good for dealing with it. It goes to the part of the brain [called] the amygdala, which is in the limbic system. In a way, it detoxifies the traumatic memory. The memory can remain. You can remember if you do remember it; certainly, military people who have seen horrible things in battle and have post-traumatic stress disorder can maintain the memory, but the horrible fear that goes with it is dissipated because that's what it does. That is exactly what the endocannabinoid system does. You support the endocannabinoid system and it works for you.

Dr. Jill 20:27

Wow, that makes a ton of sense. I've done a lot of work and I've had a good life, but we all have some traumas, so I dove into those myself. What I found is that as I deal with those and heal them, I can have a memory, but it no longer has a charge. And that's what you're talking about. I can have an older memory of my cancer at 25 years old and the diagnosis, and now I can talk about it. It happened, I realized it, and some of it was tough, but there's no charge associated with it once you work through it. And it sounds like this system and CBD could help discharge a charged memory, right?

Dr. Hyla Cass 21:05

Yes. Not only that, you said something interesting too: I'm sure you did a lot of processing.

Dr. Jill 21:11

Yes.

Dr. Hyla Cass 21:13

When you're in fight or flight under the stress response, your rational thinking and your processing go south because you don't have to think analytically or philosophically or remember a whole lot when you're running away from a lion or a tiger. You're absolutely on automatic. You can't think straight. That's why, by the way, people do really stupid things under stress, like cops who shoot people when they don't mean to. But they're stressed and they're reacting rather than responding rationally. As we shore up the endocannabinoid system, your brain comes online, and then you can process. In some ways, it just dissipates the fear by virtue of biochemistry, but it also gives you the ability to process and do the lifestyle things that we know we need to feel better—to deal with stress and [do things such as] meditation, dancing, socializing, being in nature, and all of these [types of] things.

Dr. Jill 22:23

That's interesting because I remember learning years ago that I was always on the go and I'd run and do activities that were high intensity and I had trouble sitting still. You know where I'm going with this because that's trauma-based. I learned over the years [about] that part of me, being still: Things would come up and they were uncomfortable, so I would never sit still. Just go, go, go, go, go. But as I learned that that was part of a trauma response in order to be still and process some of these things, I can see how CBD would be helpful or the cannabinoid system because it would allow you to sit with your thoughts, your feelings and those kinds of things and process versus run, which is our fight-or-flight [response]. So that makes a ton of sense.

Dr. Jill 23:02

Say someone has never tried them before and they have a post-concussion injury, are dealing with trauma, can't sleep, or are anxious. How would you recommend they start or try that? Would it be just at bedtime or during the day? What would be a typical recommendation for a patient who was struggling with some of these issues?

Dr. Hyla Cass 23:21

It depends. It depends on the issue. If it's insomnia, you'll want to take it close to bedtime, although some people have a paradoxical reaction. Even though it should

make you sleepy and help you relax, occasionally somebody gets a little activated. I say, always start taking it during the day anyway or take it on a weekend when it won't matter. Sometimes people will take it to help them focus, which it does beautifully, and they find it makes them drowsy because that's their setup. That's their internal chemistry. So you never quite know. The average is that it'll do both. If you take a CBD, it'll help you focus during the day and sleep at night.

Dr. Hyla Cass 24:08

I actually developed my own line of CBD because I wanted it to have certain qualities in it. I wanted a good taste. I didn't like the grassy taste of most of the formulas, so I put in MCT oil, which is healing in its own right, and added some organic essential lemon oil for flavor. So that's good and organically grown. And there are different formulas. I have something that's a daytime one. That also speaks to what you just asked. The daytime one has specific terpenes that are more activating and focusing. The evening one has more calming and relaxing terpenes.

Dr. Hyla Cass 24:49

In the cannabis plant, we have not only CBD and THC, but we also have terpenes. Terpenes are a really important part of all herbs and plants. It's what gives them their distinctive smell, like oregano or lavender. We smell them and they have medicinal qualities. It's the same thing with CBD. And we can add specific terpenes to boost it even further.

Dr. Jill 25:19

And that's what I was going to ask you about because I knew these terpenes and things have been really important and have been studied. And I know that your products are really holistic, as we would expect because they have a little bit more of the spectrum of those active components in them.

Dr. Hyla Cass 25:34

Right. I recommend that people get a bottle of day and a bottle of night and then they can experiment. Basically, you start low and slow and gradually build up. Let's say you get a 750-milligram bottle, which is 25 milligrams per ml, which is a whole dropper. But the dropper is marked off. It's a measured dropper, so you can titrate. Start off with maybe half a dropper or a quarter of a dropper. Put it under your tongue, preferably close to a fatty meal, because it's fat and it will be absorbed and digested better because you've eaten some fat, [such as] avocado, salmon, or

whatever. Let it absorb under your tongue for 30 seconds to a minute. And notice what happens in the next 10 to 15 minutes. You could have an effect on your target symptom. The pain goes away. Anxiety goes down, whatever it is. And if it doesn't, if that's not enough, then you do another dose. You can keep going that day or wait until the next day, try again, and increase it more until you find what your dose is. And then you're usually dosing two or three times a day.

Dr. Jill 27:01

Yes. And I want to be clear because you and I both were a little apprehensive years ago when we first got introduced to CBD and its benefits. But for those of you listening, you don't get high from CBD by itself. THC is the component. And Dr. Cass can clarify if I'm saying this wrong, but a lot of people are nervous and they've had the stigma around it. And [by examining] the science of CBD and our cannabinoid system, to me, it is far safer than most of the drugs we prescribe. I want to be really clear that there's not a component here that makes you feel high in general. There are products out there that do that. But what we're talking about is primarily a CBD product. Is that right?

Dr. Hyla Cass 27:39

Yes. In fact, the cannabis plant has been bred to contain up to 25% THC. That's a lot. They're really squeezing out the CBD. They don't want CBD. And that's a little dangerous. A lot of young people, particularly [those] trying it for the first time, can end up having some really adverse reactions because it's just too much for their system. In the old days, it was more balanced. It may have been grown to have THC in it, but certainly not to the extent that it is now.

Dr. Jill 28:16

It reminds me of wheat. They've bred it to contain a lot more gluten than it used to. Now the US types of wheat that are grown are typically very high in gluten. And people can go to Europe and have that and not have a reaction, whereas here they do. It's a very similar idea, as we've hybridized some of these products to be more harmful than they were originally meant to be.

Dr. Hyla Cass 28:37

Exactly. By the way, when you have this reaction, people become agitated, they even become paranoid, and they end up going to the emergency room and getting an injection of very strong psychiatric medication, told that they'll have to be on it

maybe forever. These are young people and it's such a shame. What really needs to happen is that they need to get hold of some CBD and that will neutralize. It actually comes between the THC and the receptor. It kind of forces it out in a really good way and takes its place, which is calming and relaxing. It does the exact opposite of what the THC has just been doing.

Dr. Jill 29:25

Fascinating. One last thing and then I want to be sure to ask where we can find your products and we'll put the links in: There are differences in CBD receptors genetically with people, right? I know I found out recently that I actually don't have a lot of receptors or there's some reason because I have trouble telling a lot with them. Now, in patients, I've seen amazing results. But I've always wondered. Have you seen that? Are there any specific genes you've seen or genetic components where people are less sensitive or maybe need different types?

Dr. Hyla Cass 29:57

Usually, it's because their endocannabinoid system is low. So what you do is keep titrating up until you get a dose that really works. And then, after a while, you don't have to keep taking high doses. After a while, [through] neuroplasticity, the brain adjusts and you may not need as much.

Dr. Jill 30:19

So you kind of sensitize the receptors in someone like that. And then once they have the effect of sleep, less anxiety or whatever else... Typically, when people use CBD for whatever reason that we've talked about, are they off and on using it long-term or is it more short-term and then they're balanced and then once in a while? What would you typically do?

Dr. Hyla Cass 30:38

It really depends. It really depends. I know I take it all the time.

Dr. Jill 30:44

Yes. I have patients with pain or whatever else; it's just a profound game changer. And like I said, if we compare it to any sort of oxycodone, over-the-counter [medication] for pain or anxiety, or benzodiazepines, this is such a safe way to go compared to many of the drugs that we use. And the evidence is very strong.

Dr. Hyla Cass 31:01

Of course. Not only that, over my years of practice, what I did a lot of was help people taper off of these medications, which many people should not have gone on in the first place. But using CBD in the withdrawal process is very, very helpful. It helps regulate the other neurotransmitters, [such as] GABA and serotonin, which are calming and make you feel good. It balances your neurotransmitters and helps you in a really easy way to taper off the drug.

Dr. Jill 31:35

Fantastic. This is tremendous. Where can people find you and your products? I do know that people are dying to know. And I'll include the link. Tell us more about that.

Dr. Hyla Cass 31:46

My website is DrCass.com. You'll find a lot of information, a lot of how-to information, and background information. I have some blogs. In fact, I have a blog on traumatic brain injury and CBD.

Dr. Jill 32:04

I just went there. I see all kinds of great research. And look at this: There are topicals. Tell us about your topicals. I see some facial products.

Dr. Hyla Cass 32:10

Yes. I have people who just swear by it. They put it on for their joint pain and it's amazing.

Dr. Jill 32:20

That sounds super helpful.

Dr. Hyla Cass 32:21

And I have a face serum—something for your eyes for those wrinkles that happen to show up as we age—and also a nice face oil. It's not oily like a heavy oil; it's just a nice, healing oil that does a lot. There's a lot that CBD does for your skin as well.

Dr. Jill 32:41

Yes, fantastic. I'm excited to try some of those myself. Very good. Good. We will include that link. I'm going to go back and take a look at this. Any last words of

advice to our listeners? This is a really important topic, and I think it's such a great alternative to some of the drugs, whether it's inflammation or pain. Like I said, we talked about neurological inflammation and seizures. I see so many people nowadays with some sort of encephalopathy, whether it's from trauma, infection, or inflammation. As we briefly talked about before, there are so many patients now with Lyme disease and mold-related illnesses. This is something that can be very helpful for them too. Is there anything we didn't mention that you can think of that would be another indication or that people might be thinking about that might be a little unusual?

Dr. Hyla Cass 33:32

I think we covered a lot of it. It's very good for dementia. It helps to break down amyloid plaque and it helps to build up BDNF, which is a brain-derived neurotrophic growth factor. It helps to regrow neurons and connections. It's pretty important in our older population.

Dr. Jill 33:51

It is. And that is becoming epidemic, isn't it?—the early dementia and Alzheimer's.

Dr. Hyla Cass 33:57

And then, of course, you have to treat everything else that's related to dementia—it could be Lyme and mold and all the rest—so it's pretty complicated. I also want to say that I have a gift for your listeners and that is a 15% discount with the code word DrJill15.

Dr. Jill 34:19

Awesome. Thank you, Hyla! That's exciting! We will be sure to share that as well. If you guys want to check out her products, I will include that link. And thank you so much for taking the time and energy to talk to us. This is such an important topic and I really, really appreciate you today.

Dr. Hyla Cass 34:38

And thank you for the opportunity. I just love educating people about CBD. Don't be afraid of it. You start low and slow and you gradually build up and you'll be really happy you did it.

Dr. Jill 34:50

Yes, I couldn't agree more. Thanks so much!