Closing the Circle of Healing

An Interview with Erminia “Mimi” Guarneri, M.D., F.A.C.C.

Russ Mason, M.S.

Erminia “Mimi” Guarneri, M.D., F.A.C.C., is the cofounder and medical director of the Scripps Center for Integrative Medicine, in La Jolla, California. This Center is part of the Scripps Clinic in La Jolla. The Center combines state-of-the-art allopathic facilities with a broad spectrum of integrative therapies. Its mission is to heal people by combining science and compassion.

Dr. Guarneri is board-certified in cardiology, internal medicine, nuclear medicine, and holistic medicine. She is licensed in the states of New York and California. Dr. Guarneri is a member of the American College of Cardiology, Alpha Omega Alpha, and the American Medical Women’s Association; is a diplomate of the American Board of Holistic Medicine; and is the chairperson of The Bravewell Clinical Network. She has written papers for *The Journal of Echocardiography* and *The Annals of Internal Medicine*. Dr. Guarneri has been nominated for the Bravewell Award for Leadership in integrative medicine and has been honored by the American Heart Association.

Russ Mason: How did you make the journey from an allopathic practice into integrating allopathic and holistic care, which led to the foundation of the Scripps Center for Integrative Medicine?

Erminia “Mimi” Guarneri: I began with very conventional, cardiology training at some fine institutions, such as Cornell Medical Center [New York City] and the Scripps Clinic and New York University Medical Center [New York City], and—within my training—I was taught crisis and disease management; to take care of the sickest people. So I treated people who were very ill and most vulnerable.

I then began doing coronary stenting and angioplasty, and doing the mechanical fixes for the heart. Interestingly, the stent was basically invented where I am now, at the Scripps Clinic.

Although crisis management is gratifying—and ego-fulfilling—work, I slowly came to realize that I was just doing a mechanical fix, and that the patients were not being meaningfully educated.

I learned many lessons from my patients, and this eventually led to the writing of the book, *The Heart Speaks: A Cardiologist Reveals the Secret Language of Healing* [Westport, CT: Touchstone, 2006]. The book is a series of lessons I learned over the years, told through patient stories.

RM: What did your patients teach you?

EMG: I learned that the heart is much more complex than just a pumping organ that can be repaired with a stent.

I came to realize that, yes, the physical heart does require proper nutrition, proper sleep, and exercise, but also requires looking at where someone is—mentally, emotionally, and spiritually. All of those areas—including nutrition—are where Western medicine is extremely weak. That is because Western medicine is a crisis-driven model. Physicians generally do not focus on prevention or health and wellness.

It’s really quite sad that few people ever say: “Gee, I’ll go to my physician to learn how to prevent something.” Most people go because they don’t feel right, and within Western medicine, prevention means having a mammogram. Well, a mammogram is not prevention—that is a screening test. Prevention is, for example, looking at a patient’s risk factors and using food as functional medicine.

So for me, as a cardiologist, I began to ask: “What can we do to complete the circle of care? What can we bring to our patients that is more of a holistic model? How do we look at the whole person?” I can give someone a statin and lower his or her cholesterol, but so what? The cholesterol comes down but if a patient is depressed or anxious or angry (which is the most toxic emotion for the heart), or in a bad relationship, or not exercising, these things are not going to get fixed with statin therapy.

There was no place I could send my patients and be certain that they were getting proper nutrition counseling, the best kind of exercise, or acupuncture if they needed it, or credible information about herbs and supplements. This ultimately led to the creation of the Scripps Center for Integrative Medicine.

RM: How did the Center come about?

EMG: I sat down with Rauni King [R.N., B.S.N., H.N.C., C.H.T.P./I.], who later became cofounder of the Center with me. She had previously been an ICU [intensive care unit] nurse and

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knew a great deal about trauma, diagnostics, and surgery. We discussed what was missing from our health care system.

We arrived at several key points: a holistic approach; a focus on nutrition (food is medicine); a place where physicians and patients can get information on herbal remedies; homeopathic therapies that are used in an evidence-based way; and a place where people are assessed for mind-body issues—such as depression, stress, social isolation. So Scripps Center for Integrative Medicine grew out of wanting to complete the circle of care in health care.

One thing I have always known, throughout my career, is the power of love to heal. I have always known that if you treat people with kindness and compassion, that if you let people know that you care about them, that their outcomes are better. I knew that from Day One of medical school.

RM: What was the genesis of your personal interest in holistic medicine?

EMG: When I was in my fellowship for cardiology I developed an infection that I got from a patient, a disseminated herpes infection. I was extremely ill for about a week. Prior to this I had been working long days without a day off. Now I was in bed, unable to move or to eat. It was profound for me.

That is when I had my first Healing Touch™ [see box entitled Resources] treatment by Rauni King, whom I had not previously met. This healing literally turned me around. Rauni did a couple of techniques that put me back in my body, energetically. My energy improved by about 70 percent. So I asked myself: "What is this? If this can help me so much, can it help my patients?"

Ironically, a week later I went on an Ornish Retreat [see box entitled Resources]. I went as the research investigator for the research that we were planning to conduct at Scripps. I spent a week with several hundred heart patients who were learning med-

Erminia "Mimi" Guarneri, M.D., F.A.C.C., Scripps Center for Integrative Medicine.

Walking the labyrinth. In May 2006, the Scripps Center for Integrative Medicine staff, patients, and donors unveiled and created a walking labyrinth measuring 60 feet in diameter. A labyrinth is a single continuous path that brings the body, mind, and spirit together through a walking meditation. Labyrinths have appeared throughout time and in various cultures all over the world. They usually denote sacred space and represent the symbolic path of the spiritual journey. Photo courtesy of Dr. Guarneri.

itation and yoga, and how to exercise, and who were eating a vegetarian diet. So I saw a wonderful holistic approach right before my eyes and, more importantly, I saw people getting better.

Within 1 week, people said their angina was better. They were cutting their insulin requirements in half, which was absolutely unheard of. As a physician, I was sitting there thinking: "I have had these two profound experiences in a very short period of time." They got me thinking quite differently.

RM: What happened as a result?

EMG: When I returned to the Scripps Center, I put patients through the Ornish program. I did the program along with them, so when they went to yoga class, I went to yoga class.

But I had a third experience also.

I developed a frozen shoulder, which was extremely painful. In the yoga class at The Scripps Center, I found I could not lift both arms up. I had several steroid injections but they didn't help. Then I had to go to New York City. While I was there, a friend told me of a Traditional Chinese Medicine [TCM] physician, saying, "maybe he can help your shoulder." And I thought, "well, why not?"

The address for the TCM practitioner was a woman's manicure/pedicure shop on Madison Avenue in New York City. The doctor was in the back, past the rows of manicures and pedicures. So I went to the back of the salon and there the doctor was—in this tiny room! He took a look at my shoulder and he said: "I just want to do acupressure today."

So he did an acupressure treatment; and I must say that I have never experienced anything like it, in terms of muscle relaxation. He said: "I want you to come back tomorrow. I will do acupuncture then."

I returned the next day and I had the acupuncture treatments, and off I went to my meeting. In the middle of the meeting I had the most profound, *profound* pain in my shoulder and arm. I thought I would fall to my knees the pain was so intense. I called the doctor and he said: "Oh, not to worry—you're having a healing crisis."

That was the first time I ever heard the expression "healing crisis." He said: "This is a good sign!" Within 24 hours, my shoulder was fixed. I could lift my arm and have never had a problem with it again.

So these are three experiences that the Universe, I believe, provided me with so that I would open my eyes and say: "O.K. I need to look at these things because, if they helped me, then can that help my patients?"

Not long after that, I went to the American Board of Holistic Medicine's [ABHM] Board Review course, in preparation for taking the boards. As I sat through lecture after lecture from holistic physicians who presented evidence to support the use of such things as acupuncture, guided imagery, and good nutrition, I began to see this whole other world of medicine to which I had never been exposed.

That was 6 years ago, when I was the student, sitting in that audience. Now I am on the ABHM board and we are going to run the entire board review and conference here at the Scripps Center for Integrative Medicine this month [see box entitled About the Integrative Holistic Medicine Conference].

RM: What is especially striking is that your interest began with your own health issues so that you could experience aspects of holistic healing first-hand.

EMG: Yes, and I was able to bring these healing methods to my patients. You can imagine, as a cardiologist, when someone comes to see you, the first thing you can do is to teach the patient how to eat right. We can decrease the amount of drugs we are using if we simply teach people proper nutrition.

Some of my patients came in with orthopedic problems. They would say: "I can't exercise because my back hurts" or "my knee hurts." So, that was a perfect opportunity to create a pain-management program with physicians who are also trained in TCM.

Over time, the Center began to teach people how to prevent disease; the best way to lose weight; and how to manage stress, headaches, and irritable bowel syndrome. So, at this point, we have physicians treating a spectrum of problems.

RM: You are the director of the Center, but do you also see patients?

EMG: I do. I see patients and do cardiology consultations. Many of the patients I see are those who are trying to prevent heart disease or have already had stents or bypasses and want to avoid having more.

RM: Not long ago, I read an article about how the heart "talks" to the rest of the body in a nonphysical way, and that, during a heart transplant, the rest of the body "knew" that the heart was no longer there.

EMG: We need to acknowledge that, when you look at the heart—with all of its complexity and dimensions—there is a great deal more than the mechanical pump. For example, there is something called "Broken Heart Syndrome" and people can experience almost instantaneous weakening of the heart muscle by an emotional trauma. This has been described in the medical literature.

RM: How does this take place?

EMG: It is believed to occur with stress hormones. It is a massive surge of hormones, such as adrenalin, cortisol, noradrenalin, or aldosterone. What is very interesting is that when we give people cardiac medications, all of the medications have an impact on the stress hormones.

It is fascinating to me that we give people beta-blockers, which have been shown to prevent heart attacks by blocking adrenalin. When we give people drugs for diabetes, we are trying to make an impact on cortisol. When we give people antidepressants and antianxiety medications, we are trying to keep cortisol levels down.

So it is fascinating to me that so many of the cardiac drugs have been designed to block the sympathetic nervous system [SNS]; unfortunately, not enough physicians make the connection that the SNS can be affected in other ways, such as by yoga, meditation, *t'ai chi*, or saying mantras. There is good research supporting the positive benefits of meditation, mindfulness, and spirituality for stress reduction. These practices all produce reduction in anxiety, reduction in depression, and reduction in stress. These are interventions that cost very little.

RM: Severe stress can weaken the heart muscle, but what about the day-to-day stresses that everyone encounters?

EMG: We know that people who are stressed have poorer outcomes. We know that if you have an episode of anger and rage that you increase the risk of heart attack by 230 percent over the next 2 hours.

So, yes, we now know that there are emotional states that are extremely toxic to the heart. Anger, hostility, and rage are the worst; bad news—Broken Heart Syndrome—especially in women, is very significant; depression is very important also.

You have to remember that, when you are in a stressful situation, you can have either very good or bad coping styles. So, for example, if you are under stress, you might say: "I am going to go ride my bike" or "let me go walk my dog." Someone else might say: "Let me smoke cigarettes and drink some martinis" or "I am going to eat comfort foods because I am depressed." When people are depressed, they frequently do not have the will to live so, without the will to

live, they don't engage in healthful behaviors. One doesn't say: "I'll have an egg white omelet," but rather, "I'll smoke cigarettes."

The Institute of HeartMath® [Boulder Creek, California; see box entitled Resources] has been doing research involving the communication links between the heart and the brain. The heart and the brain communicate, via the nervous system, on a non-stop basis. This occurs mostly through a large nerve—the vagus nerve. What is surprising to many is that the heart itself has nervous tissue, just like the brain.

RM: So there are cells in the heart that function as nerves?

EMG: Yes, this is true nervous tissue. What is surprising is that the heart sends more messages to the brain than the brain sends to the heart. So, when we respond emotionally to something, there is frequently a communication between the heart and the brain, and we can look at the impact that our different emotions are having on heart rate variability. This is one of the electrographic measures of the heart. So when an individual is in an angry, tense, frustrated state, the heart beats incoherently and the heart rate variability decreases, and this is associated with the increased risk of sudden death.

Also, when a person is in a deeply emotional state, he or she frequently does not make the best decisions. The Institute of HeartMath has done fascinating research in teaching people very simple techniques, such as deep breathing or thinking about something they love. These are simple techniques to help people shift mentally and emotionally from the "sympathetic active state" to a "parasympathetic (more relaxed) state." It is in the more relaxed state that people are more focused, their DHEA [dehydroepiandrosterone] levels are up, and their cortisol levels go down. There is research that suggests blood-sugar levels improve in a parasympathetic state.

For the first time ever, a major medical institution, The Cleveland Clinic [Cleveland, Ohio], will be studying the relationship between the heart and the brain.

RM: You mentioned proper nutrition earlier. It has been widely reported that many individuals are deficient in heart-healthy nutrients, such as magnesium and coenzyme Q10 [CoQ10].

EMG: Right. I think magnesium is very important for the heart, for the prevention of arrhythmia. Many physicians give patients diuretics and forget to give the patients magnesium, so they end up being magnesium-depleted.

I do use CoQ10, particularly for my patients who are using statin therapy. Also, fish oil is very important for the heart. I cannot overemphasize how heart disease is a disease of inflammation, and if we can keep inflammation down, then we can improve outcomes. So my patients take at least 2 g of fish oil per day—sometimes more. I am very specific about the brand we use since we want to control the mercury.

Also, when you think about heart disease, you have to think about insulin resistance. Insulin resistance is significantly associated with coronary disease. A third concern for heart disease is methylation—homocysteine. I am sad to report that, in cardiology, some people say, "oh it doesn't matter," but I think that view is short-sighted.

Resources

Healing Touch™ Program

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Healing Touch™ is a complementary energy therapy in which practitioners use their hands with light or near-body touch to help clear, balance, and energize the human energy system, with the goal of promoting healing. Healing Touch, which may be used in conjunction with conventional therapies or as a stand-alone treatment, is now used for patient care in more than 25 hospitals in the United States.

The Bravewell Clinical Network

The Bravewell Collaborative

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In 2003, the Bravewell Collaborative launched the Bravewell Clinical Network. The Network's mission was to assist other healing centers to develop integrative medical care and develop models for care that could be shared with other institutions. The Bravewell Clinical Network has, at the present time, 8 centers that deliver integrative medical care.

Preventive Medicine Research Institute

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Dean Ornish, M.D., is founder and president of the Preventive Medicine Research Institute. He is also a clinical professor of medicine at the University of California, San Francisco. Dr. Ornish is known primarily for the reversal of coronary artery disease via interventions such as diet, yoga, meditation, and group support. His program was recently approved by Medicare and is available at 35 hospitals throughout the United States.

HeartMath®

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The Institute is a nonprofit organization devoted to research and educational initiatives on academic and emotional learning. HeartMath, L.L.C., is a company that provides a range of services, products, and technology aimed at stress reduction and boosting performance, productivity, health and well-being.

About the Integrative Holistic Medicine Conference

Science and Clinical Application of Integrative Holistic Medicine

When: October 28–November 3, 2006

Where: Paradise Point Resort, San Diego, CA

What: Presented by the American Board of Holistic Medicine (ABHM) and the Scripps Center for Integrative Medicine, the Science and Clinical Application of Integrative Holistic Medicine conference will offer information to health care practitioners on how physiology, biochemistry, nutrition, and herbs, exercise, emotions and spirituality make an impact on health and healing. More than 25 experts will present applications for treating effectively America's most common diseases and chronic conditions, such as heart disease, diabetes, chronic pain, migraine headaches, cancer, and menopause. The speakers will include:

Robert Anderson, M.D.—founder and executive director, American Board of Holistic Medicine

Mimi Guarneri, M.D., F.A.C.C.—founder and medical director, Scripps Center for Integrative Medicine

Lee Lipsenthal, M.D.—president, American Board of Holistic Medicine

Steven G. Pratt, M.D.—best-selling coauthor of *Superfoods RX: Fourteen Foods That Will Change Your Life* [with Kathy Matthews, New York: HarperCollins, 2004]

David Simon, M.D.—medical director, The Chopra Center for Wellbeing

Lawrence Palevsky, M.D.—president, American Holistic Medical Association

Continuing medical education credits will be offered for physicians, nurses, pharmacists, physician assistants and nurse-midwives.

For more information, contact: Scripps Conference Services at (858) 587-4404 or visit www.scrippsintegrativemedicine.org for a conference brochure or to register.

I use B vitamins to control the homocysteine levels and fish oil to decrease inflammation and triglycerides. If people have high cholesterol, I may use red yeast rice to lower cholesterol. If they have high blood sugar I may use cinnamon [*Cinnamomum verum*], or gymnema [*Gymnema sylvestre*], or fenugreek [*Trigonella foenum-graecum*]. The supplement regimen has to be tailored to what is going on with the person.

RM: Given that supplements are part of nutrition, what kinds of foods do your patients receive at the clinic?

EMG: As a broad sweep, I consistently recommend low-glycemic index foods. These are foods that don't spike up the insulin levels. I support an anti-inflammatory diet. This means cold-water fish and herbs such as turmeric [*Curcuma longa*], ginger [*Zingiber officinale*], and rosemary [*Rosmarinus officinalis*]. I tell them to eliminate white flour, sugar, and alcohol. Green tea [*Camellia sinensis*] is good to drink for its anti-inflammatory properties.

Of course, I recommend that they eat green leafy vegetables and berries. But I really try to steer patients away from anything that will spike the insulin level. That is because, as one increases the insulin level, this also increases insulin-growth factor, so the person puts weight on in the midline. The fat in the midline is very different from

the fat that lines the rest of the body. The person ends up with production of inflammatory cytokines, such as tumor necrosis factor.

Every person who is admitted to the Center must meet for 1 hour with a nutritionist. This is a mandatory requirement. That is how strongly I feel about nutrition.

RM: So when your patient meets with a nutritionist, your goal is to educate the patient about making responsible dietary choices?

EMG: Absolutely. But our focus on education goes further than that. We have education for the community; we educate physicians, interns, residents, and medical students on a *daily* basis. I had 2 here today.

On Saturday, October 28th, we are doing a full day of education program called "Introduction to Integrative Medicine." We will cover such topics as homeopathy, guided imagery, bioidentical hormone replacement, integrative pain management, super foods, and other topics [see box entitled About the Integrative Holistic Medicine Conference].

For physicians, we have a week-long health care professional review course. This is prior to the administration of the board examination. So, with that, we are covering all areas of integrative medicine. And, from a disease category, also we will ask: "What can we do for sinusitis, for irritable bowel syndrome, and for depression?" It has been very important to educate our peers, and our community also.

Every year, we host a conference called "Destination Health: Renewing Mind, Body and Soul." The next one is being held March 11–16, 2007 on Kauai, Hawaii. We have information about this conference and all other conferences on our website [see box entitled To Contact Dr. Mimi Guarneri].

RM: What was it that first motivated you to become a doctor?

EMG: I always had an intuitive knowing that I was meant to do healing work. Other subjects, such as anthropology, were interesting to me but I always felt I would be a doctor. So that is what I do, but it has been expanded to include other disciplines, such as Healing Touch. This opens up a broader awareness that we are more than just our physical bodies

The heart has an electromagnetic field that can extend 15 feet from the body. I modulate the heart every time I put the stethoscope on someone's chest. I do what is called Heart Modulation, as part of the Healing Touch protocol.

RM: What is Heart Modulation?

EMG: Basically, this is working within the patient to open up the heart *chakra* and to balance the energy field. This is something I often use with my patients, whether it is for pain or to get them grounded—whatever it takes.

RM: How did you learn about Healing Touch?

EMG: I attended a program for health care professionals (doctors and nurses). It has five different levels, and it takes years to move from one level to the next level and, with every level, one learns more techniques and the healing becomes more intense.

RM: Do you find that your intuitive abilities increase as you work with Healing Touch?

EMG: Absolutely. I also find that my intuitive abilities increase when I “turn off” the noise. Here is an example: I recently spent a week in a country where I don’t speak the language. I had no clue what anyone was saying. So I had extra time for my chanting (which is part of my spiritual practice) and my quiet time. I did not participate in the talking or the chatter. My intuition heightened. My ability to see auras was heightened. I went into a higher vibration, and I think this was due, in part, to tuning out the noise.

RM: Your life’s journey has brought you now to creating the Scripps Center for Integrative Medicine. Is this fulfilling?

EMG: Yes, it has been very satisfying to create a truly healing environment. Even the architecture of the building was specifically designed to create a healing environment: The rooms are mathematically structured to enhance healing energy. We have state-of-the-art technology here—thanks to generous financial gifts from donors. We have a labyrinth on our grounds. Can you imagine a labyrinth on hospital grounds? Of course, healing environments require remarkable people and that is what we are blessed to have at the Scripps Center for Integrative Medicine.

RM: You are involved also with The Bravewell Collaborative. What is it?

EMG: It is a group of philanthropists who are dedicated to shifting the paradigm of health care through integrative medicine [see box entitled Resources]. Many of these philanthropists have been generous supporters of integrative medicine, or what has previously been called CAM [complementary and alternative medicine], for many years—giving donations to various centers. However, what is unique about Bravewell is that one sees philanthropists coming together, pooling their money, and committing resources to the betterment of health care.

For example, Bravewell has recently agreed to fund the

infrastructure for a practice-based research network, for the 8 integrative centers in the country.* This is something that will allow for the pooling of research from 8 different sites, from across the United States. Also, within the 8 centers, we are in close communication and meet every couple of months to share our successes, failures, policies, and procedures. We work together to help each other—and other centers—grow. Bravewell supports the environment for the doctors, administrators, and so on, to come together, and this is something that would not otherwise happen.

Bravewell provided huge financial support to the PBS [Public Broadcasting System] series, *The New Medicine*. This was a two-part series on prime time television [aired on March 29, 2006].

So, Bravewell is using its philanthropy to advance integrative medicine on a very broad level. I don’t know of any group that has ever done anything quite like this.

RM: How did you become involved with Bravewell?

EMG: I was one of the original people who worked with Penny George[†] in the early creation of Bravewell. I was with her at her home in Colorado, where we had talks about creating a philanthropic network. So I have known Bravewell since its very beginning.

RM: Are there opportunities for institutions that are not a part of the Bravewell network?

EMG: Absolutely. There is another piece to Bravewell, the Academic Consortium for Integrative Medicine. This extends to 28 institutions, medical schools. Through the involvement of the deans and administrators the Academic Consortium is changing the face of medical school education. Bravewell funds this, as well as funding fellowships for physicians to attend the Program in Integrative Medicine at the University of Arizona [Tucson, Arizona] founded by Andrew Weil [M.D.] to become a Fellow in Integrative Medicine.

RM: You must be very encouraged about this and about the future of integrative medicine.

EMG: I am. People are now looking for ways to *prevent* disease. They are recognizing that the environment can cause, or contribute to, illness. People are recognizing that food—nutrition—is medicine. They are no longer satisfied—particularly with the rise of the baby boomers—saying: “I’ll break down and then you fix me.” Now people are saying: “I want to stay healthy. I want the information I need to stay healthy, and if something happens, I want options. I don’t want my only options to be drugs or surgery.” That is very promising for the future of health care. □

*The 8 centers are the Advocate Medical Group Center for Complementary Medicine; Alliance Institute for Integrative Medicine; Canadian Institute of Natural and Integrative Medicine; Center for Integrative Medicine, University of Maryland School of Medicine; Continuum Center for Health and Healing; Duke Center for Integrative Medicine; Jefferson-Myrna Bird Center for Integrative Medicine; and the Scripps Center for Integrative Medicine. Visit www.scripps.org/services.asp?ID=267&pID=208 for links to more information about the centers.

[†]Penny Pilgram George, Psy.D., a consulting psychologist for more than 20 years, is a cofounder and the president of the Bravewell Collaborative. Dr. George is also a cofounder of the Sells-Green-George Consulting Psychologists and President of the George Family Foundation. She is currently focusing her philanthropic efforts to advance the field of integrative medicine. For more information, visit: www.georgefamilyfoundation.org/integrativeMedicine/aboutPenny.htm