

Michael Lares shills unproven medical device with references to Nicole's intimate health issues.

## How To Fall Asleep Faster, Stay Asleep, Nap Efficiently, Beat Migraines & More.

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<https://bengreenfieldlife.com/podcast/sleep-podcasts/how-to-fall-asleep-faster/>

**Ben:** Hey folks, It's Ben Greenfield here, sitting in front of a roaring fire on a freezing cold night way up north in British Columbia, and you'll find out during this podcast episode why I'm in that specific scenario.

He's an expert in human performance and nutrition, voted America's top personal trainer and one of the globe's most influential people in health and fitness. His show provides you with everything you need to optimize physical and mental performance. He is Ben Greenfield. "Power, speed, mobility, balance – whatever it is for you that's the natural movement, get out there! When you look at all the studies done... studies that have shown the greatest efficacy..." All the information you need in one place, right here, right now, on the Ben Greenfield Fitness podcast.

**Ben:** Hey, folks. It's Ben Greenfield here, and it was a few weeks ago that I published this article. I got tons of questions, tons of comments on it. The name of [this article](#) was, get yourself ready for this, "A Tiny Half-Ounce Piece of Game-Changing Sleep Technology (And How to Use Pulsed Electromagnetic Field Therapy for Sleep)."

Now I know it's a mouthful, but in that article I talked about this device that I've been putting on my collarbone before I go to bed at night. It's something I've been using for sleep, it's something I've been using for naps, it's something I've been using when I wake up at night. I've even been using it on airplanes, and the results have been kind of interesting.

So not to go off on too much of a rabbit hole here, or to dive down too much of a rabbit hole, but I've got this new sleep tracking device I've been using, I'll talk about that later, so just stay tuned for that, but I've been measuring some things with this sleep tracking device. My sleep efficiency, for example. Since I started slapping this thing on my collarbone before I go to bed at night, my sleep efficiency has jumped from 81% up to 97%. I've gone from an average of 52 minutes of wake time during an average night of sleep down to a total wake time of 28 minutes during an average night of sleep. My deep sleep, the amount of time I've spent in the deep sleep part of my sleep cycle, it's gone from 33 minutes per night to 2 hours and 22 minutes. My sleep latency, which is how long it takes to fall asleep, that's gone from an average of 16 minutes down to 7 minutes. My heart rate during a night of sleep, this one kind of shocked me, it dropped from 39 beats per minute down to 36 beats per minute. And the list goes on and on. I'm working on a pretty comprehensive article in the future that's gonna show all these sleep packing results, and we'll kinda delve more deeply into sleep quantification, but in the meantime, I decided that I wanted to get on to the show the guy who introduced this device to me, this device called the Delta Sleeper. It's SR1, which stands for SomniResonance, the [SR1 Delta Sleeper](#). That's the name of this device that I've been putting on my collar bone, and he is a guy who, well, he's really a man after my own heart. I'm actually sitting here with him.

I'm sitting in beautiful British Columbia, way up north in British Columbia, in a country that is beyond words to describe. I'm surrounded by this mountain range. I've been fishing and hiking. I've got my two little boys here, and we've been riding horses, and exploring thousands of acres of ranch, and it's just been an amazing outdoor adventure. And the guy who lives in this jewel up in BC is the same guy who sent me this device, the same guy who's sitting right here with me now. I know it's very out of the ordinary for you guys to get a chance to hear me interview somebody and have them be right here with me, and not on Skype or something like that, but today we're sitting here and my guest's name is Michael Lares.

Michael used to be a US Navy diver. He's an outdoor enthusiast. He's now becoming a good friend of mine. He's a good man. He's got a fantastic story. And in today's podcast, you're not only gonna discover how this device works

and how you can use it, but you're gonna learn a lot more. Just about how to improve your life, the very interesting health journey that Michael's been on with his family, and much more. So this is gonna be a must-listen for you in my opinion.

Now a couple of quick things before we dive in and welcome Mike to the show. First of all, you can access the show notes for everything that Michael and I talk about today over at [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). That's [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). The other thing you should know is that if you have any questions, any comments, anything like that as we go, you can also go to the show notes and you can ask your questions over there, and Michael or I will be happy to help you out as we go. So that all being said, Michael, dude, welcome to the show.

**Michael:** Thank you. It's a pleasure to be sitting here with you.

**Ben:** Yeah. I'm sitting here with a crackling fire behind me, my kids are inside, we just returned from a day on the lake of fishing. Tell me how you came to be way out here in the middle of nowhere. 'Cause we really are in the middle of nowhere right now. We've got these mics set up, but it's kind of funny. We've got this fancy technology and we're out in the sticks of BC. No cell phone access. It took us three hours to drive in through bumpy roads from this tiny little airport. How did you come to be out here?

**Michael:** Trust. Dreaming about something and trusting that it'll come. And following my nose and following instinct. Taking chances, taking risk.

**Ben:** Well, you told me a really interesting story when we were driving out here on that three hour drive where we were keeping our fingers crossed. The kids weren't gonna get all car sick. You told me a story about your wife and how that was part of the reason that you wound up here in the first place. Your wife, who's been cooking amazing meals for us the past few days, by the way, as we wander in from the cold, but tell me the story. Because I think this will be really interesting for folks who are into health.

**Michael:** Yeah. That was the trust factor that kicked in that brought us to believe in we could find a place like this. She had a really bad accident when my son was born, my second child. It happened in the hospital. And that just changed everything. We're a big corporation focused on the bottom line, focused on the profit margin.

**Ben:** You were running like a dive company.

**Michael:** Yeah. A commercial...

**Ben:** A deep sea commercial dive type of thing.

**Michael:** Full-blown commercial dive company. We had a lot of exposure, big projects going on. Some might remember when they blew the old Charleston Bridge back in 2000, that would be 2005.

**Ben:** Charleston, South Carolina?

**Michael:** Yeah. We were working on that project, clearing it. You know, just a lot of stuff going on. And when that accident happened, it just forced us, just to kinda sit back and re-evaluate everything, you know. So it just, it went in to where the family and healing. And we've always helped people and always been interested in campaigns with wellness, but this brought it to a whole new level.

**Ben:** Yeah.

**Michael:** Literally. So, we had to look for a drier climate because of her injuries.

**Ben:** Well, back it up a second. What kind of injuries? What are we talking about here?

**Michael:** She just had our son, and the first time they go to the bathroom, they are assisted.

**Ben:** This is your son Dylan who's sitting inside with my boys right now?

**Michael:** Yeah. He's 10 now.

**Ben:** Watching, I think they're watching TV now 'cause we wanted to keep them quiet.

**Michael:** Yep.

**Ben:** We can't get a bunch of kids running into the podcast. So this was back when your wife had Dylan?

**Michael:** Yeah. Just two hours after he was born, she went to the bathroom for the first time, and any of the ladies out there who've ever given birth know what that's about. That's kind of a risky maneuver, so they always go in there with the nurse.

**Ben:** I mean, 'cause it's a risky maneuver to go into the bathroom at a hospital after you've had a baby?

**Michael:** Yeah. The first time, yes, 'cause you've had so much blood loss that they can have, it's not uncommon for women to pass out or have complications with just dizziness, or not being sure-footed 'cause they've had so much blood loss. But she went in there with a nurse, and she told the nurse she felt faint, and I heard her say that 'cause I was in the room with our new son, and I had a two year old daughter then. The next thing I know I see the nurse in the doorway and I couldn't get it out of my mouth fast enough. I said, "Don't leave my wife in there." All I got was, "Don't leave..." Boom. I heard my wife hit. She blacked out face first on the concrete floor. I don't know how in detail you want me to get, but we come around the corner real fast, you know...

**Ben:** You told me it sounded like a pumpkin.

**Michael:** Yeah. It's literally like a bus and a pumpkin on the road, you know. It was a horrific sound. And the nurse turned and looked and, "Oh my God!". She screamed and ran. She was only four feet from her, and I come around the corner, and it's just, I don't mean to be too graphic, but there's blood everywhere. She's convulsing. My daughter starts freaking out. My son, I'm holding him. He's two hours old. And I knew right then and there if she'd lived, my whole life had completely changed. And it was just a mess after that for the first 10 minutes she couldn't get, I'm not gonna hammer on the hospital 'cause it was just a small mistake that changed your life forever, you know. But anyway, she sustained such heavy injuries with a broken palate. She had to have seven root canals on her front teeth just to save 'em.

**Ben:** She's got, and this is like a brand new newborn baby she has at the same time.

**Michael:** Yeah. He's two hours old. Yup. She broke her nose, fractured teeth, and so for the next few months, we breastfed, of course. So for the next few months, it was just operations, procedures, doctors, we're under hospital care for a couple years. So we couldn't branch out on our own to explore healing in a natural pathway, we had to go the regular Western medicine way. And that was tough 'cause there's a lot of pain meds involved. They're all supposed to be okay for breast feeding and whatnot. But it was just...

**Ben:** Yeah. But even if those were okay for breast feeding, I mean you know, and we'll talk about sleep meds later on, but a lot of this stuff, addiction, liver toxicity...

**Michael:** You know, so we got our frontline exposure to some pretty hard stuff. And my wife, she's amazing. She'd be in there getting four root canals done one day, she'd breastfeed Dylan, I'd be sitting in a truck outside with 'em and

she goes in for surgery, but she's got to take the locals because she's breastfeeding.

**Ben:** Yeah.

**Michael:** So she gets four root canals done in one day, and we come back a week later, and she gets the other three on the bottoms done and same procedure. But I literally had to pull in at that point.

**Ben:** They had to put her whole friggin' face back together while she was trying, well, she and you were trying to take care of this new baby.

**Michael:** Oh, yeah. But we didn't even realize the extent of the injuries for months even a year. You know, we'd go to a maxillofacial, they call it, I guess.

**Ben:** Yeah. A maxillofacial.

**Michael:** Yeah. And they do x-rays like, yeah, there's a few bits of teeth in your lip, and they'd pull it out. Four weeks later, here comes another chip of a tooth surfacing out of her lip, you know. It's enough to make a man mean, hard, and just really turn against things. But we never let it do that to us, we just kept exploring best possible ways of healing. It was two years, I mean, we had reconstructive surgery on her nose a year after the accident because that's when it was okay to have surgery 'cause she healed up enough. But she was always healing the wrong direction. She only had 10% of capacity through one nostril and the other one was completely blocked off. So if you can imagine living like that plus the pain. She had a lot of neurological pain, face pain, radiating pain, barometric pressure effects on her. We lived in the southeast then and when a storm would roll through, which is every three or four days in the southeast, she'd just be...

**Ben:** Yeah. You don't even think about the kind of stuff that pressure does to your face.

**Michael:** Oh, yeah. It's agonizing. Anybody's that's got a trick knee or an elbow out there knows when it's gonna rain.

**Ben:** Yeah.

**Michael:** Or a storm's coming, what else you know, in her face and...

**Ben:** Yeah.

**Michael:** It was tricky. It was just...

**Ben:** This was 10 years ago. Dylan's 10 now.

**Michael:** Yeah. This was 2005, and 2006, and into 2007, and that made a big change with our plans and what we wanted to do there. You know, we had a lot of property up there in the mountains of North Carolina. Really quiet. We were looking at doing a deal on the mirroring property on the mountain property. But when this happened, I just pulled in everything and just went into survival mode with my crews and hiring guys in to run my projects.

**Ben:** So you were on the cusp of building like a dream home in the Carolinas, in South Carolina.

**Michael:** We had the dream home. We built it.

**Ben:** And you had this dive company that you were running, and you were like, you were successful, and you were getting ready to live the dream, and then all this happened, and just like crap hit the fan.

**Michael:** We were in the dream. We were just expanding. We were just basically buying all the property around us to create a barrier of just development and whatnot. Just trying to keep everything green with the mantra. You know, so we lived on almost 200 acres. We were gonna buy another 200 acres next to us, but this is right before the market collapsed, and my accountant told me if you try to buy this land, you're crazy. You just got too much going on with your wife's injury, you don't know what you're gonna have to pay for it.

**Ben:** Yeah.

**Michael:** In the next few years, so he advised against it. We didn't buy it.

**Ben:** And then you've got all these other environmental issues like this barometric pressure thing, for example, you were talking about where your wife's getting hammered living there.

**Michael:** Yeah. A developer bought the property next to us and he just started hacking up the forest. So we had...

**Ben:** You told me he wanted to build like 200 homes on those 200 acres?

**Michael:** I won't mention his name, yeah. But 200 homes on 200 acres on steep mountain property is a no-go. But they started carving up the land, and the watershed went red with Georgia clay, and it was North Carolina. It's red like Georgia clay, and Nicole just looked at me one day and she said, "I don't feel it anymore." And I said, "Don't tell me that." And she said, "I'm just telling you I don't feel it for here anymore. It's just noise, pain, storms." She's like, "We gotta change gears here." That was hard because we were living a dream, you know. Even though she had her injuries, we had two beautiful healthy children and that's always what kept us grounded. Sometimes you think you're jinxed or hexed with all these bad things going on, but that's just life.

**Ben:** So you started searching for a new place?

**Michael:** Yeah. We started looking out west. We flew to Montana, we went to Colorado. We looked at all these properties out west and we got close on a couple, and one thing led to another, and we found this ranch out in British Columbia.

**Ben:** The one we're sitting on right now?

**Michael:** Exact one we're sitting on.

**Ben:** Yeah, man. This is a jewel.

**Michael:** Thank you.

**Ben:** And I know for those of you who are listening, it may sound like a long intro to something about sleep, but what I find really interesting is, and what I've discovered about Michael is, he really digs deep into these health issues in terms of figuring out how to heal. And I walk in your house, and you've got essential oils everywhere, and all these things that your wife is doing now to help her heal. And well, one of the things I thought was interesting that you mentioned to me during that three hour drive that we're coming in here on those bumpy roads is she actually got like, she went up with like a MRSA or a Staph infection in her face.

**Michael:** Yeah. And it took a while to figure that one out.

**Ben:** When did that one happen?

**Michael:** Well, we figure, when she had reconstructive surgery. 'Cause a lot of people pick up MRSA in the hospital.

**Ben:** Yeah. I've gotten it. I mean, I almost lost my leg. I have these big golf ball-sized scars in the back of my leg. Like I have a whole article about it on the Ben Greenfield Fitness website about MRSA and what I wound up doing about it. But I mean, literally, like I had surgeons packing iodine and all sorts of crap into the back of my leg. I could not imagine having that inside of your face.

**Michael:** She had it in her sinus cavities. And, you know, 'cause they had to go in and re-break her nose, and I'll be honest with you, that's when the pain really, really...

**Ben:** They had to re-break her nose?

**Michael:** Yeah. So she had to go in and have it re-broke, and then they bored it out, and they borrowed cartilage off the bridge of her nose to rebuild part of her cavity. Her nasal cavity.

**Ben:** I'm not just saying this, I mean she's inside, and she's like a beautiful woman.

**Michael:** Thank you.

**Ben:** You wouldn't know any of this like looking at her.

**Michael:** She smiled through all of it. I mean, I saw her melt down a few times. I could show you pictures later. I did the progressive shots and it's pretty brutal, but I had to document everything. I didn't do it 'cause it was a twisted thing to do. We had to document everything. So, but, you know, that really brings, you gotta be careful what you ask for in life. It could get handed to you in the package that maybe is not so pleasant, but when it's all said and done, and you're sitting here doing something like this, and before so, but you know, a lot of things make sense.

**Ben:** Yeah.

**Michael:** God and the universe doesn't care which side it comes on, but if you ask for it, it's gonna come.

**Ben:** So at what point did you start sleep packing? Like kinda starting to look into how to get a better night's sleep. Or was this something to do with this injury and this journey that you went through with her? Or was it kind of like a different scenario that starting to look into things like pulsed electromagnetic field therapy for sleep and that kind of thing enter the picture?

**Michael:** Well, we were always on a quest for better ways to heal before that. And that's kinda what I was getting out about "be careful what you ask for". The best way to learn something is to get deeply immersed in it. Well, we did. And it's no surprise, but I...

**Ben:** You became a health nerd?

**Michael:** Oh, man. If you came to our house, we fed you organics, we had essential oil, and, you know...

**Ben:** As a matter of fact, we've been eating like organic blueberries and organic strawberries, and all this stuff. And it's like, it's expensive out there. I mean, you guys are going out of your way, I know you have a big farm out here where you're growing bora out here in the middle of winter. So I know a lot of this stuff, you'd have to drive three hours into town to get, and I see that you're making a solid effort. But up 'til that point, you really hadn't had much of an interest in like natural health and stuff like that?

**Michael:** Oh, before so we did. And that's what so before...

**Ben:** Before her injury?

**Michael:** Oh, yeah. And that's what was frustrating about being under hospital care. Because everything they shot her with and gave, we couldn't turn their modality of healing down. Basically if we did, then we would have to carry the burden of everything. And it was a learning process for us too. We didn't know about all these kind of injuries and the body responds to certain things, even pain med, you know. She was so resistant to pain meds that anything they gave her, two days later, it wasn't working.

**Ben:** So the PEMF thing, when did you start into that?

**Michael:** Well, I was getting migraines. After the two year hospital mandate expired, we were allowed to explore other, whatever we wanted to do to heal Nicole. And I had helped a young lady named Rachel start a herbal body care company, you know...

**Ben:** 'Cause one of the things you do is you just invest in companies?

**Michael:** Yes. That time...

**Ben:** As you made some of this money to where you were gonna, you were buying all these acres in South Carolina. Right. And so you're, I mean, like you're a successful businessman.

**Michael:** Yeah. I always believed in clean employment, try to develop business models or you're helping other people.

**Ben:** You haven't learned how to grow much hair on your head.

**Michael:** Well, I did, but...

**Ben:** Just for the record, Michael's sitting here, he's got a lot less hair than me. However, I do have him started into cold showers. As of this week, he's gotten a few good ones, and it's glacier-cold water up here. Like I can stick my head in your water, I've been taking a cold shower every morning here, and I get my head in for about 10 seconds before I get the brain freeze.

**Michael:** Well, that don't feel so bad then. It's pretty painful.

**Ben:** Yeah. So anyways, you were getting migraines and you started to look into it for that?

**Michael:** Yeah. Well, the girl that I helped start the herbal body care company suggested we go discuss Nicole's situation with a doctor. She's a naturopath M.D. and I attribute her care to saving Nicole's life. 'Cause Nicole was having seizures and just everything, everything that compounded probably as a combination of the pain, anxiety caused from the pain. She had adrenal fatigue because she'd been in so much pain for so long. So, as we were getting her into this doctor's care, we really built a great trust with her. So after we got, Nicole kinda...

**Ben:** Where was this doctor?

**Michael:** She's down in Hiawassee, Georgia. Dr. Solomon. So when we got Nicole on an even keel, then I kinda raised my hand and said, "Well, by the way, I've been getting migraines every month for about 36 hours." And she tried everything, acupuncture, everything with me, trying to get rid of my migraines. And even if I had one come on, on a weekend, she'd come by the house, tried to do all kinds of, yeah, acupuncture to ear points, everything. And she finally just said, "I can't help you with this. This is beyond my scope." She goes, "But I know a doctor who's into some really different new technology and he could probably do something for you."

**Ben:** Gotcha.

**Michael:** And this doctor's name was Dr. Bart Flick. So, he came over to her practice one day 'cause they were involved in a couple of angles with healing. And he sat down with me and we discussed the situation, and he pretty much just nodded his head. He goes like it was routine for him. And he goes, "What I'm gonna do is I'm gonna do a," for the lack of a better terminology, he said, "We're gonna scan your brain and I'm gonna put this device on, download the information into a computer..."

**Ben:** Was it like the electrodes that you attach to your brain? Like a...

**Michael:** Yeah. He put kind of a halo on me.

**Ben:** Okay. Yeah. The, not the ECG, it's the... all the brain doctors are leaping through the podcast right now screaming "the electroencephalogram," I think it's the EEG.

**Michael:** That's exactly what it was. And they discovered what was creating my migraines, and they had a technology they were treating patients with for migraines. And he says, "Here." Oddly enough, just \$500 for this technology. He goes, "If it helps you out, you can pay me \$500."

**Ben:** \$500 for a device? Or just \$500 for the service?

**Michael:** For the device. He goes, "If it helps you out," you know, it was a gentleman's handshake kinda deal because the trust factor was Dr. Solomon. He trusted me, I trusted him of course. So, he said, "If it helps you out, \$500. If it doesn't, then you just give it back to me." The very first time I put it on, it was a device that you wear on your brachial plexus, just like the sleep technology, and my migraines were basically gone.

**Ben:** Dude.

**Michael:** And I was so, I mean, I've been getting migraines for 3 or 4 years at this point, you know.

**Ben:** Yeah. You were wearing it when you were sleeping? Or were you like, this is a 24 hour when the migraines came around?

**Michael:** This was a 24 hour device.

**Ben:** 'Cause we've been talking about this before, but I had no clue that you could use this thing for migraines, like this type of technology for migraines.

**Michael:** Oh, yeah.

**Ben:** Really?

**Michael:** That's one of the technologies we have waiting too.

**Ben:** Interesting. Okay. So you figured out that this thing could get rid of your migraines?

**Michael:** It did.

**Ben:** You were just wearing it 24/7?

**Michael:** Yep. You just take it off when you get in the shower, when you're gonna get in the water, or whatever.

**Ben:** Well, I use it, I mean I use this SR1, and when you push it, it only stays on for 22 minutes. So would you just like push it when you felt a migraine coming on?

**Michael:** No. It had no On/Off button. Well, it had an On button rather, excuse me, but it didn't timeout. This one stayed on 24 hours. The battery lasted about a month in this one. It was the same size. Basically, the same technology as the SR1 because it's the same doctors now. But this got rid of my migraines. This is my first introduction to PEMF. This is back in 2000...

**Ben:** PEMF being the PEMF?

**Michael:** Yes.

**Ben:** I just like it saying this 'cause it makes me sound smart, the pulsed electromagnetic field therapy.

**Michael:** You look smart saying it. (laughs)

**Ben:** I always look smart. Talking about, it's my head of hair. And by the way, like we were, we were talking a lot about genetic testing the other day, and if you're listening in, I just recently got my genes tested. I have the gene that ensures that you never go bald. So I will always have this hair. Those of you who'd give me a hard time when walk around with my shirt off and my hair sticking out all over the place, that's not going away any time soon.

**Michael:** No. Jealous again.

**Ben:** The PEMF, you're using it for migraines, and Dr. Solomon had hooked you up with this thing. You're wearing the device, and then what happens?

**Michael:** She hooked me up with Dr. Bart Flick and then you know, I advised, well, he got my \$500, I'll tell you that. Because it only took a month to click off, and when my migraine cycle came in, it was literally just a phantom of the migraine. I could kinda feel it coming on, but it never put me in that pain threshold that migraines do. That got my attention. So, I'd pay him the \$500 gladly so. We stayed in touch. She did follow ups with me, and a great guy. So six months goes by, I'm still migraine free, you know, literally. There was a register in my body that it was coming on, but it was literally...

**Ben:** Yeah. The [Oura](#).

**Michael:** And that slowly went away. You know, after six months I didn't even have it, I was so used to not having them. I didn't pay attention to the calendar. It was just amazing. It was all electrotherapeutics. That got my attention. So as I stayed in touch with him, and he really got to trust me, he said, "Well, let me tell you what we're working on now." And that was the sleep technology, and they've been working on that for a few years.

**Ben:** And it was very similar to what you'd been using for migraines with some twists?

**Michael:** At that point, the technology was so complicated. I can't give away too many programmable secrets, but it was a halo device you wore that had several points.

**Ben:** But that wasn't what you were wearing for your migraines. You were wearing just this little device over your collar bone?

**Michael:** Correct.

**Ben:** Okay.

**Michael:** That was just a small device that looks like the sleep device we have now. And I wore that 24 hours a day. I just took it off, I guess, when I took a shower, et cetera.

**Ben:** And I'll put a picture of this device, like what it looks like, for those of you wondering. If you go to [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep), you can take a look at it. But I mean, it's tiny. I'm holding it right here. It's like, actually, just so you know, I've got like a quarter-sized little piece of a chocolate bar right here because we're drinking wine and eating chocolate as we record, just for those of you who know. So I got this little piece of Belgian chocolate, and it's about the size of this little piece of Belgian chocolate. But this other device that they were working on for sleep was like a halo device that you put over your head?

**Michael:** Correct. Originally it was. And I didn't care what it looked like. I just knew it would work. But anyway, my next thought was working on it. "What do you mean you're working on it?" And he says, "Ah, we're developing this technology right now. It's really raw." And I said, "How can I get involved?"

**Ben:** 'Cause at this point you're still wired at being an investor. You invest in companies.

**Michael:** Oh, yeah. I invest in companies. I'm deep-rooted in and I assisted people's start-up companies and real estate, had a commercial diving firm for 20 years. So, I was still diving.

**Ben:** Yeah.

**Michael:** This was 2010. So, I just said, "How can I get involved?" 'Cause I really believed in these guys, and we all kinda talked the same language as far as our approach to life, and approach to healing and helping people, and getting involved in business and whatnot. I mean six months, you get to really know somebody if you're side by side with him like that, you know. So, he said, "Yeah. We'd actually like to get you involved, Michael." So we created a company, SomniResonance, and spent 2 years, I was the investor for the company, and it was he and doctor...

**Ben:** SomniResonance, what does "somni" mean? I should know this 'cause I took Latin when I was a kid.

**Michael:** It has to do with sleep. And so they created SomniResonance around the sleep technology 'cause they had another company involved with the migraine technology.

**Ben:** Okay. So you had to create a whole new company just to target sleep.

**Michael:** Yup. I became the investor for him. They got organized, better organized. He and [0:36:32] \_\_\_\_\_, he's the mastermind behind the frequencies. Go-to-sleep technology.

**Ben:** Okay. Gotcha. Which we'll talk about in a second 'cause they're different. Like people may have heard me talk before about like the EarthPulse and how I put like this EarthPulse magnet under my bed. I wanted to ask you about the difference here in a second, but continue the story of this branching out into the sleep technology from the migraine technology.

**Michael:** Yeah. I was impressed with PEMF. I was impressed with what these guys were working on. They definitely had my confidence because they got rid of my migraines, and I did everything trying to get rid of my migraines. Probably damaged myself with meds trying to get rid of migraines. The inhibitors, and when you start feeling one come on, you just get atropine shot. My eyes were never the same after that. Literally.

**Ben:** Yeah. Now I've had some clients who will just pop like eight ibuprofen when they feel like that aura come on, I'm like, "Do you know what that's doing to your gut and your liver?"

**Michael:** But, you know, when you're having migraines like that, you'll make deals with the devil to just stop it and say, "Well, maybe it won't be so bad next time." You're in the moment with it and you get pretty desperate. So, you know, these guys were like gods to me because they could do this.

**Ben:** Were these M.D.s or were they naturopaths?

**Michael:** Dr. Bart's an M.D. naturopath, but he's a surgeon. He's an M.D., a surgeon, he's a burn wound healing specialist.

**Ben:** So he's not like a quack?

**Michael:** No. He's got over 20 something patents on just different technologies. And Frazier's, he's been involved in electrotherapeutics for decades. Smart guy.

**Ben:** Is he an M.D. too?

**Michael:** He's a Ph.D.

**Ben:** Oh, he's a Ph.D.?

**Michael:** He's the Ph.D.

**Ben:** He's the scientist and this other guy's the medical guy.

**Michael:** My motto is "you gonna be successful, surround yourself with people smarter than you." These guy's definitely had me on the...

**Ben:** I almost went there, and I'm not saying this to brag, but I almost went that route. Like when I was, before I got my master's degree at the University of Idaho, I was on the cusp of applying to the M.D.-Ph.D program at the University of Pennsylvania Wharton. I doubt that it was between that or being a personal trainer. And I took like the whole personal trainer fitness route just because I was having a blast doing it, but that's what I was really interested in was the M.D.-Ph.D. route. Probably, I dunno, you know, God has a reason for whichever route that you go. So this is the route that I went, but yeah, I mean full respect for that type of blend of science and medicine.

**Michael:** Well, you're helping people on a much broader scale than one at a time.

**Ben:** Yeah.

**Michael:** I like it.

**Ben:** Cool. So we've got this connection with these doctors and the development of this device that eventually becomes what I'm holding in my hand now, this device that you just put over your collar bone. Now, what I'm curious about here is, first of all, it seems kinda woo woo that you'd put something over a specific section of your body, what you called earlier the brachial plexus. Can you explain like what's going on when I put this electromagnetic field on my brachial plexus. What's happening?

**Michael:** Well, it's emitting a frequency that mimics nature, the delta wave that the brain falls into when it's promoting sleep, when it's trying to get the brain's...

**Ben:** Your delta brain wave's frequencies?

**Michael:** Right.

**Ben:** So my deep sleep jumps from like, whatever it was, 34 minutes up to 2 hours and 22 minutes when I'm wearing this. It's because it's causing a signal to travel up that nerve plexus.

**Michael:** Well, it's basically reinstructing the brain to find that sleep pattern. So the original placement for the device was on the forehead. And when we did beta test after we reduced it down from a halo to a single device like you're holding there, the original placement, ground zero was on the third eye chakra.

**Ben:** Oh really?

**Michael:** Oh, yeah.

**Ben:** Interesting.

**Michael:** And I've actually advised some people...

**Ben:** I've actually got a whole podcast coming up on kundalini yoga where we're gonna talk about the third eye chakra and all that jazz 'cause I got back from Kauai, Hawaii couple weeks ago where we were doing a ton of like third eye chakra meditations. You were originally gonna target that area of the body?

**Michael:** That was ground zero.

**Ben:** Interesting.

**Michael:** But during beta testing, people were like, "This is kinda awkward."

**Ben:** Sticking out of the forehead?

**Michael:** Yeah. It's kinda distracting me.

**Ben:** Sleeping with this device stuck on your forehead. Yeah.

**Michael:** So, okay, next best thing is to try to find a carrier, a nerve carrier to take that frequency, that signal to the brain. So the brachial plexus, and you have your bilateral location...

**Ben:** Right or left? Kinda like mid-collar bone.

**Michael:** So that's just as effective. It might be a little trickier to find than just putting it on your forehead, you know, but...

**Ben:** Yeah. Well, I'll ask you about this. By the way, again if you're listening, I'll link to the original article I put 'cause I took a bunch of photos of where you put the device and where I put the device. If you already own one or you're curious what it looks like, [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). You can check out a photo of what we're talking about. We'll get more into placement here in a second, but you put this device over the brachial plexus, and it's basically sending a signal from the device that elicits a delta brain wave in the brain. Which is like your deep sleep, relaxing...

**Michael:** That's stage three and four sleep.

**Ben:** Yeah. So don't put this on, by the way, if you're trying to get ready to race a triathlon or something like that. You probably don't want to be in delta if you're...

**Michael:** No. It'll confuse the brain.

**Ben:** The night before, you use it. But don't use it during. So this leads me into one of the questions I wanted to ask you about these electromagnetic frequencies. One concern that I had when I got my hands on this thing, because I [0:42:28] \_\_\_\_\_ putting like WiFi, and Bluetooth, and high signals on by. And even like that [EarthPulse PEMF Device](#) that I use. It's under the freakin' mattress, right. Like it's deep underneath my body. How is this safe to put on your body? Like when I look at the EarthPulse, for example, let's just use that as an example of a PEMF device. Very strong. Even the inventor of that device, Paul, who we had on the podcast, he's like don't put it on your body for brief periods of time to like work on an injury, or like a stress fracture, something like that. What is the difference

between this and any other PEMF device out there? Like is this safe to slap on my body all night? If so, why.

**Michael:** This device puts out about a half a Gauss frequency strength.

**Ben:** Gauss is the G-A-U-S-S?

**Michael:** G-A-U-S-S. That's correct. Case in point, the EarthPulse puts out 10,000 times that.

**Ben:** Okay. So this one's at, how much did you say?

**Michael:** Half a Gauss.

**Ben:** Half a Gauss. And then like another device would be like close to 10,000.

**Michael:** Yeah. You know, like you mentioned the EarthPulse, yeah. You know, it's different application. Not really a comparable technology from this...

**Ben:** But there's like coils. I've been at different biohacking conferences. There's another one, it's like a coil. You know this one? You like put around your, is that similar? Like 10,000 plus Gauss?

**Michael:** I'm not sure what their frequency runs at, but...

**Ben:** Well, I can tell you that it makes my leg twitch when I put it on.

**Michael:** Yeah. A lot of that stuff's powerful, but it has its applications.

**Ben:** It's super powerful. For injuries? Yeah. Extremely powerful.

**Michael:** But for sleep and for...

**Ben:** Or for putting it directly on your body.

**Michael:** We went in real light. It took, I'm going to say close to 10 years to develop this technology.

**Ben:** But it's a very mild PEMF signal, basically.

**Michael:** Absolutely. It puts out less juice than a watch does, or your ear buds.

**Ben:** So that's extremely low risk. I mean that would be like somebody who's, for example, listening to, let's say, a white noise app with their phone on in airplane mode beside their bed. It's a signal that similar to something like that.

**Michael:** It's lighter than that. And it's so low risk, that's exactly what the FDA classified it as. The lowest risk possible.

**Ben:** Do you feel it inside your head when you put it? Like when I turn it on, I feel it. It's hard to describe, but it stays on for 22 minutes when you turn it on. I get this feeling after about like 5 minutes or so inside my head. It's not a ringing, I mean, it's not a bad feeling. It's like a lull, like this giant gentle wave sensation. Have you gotten that?

**Michael:** Oh, yeah. That's the frequency, and...

**Ben:** It's freaky that you put some on your collar bone and you feel it inside your head like that.

**Michael:** Yep. That's a good wave carrier 'cause it communicates to the spinal cord, then that goes to the brain. I call it twilight. I can feel the device starting to work. I can feel the brain starting to entrain to it. And it's a very low-impact, very mild sensation. And that's what it's doing, it's just trying to create that delta wave. It is. It's creating a delta wave in the brain, and the brain will entrain to that, and then kick in its normal sleep response.

**Ben:** That's a word that gets thrown out a lot in this whole podcast like PEMF, and if you're listening and you haven't used PEMF before, like whether it's the EarthPulse, or there's this guy named Dr. Pollack whom I've talked with at some health conferences and he has a bunch of PEMF devices on his website, and a lot of folks who you talk to, they use this word entrain. They even use that word with binaural beats where you put one ear bud in your right ear and one ear bud in your left ear. I've found this to be true for many of these sleep devices, like binaural beats, or an EarthPulse, or this, you use it for a week or two before you really start to feel the results kick in. Like that's what I found is that it takes a while for your brain to almost become accustomed to it or to begin to respond to it.

**Michael:** It depends on the person, the situation. Everybody's so different. I've had customers buy a device, struggle with it the first night, the next night, boom. They're in the zone with it. I've had other customers, it takes up to three weeks to really get whatever is the issue causing the sleep deprivation or the sleep interruption to really start turning a corner because the brain, for a lack of a better terminology, is just stubborn.

**Ben:** I think part of it too is you just have to get used to it, like for me, like the binaural beats? You gotta get used to having something in your ears. Or with this, like you have to get used to when you're sleeping. And I'm a stomach sleeper/side sleep, like I sleep with a pillow between my knees a little bit kinda on my side. So I put this, 'cause I usually sleep on my right side, so I put it on my right collarbone, and I found it works on my left or my right collar bone. But I put it on my right collarbone, and the way it works is there's like this little adhesive sticker that comes along with it that you slap on the back of there, and then you put it on. I like to sleep with it on my right collar bone, and it's almost like the mattress kind of like is touching the device and pushing it against my collar bone a little bit, and for me that's perfect. I can sleep all night like that, and I don't even notice that I'm wearing the thing.

**Michael:** Nice. Yeah.

**Ben:** But I could see how for a certain period of time, right, you're like, "Aww. I got this thing on. I gotta get used to it."

**Michael:** There are customers out there that have anxiety, and the device could make them a little more anxious at first.

**Ben:** There's nobody who listens to this podcast who has anxiety. We don't have any type A.

**Michael:** Roger that.

**Ben:** I know you were actually telling me that, so I wrote that original article on the SR1, and you started to get inundated with all these people who were like triathletes, and marathoners, and Spartan racers, and CEO's, and like total type A folks. 'Cause I help a lot of people with adrenal fatigue and anxiety, and a lot of them listen to my podcast on sleep. I know you started to get hit with a ton of questions from those folks.

**Michael:** Oh yeah. A lot of people purchase devices looking for that immediate gratification. Okay, I've got adrenal fatigue, I've got anxiety, and I wanna sleep because a lot of people would sleep three hours, and then after that they'd wake up every hour, every two hours. And I know the device works, so I coached probably a dozen people.

**Ben:** How do you coach people who have, let's say you're type A, you have anxiety, or maybe you're working your way out of overtraining, or adrenal fatigue, and you put this device on, and if somebody calls you, let's say, and says, "What the heck's going on? How's it not working?" What do you tell 'em?

**Michael:** First, I get their history from 'em. You know, they'll e-mail me. They'll reach out through the website. I'll

suggest we get on the phone, and just get in a call, and discuss it.

**Ben:** Which I know you've been doing 'cause when we've been here like you're so busy. We were talking earlier, we gotta get you a customer service person at some point.

**Michael:** Probably spend three hours a day.

**Ben:** If you're listening in and you have any interest in Pulse Electromagnetic Field therapy, or you own one of these things, contact Michael. 'Cause he's making all these phone calls to all these people who own this thing. What are you telling them?

**Michael:** Well, you kinda get their history, it's all very similar. Really overtrained, under recovered, and the body response to that is anxiety. It's part of adrenal fatigue.

**Ben:** Sympathetic nervous system. Fight and flight.

**Michael:** Yep. My wife went through it. Her's was triggered, and her's was created, just too much pain for too long. So I kinda understand that, and I understand what she went through as far as dealing with anxiety. It's a mental game too. And the thing I discovered about the human body is it doesn't know the difference between a thought or an actual event. The body's gonna respond to what the brain is feeding it, what the mind is feeding it. And a lot of people who have anxiety based on adrenal fatigue and stress, if they're laying there even thinking remotely about anything stressful, or something with work, the body's gonna respond to it like it's actually happening to it. And then you're not going to sleep.

**Ben:** So what do you tell 'em?

**Michael:** I bring that to the table for discussion and get them to acknowledge it based on their own experiences, they acknowledge it. They go, "Oh, yeah. That's me. That's what I do." You know, big businessmen, we've had Fortune 500 corporate guys, "Man, I can't sleep. I wake up after 3 hours and my mind just clicks on, and I cannot fall back asleep."

**Ben:** That happens to me. 3 or 4 AM.

**Michael:** I found in my 20 year dive career, around four and a half hours of sleep.

**Ben:** No. Dude. I love it 'cause now I just push the button. Like I wake up at 3 AM, and I'm just like, boom. Push the button, and it's on. And I used to talk a lot, and maybe this works for folks, like I used to talk about like gamma-Aminobutyric acid, or GABA. It's an inhibitory neurotransmitter that helps your brain to produce delta waves. Like that's what it does and your brain can produce it. And we've had folks like Dr. Kirk Parsley, who's a sleep expert who works with a lot of Navy SEALs, he's created a really bioabsorbable form of GABA that passes the blood-brain barrier, and most gamma-Aminobutyric acid won't pass the blood-brain barrier, and it causes that neural inhibition. And what I was doing for a while was keeping one packet of that next to my bedside and when I would wake up at 3 or 4 AM, I'd take GABA.

Before that I was using passion flower which is a little less powerful than the molecule that he created. But passion flower tincture, passion flower extract induces an endogenous GABA dump, basically, to help put you back to sleep. But I also don't like to pile a bunch of supplements next to my bed before I go to sleep, and I also find that this tends to, like I mentioned, I feel it inside my head, right. It shoves me into that zone more quickly.

**Michael:** Well, you're very aware of your body. You know when anything's going on.

**Ben:** I've been Guinea pigging myself for...

**Michael:** Yeah. So you know you every little, anything. Meticulous little response, change anything. So what you're sensing is the brain engaging the delta wave. And, although it is natural, it's a different avenue for you to achieve sleep. So you pick up on it, and what we're finding with some people with anxiety, as soon as they realize something different is going on, they get anxiety over that. They wake back up.

I've got back on the phone with people the next day, and I'm like, "Okay. This is what's going on. The signals get into your brain, and your brain is trying to entrain to it, but when you start thinking about it and engaging it, your body's waking up. So just kinda welcome it. Trust it." That's the device, and then the signal. The signal's harmless.

**Ben:** When I first started using it, I would just use sleep supplements, like the sleep cocktail, or I'll use like THC or CBD sometimes, and I would use that to shut down some of the anxiety, or even shut down my brain sense of "Oh, you're wearing something different tonight when you go to sleep." You could totally use better living through science, you know. Throw some cannabidiol, or CBD, and throw some melatonin, or magnesium in, until your body kinda like overcomes that feeling that you're wearing some kind of a device.

**Michael:** That's interesting you said that because there's users out there, or customers out there doing exactly that, and even in Canada.

**Ben:** Yes, and you can combine that. What about people who are on like sleep meds, right? Like Ambien, or Valium, or some kind of benzodiazepine, or something like that. My understanding, and I had a podcast with Dr. Parsley about this where we talked about how that is like hitting yourself over the head with a hammer before you go to sleep at night. Meaning that it shuts down the neocortex, which makes you aware of your surroundings, and causes you to fall asleep, but you never get into a deep sleep cycle. What happens if you combine this with something like that? Should you combine this with something like that? Like for people who are listening who are on sleep meds, can they use this device? Should they stop the sleep meds? Like how does that work?

**Michael:** Well, that's one of the questions and answers on our Q&A page on the website. What we suggest is work with your physician who prescribed it because of the prescription, but this technology is new to a lot of physicians out there also. But we suggest maintaining your current regimen and using the device in conjunction with it.

Now, physicians that are implementing this technology with their patients, they'll step 'em down. If they're doing 12.5 milligram sleep aids, they'll step 'em down to 10 milligram for two weeks. Then after two weeks, they'll step 'em down to 5 milligrams using the device. So they get the brain used to falling back asleep the natural way through the device, and then, you know, so we'd call a four week window, and everybody varies. They step off the sleep medicine...

**Ben:** You take about four weeks to taper off?

**Michael:** You don't wanna shock and awe your body with...

**Ben:** No. I tried to do that once and it messed me up. So I used to do like a ton of international travel, still do a lot of international travel, but before I realized what benzodiazepines, for example, do to that neocortex, and then how you never get into a deep sleep cycle, I would take it when I was like on an airplane flight to Thailand, right. And then I'd take another one when I got to Thailand. By the time I got back from the US, maybe I'd pop like five or six of 'em, right. And that was exactly what I did. Like I'd take about 3/4 for a few days, and then I'd take half for a few days, and then I'd do a quarter for a few days, then I'd get myself down to a tiny little bit and wean myself off.

And then, six months later when I do another big international trip, I'd have to redo that. I did that for like a year and a half before I really started to dig in and study it 'cause I just thought, Valium, I'd travel over to Asia. I used to get Valium and a Viagra in Asia, before I discovered like natural sleep aids and like nitric oxide precursors like L-arginine, and stuff like that.

**Michael:** Pretty hardcore.

**Ben:** I'd just stock up when I was over there, you know. I don't think I've even talked about this too much on a podcast. And now, I found out Viagra's banned by the World Anti-Doping Association, Valium destroys your deep sleep cycles. I don't touch that stuff anymore, but, yeah, it's pretty crazy.

I actually have some rapid fire questions for you about this device too. So I wanna jump in to that. Okay. So my first question is I've been using it for naps. I take a nap like almost 1, 1:30 PM rolls around, and if I don't have a cup of coffee or something like that, I'm just down for a nap. It's just the way I roll. But I'm putting this on, and it helps me fall asleep. Like I mentioned, sleep latency, right. So I can nap just fine without it, but if I'm taking a 40 minute nap, and I spend 15 minutes of that trying to fall asleep versus 7, 8 fewer minutes I'm asleep, going into like a delta deep sleep, is that okay to use for naps? What have you found as far as PEMF and napping?

**Michael:** Textbook is allowing 90 minutes for a nap.

**Ben:** Yeah. It's not gonna happen.

**Michael:** Our world doesn't allow 90 minutes for a nap.

**Ben:** I've heard that too and I'm just like, no. Whoever wrote that is not, I know Winston Churchill, I read his biography, he would take like two hour naps in the middle of the day...

**Michael:** But since we're heavily regulated by the FDA, and we went through UL, we've gotta kind of tow the line on our statements. And all our statements on the website have been approved, or been reviewed by the FDA. So, we gotta stick with that, but what the data is showing, technically a sleep cycle lasts anywhere from 80 minutes to 120 minutes. That's full five sleeps...

**Ben:** And you're supposed to go through, I had [a podcast](#) with a guy named Dr. Nick Littlehales, and if you're listening in, don't take furious notes. I'm keeping all the notes for you at [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). And I'll link to like [this podcast](#) I was talking about with Kirk Parsley and this one I just mentioned with Nick Littlehales. But he says five 90 minute sleep cycles per 24 hour period, and he says even with the pro athletes he works with who travel a lot, all he focuses on is 35, this may sound a little anal, 35, 90 minute sleep cycles during a seven day period. So as long as you hit that, whatever. If you're doing like three in the overnight, and then like two in the afternoon, or whatever works. But in terms of napping, have you found the data to show that it's okay to put on for like, let's say, a 30 or 40 minute nap in the mid-afternoon?

**Michael:** It is because product review, since the device is emitting the delta wave, you're speeding through stage one and two. Like I said, a typical sleep cycle is 80 minutes to 120 minutes, but since you're basically expediting through stage one and two and going to three and four delta wave state, then you're carving out maybe 20, 30 minutes of sleep stage. So you take an 80 minute sleep cycle, take out 30 minutes, you know, now you're down to 50. The quality of sleep when in a delta state, and everybody is different. So, getting in the REM sleep, a lot of people don't get into REM sleep when they nap. They just get that delta rhythm.

**Ben:** It's the rapid eye movement sleep, which is stage four? Five?

**Michael:** Yeah.

**Ben:** Okay.

**Michael:** So, using the device, you go straight into three and four, and a lot of people will reach a stage five there in that period. So your naps will be productive. When we say allow for 90 minutes but the data's showing customer reviews, product reviews are showing a 20, 30, 40 minute nap, I use a device, I take naps sometimes when I've got to burn it late, you know, traveling or whatever. A 20 minute nap with the device, 20, 30 minutes, I wake up feeling like it's...

**Ben:** For me, I've been using, like I mentioned, I'd use it on airplanes. I was actually, right before I came up here, I

was coming back from Hawaii. Like I mentioned, I left it on the Alaska Airlines flight, and I was freaking out 'cause I'm like, "Man, I'm going to BC to Michael. He's gonna see me roll in without my Delta Sleeper and think I'm a complete hypocrite talking to him about how I've been using this device and shove, but Alaska Airlines sent it back. But yeah, I've been using it on airplanes and man, especially for long flights. It's amazing.

Which leads me to my next question. You know, long flight or long sleep cycle. I wake up and I push that button again. Is that appropriate? Is that recommended? Should I just be pushing it once right before I go to bed at night? Or is that okay for me to push it again if I wake up?

**Michael:** You can reactivate the device as many times as required.

**Ben:** How come it just goes on for 22 minutes?

**Michael:** Because once it lulls you into that stage of sleep, it doesn't need to keep promoting the brain to fall asleep.

**Ben:** So once your brain's there, it stays there and it doesn't need the training wheels anymore?

**Michael:** Right. And like me, when I wake up at 3 in the morning, I'll hit that five hour window of sleep. Five or six, I wake up, I'm pretty awake 'cause I've found that for the last 20, 25 years, I've been sleeping four and a half, five hours a night. I always just thought I was more superhuman than others, and I could just take that. Lord knows what kind of task it took on my body. But now, if I don't get eight hours of sleep, I feel it because I understand, now I know what it's like. And I don't take a lot of supplements, I don't drink coffee during the day, you know. I just...

**Ben:** Which is actually pretty amazing. I've noticed that you're not drinking coffee during the day and you're out freaking like saddling up horses. Yeah. I think you we're up at 5 o'clock this morning while I was still sleeping. You were like building fences, and mending a bridge over a pond. I kinda felt like a wuss when I woke up this morning. By the time I actually even stumbled out to the outhouse to use the restroom, you were like swinging a sledge hammer at a fence and I haven't even done a single jumping jack. So, kudos.

**Michael:** Oh, thank you!

**Ben:** Okay. Another question, and this is a big one: placement of the device. How precise do you need to be? Because, like I used to dissect cadavers at University of Idaho when I was going to school there. I know where the brachial plexus is. I can dig into with my finger, find it, slap it over there, and I'm good to go, and I know it's kinda like that tender spot, right. Like under kinda the mid-collar bone as you get close to the outside of the shoulder. What if people don't know that though? Like how close can they get? What are your recommendations as far as learning how to really put in the right spot? And does it matter left or right?

**Michael:** What we're finding is people have a favorite side, left or right. You just got to experiment. You know, depending on the severity of what's causing, or the source of what's causing sleep issues. Using it for general overall wellness, that's not a specific, probably required placing it as somebody who's an insomniac and just maybe gets two hours of sleep and can't fall back asleep. They've got to get right spot on in order to get that full frequency emitting up the nerve bundle.

**Ben:** So if someone is not feeling that it works that well, you have, well I actually have one spot. So I published that original article, and I'll link to it at [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). If you read that article when I first published it, since then I've published two updates. I published like a full, kinda like anatomical breakdown and photograph of the brachial plexus, where it is, how it works and where to put the device. But is there anything else you tell people if you get on the phone with them as far as like how to properly find it? Or is it just photographs?

**Michael:** Yeah. It might sound a little slow to respond because I'm just replaying so many different customer testimonies and conversations I've had with people trying to find the common denominator to why there might be difficulty locating the brachial plexus. And I think it has to do with just the intensity of what's causing the issue with

the user. Just experiment with it, the go-to spot on the third eye chakra on the forehead, we don't really promote that because it works so well on the brachial plexus.

**Ben:** But you could put it there? On your forehead?

**Michael:** Yeah.

**Ben:** Awesome. I'm gonna try that.

**Michael:** And I've had, for instance Megan, the model on the website. She tried to use it the first night on the brachial plexus but she couldn't find it, and she just tapped out went to her normal method of sleep, and reached out to me the next day. I said, "Well, you may have to experiment a little bit 'cause," you know, she used over-the-counter meds for 12 years.

**Ben:** Oh, wow.

**Michael:** That's Megan. And she has no problem with me sharing this story. So the next day we got on the phone, which I've done with so many people. I said, "Well, tonight you can't find a brachial plexus, just lay it on your forehead. Don't even use an adhesive. Just lay it there." And she did. And after the second activation, she was out. She slept eight hours.

**Ben:** I'm just gonna try it just for fun on that area. Okay. Another question: kids. What if you have a kid, or an adolescent, or, I dunno, like, let's say, a baby who has trouble falling asleep. Where do you go with kids? I know you've gotta be careful what you say with the FDA and all that jazz.

**Michael:** Well, that's a gray area because the brain is developing in children. We don't really know what the impact of even this benign frequency would have on brain development with children, young adults. So we recommend that you have to be at least 18 to try the device. But under physician's care, just consult with your physician on that one.

**Ben:** Okay. Gotcha.

**Michael:** Cause I do get e-mails with request...

**Ben:** My kids, you've seen them, they go to bed, and they just hit the sack hard, and they're out. And that also has to do, by the way, if you're listening, with screen time. My kids get very little screen time before bed. They've even got a blue light blocking glasses that my kids wear if they're watching movies or anything like that at night. They've got their own little set. I got them off Amazon. So that's another trick for kids.

**Michael:** They're gonna be ahead of their curve, no doubt. A lot of people put their kids to bed by TV, you know. But I'm not here to judge...

**Ben:** I was reading in Reader's Digest last week, the brand new Reader's Digest, and it's written by a sleep doctor. And some of the stuff was interesting. Like he talks about, gosh. I'm blanking on some of the stuff. But he recommends to his patients to fall asleep in front of the TV if you have trouble sleeping. And my teeth were gnashing as I read that because you shut down melatonin production. You might fall asleep, but kinda like Valium or Ambien, you don't actually get as far into your deep sleep cycles. So shame on the doctor that wrote that, if you're listening.

**Michael:** Well, I'll just take 10 seconds and say that's how Nicole used to fall asleep. Every night we went to bed, I would just say please at least turn the TV down, you know. 'Cause she knew that's what relaxed her to sleep, and she's always had sleep problems since I've met her. She's a device user, and she gets 9,10 hours of sleep at night now. And no TV, no...

**Ben:** I'm getting nervous 'cause I'm doing like 8 hours and 50 minutes now. I have to find that fine line between productivity in the morning and sleeping too long because the problem is, like if I wake up at 5:30, and I wanna to do the whole like Navy SEAL get out of bed, get more done before 7 AM, before the rest of the world does before they're up.

**Michael:** That's my poison.

**Ben:** But if I hit it at 5:30, then I fall asleep 'til like 7:30. So I have to be careful. Sometimes like I'm tempted to push the button and I don't because I know I have to get up.

**Michael:** I've been late for a couple of meetings that way.

**Ben:** How long does the battery last? I changed mine out with a screwdriver, and it was really easy. The batteries are like a few bucks off Amazon, but you told me, I don't recall, how long will this thing actually go as far as battery life?

**Michael:** Under normal use, a couple activations at night, it should last 6 to 8 weeks.

**Ben:** Okay. Gotcha.

**Michael:** If you're using it a lot, a month. But we have had a battery or two to get by, we test everything, we put new batteries, and then we send them out. I've had customers go two weeks with no results, and finally reach out to me. And the first thing I suggest is just change the battery first, and try that. And that's remedied the issue.

**Ben:** Gotcha. And there's a little, little tiny green light that goes on top of that.

**Michael:** Just because it's blinking doesn't mean it's working because the power...

**Ben:** Oh, really?

**Michael:** Yeah. That's what we found.

**Ben:** Okay. So if that little green light goes on on the device, sometimes it's not working? If you have to change the battery out?

**Michael:** Correct. That's what we're finding. There's enough power in there to run the blinking light, but it's not allowing the device to function 100%.

**Ben:** So how often again on the battery?

**Michael:** Six to eight weeks is normal. Generally, once you use a device for a while, you're pretty accustomed to how it works.

**Ben:** 'Cause I know, the first time I got it, I think I was close to eight weeks, and I started noticing I wasn't that feeling inside of my head, but the green light was on.

**Michael:** There you go.

**Ben:** Okay. That makes sense now.

**Michael:** You get pretty keen to the effectiveness of it, you know.

**Ben:** People listening in Australia, and the UK, places like that. Can they get one? Is it legal? Like how does that work as far as shipping to other countries?

**Michael:** Well, we're working with a lot of different customs offices right now in different countries. A couple of weeks ago, maybe three weeks ago, we got cleared, we got the go-ahead from Australia customs that we could ship to the customers as long as they use it for personal use and not resell. And like Germany, it's getting kinda tangled up with German customs. They're a little bit more stringent on what and how they qualify stuff coming in. We're talking to Japan right now, talking to the UK, talking to Belgium. So we're hoping to at least clear ability to ship there. We'll update on the website when we can.

**Ben:** What I've found like to go with versus cannabidiol, right, 'cause I sell CBD on my website, some customs, they say they won't import it. I have customers all over the world ordering it with no issues, but I always tell them, I'm like, "It might make it, it might not." But I tell people take their chances. Technically, we ship USA and Canada, but so far nobody's had any issues...

**Michael:** So before, yeah, we were...

**Ben:** The other recommendation I give folks is just get it shipped to a friend in the US or in Canada, and then have them send it to you in a little care package.

Okay. So a few other questions that I have here. Post-traumatic stress disorder, you mentioned to me something about PTSD, and the effectiveness on PTSD, or something in terms of PEMF and PTSD. What's the deal with that? Like does it work? Should they avoid it? How's that work?

**Michael:** PTSD is kind of a dark area of the brain in regards to what scientists and doctors are figuring out how to treat PTSD with PEMF. The device will assist people with PTSD to go to sleep, but what happens when they're in that deeper sleep is an entirely different matter. You know, that's where the night terrors and a lot of the triggers are, when they achieve deep sleep. That's why PTSD patients, or people suffering from PTSD have a difficult time going to sleep. So we don't promote the device for PTSD, but we suggest that using it as part of a regimen under doctor's care because, you know, assisting them to go to sleep, yeah, it's a gray area. And there's research...

**Ben:** Okay. I think that's one of those things where you just gotta say "Ask your doctor ..."

**Michael:** Yeah. 'Cause we're not promoting the device for PTSD because there's a lot going on with that. I mean the assisting the patient to get to sleep, yes, but what happens when they're in the...

**Ben:** I'm allowed to say it 'cause I'm not a doctor. Maybe it's the benefit of me not going to medical school. I'd use it if I had PTSD. I'm just saying. So that's something that I would certainly look into if I were in the military or I were someone with PTSD. I know you can't say that, but I can.

Another question that I have is there's this idea, especially with these more powerful devices, and I get this question all the time, like the EarthPulse for example. I use that when I have had a really hard workout, and I wanna break out the big guns, and just like get a bunch of PEMF underneath my mattress. You know, I'll take two magnets and put them underneath the torso, underneath the head. I'll use the North Pole side of that PEMF magnet. You know, again like you mentioned, 10,000 Gauss versus the .005 the...

**Michael:** 10,000 times, yeah.

**Ben:** Yeah. Or 10,000 times the power, and I'll use that, for example, on an area that's been injured. Soft tissue or bone injuries, both have good research showing that stronger frequency PEMF can help with them. There's some research to show that it can assist with the cell membrane activity and specifically oxygen, and glucose, and stuff like that moving in and out of mitochondria. And so when I'm beat up, when I'm jet lagged, when I have an injury, I'll pull out the big guns, and I'll use that device. And what I found, for me personally, 'cause I've gotten tons of questions on

this in the comments section, like whether I use it every day. I don't. I use it for two or three days after I've put my body through World War II. Or I'll use it on a body part if it's injured.

If I am in that scenario and I've got something like the EarthPulse underneath my bed, 'cause let's say, I've just gotten back from Japan, or I've just done an Ironman, or something like that where I wanna break out the big anti-inflammatory guns of my body, does it mess up the signal if I have like the SR1 on my collar bone and something like the EarthPulse under the mattress? Like could you use both at once or should you not?

**Michael:** Yes. No. I don't see any conflict there. There's no data that shows any conflict there.

**Ben:** Okay. So you could put this thing on your collarbone for like the weak PEMF signal to send the signal to your brain. And then if you want to like anti-inflammatory action or something like that, you could put something like the EarthPulse under the mattress, or something like one of these coils, right. There's even like a, have you heard of the Bemer. It's this mat, I think it's B-E-M-E-R, and it's a new PEMF like cot that you lay on that they're using for like for body injuries and stuff.

**Michael:** There's a lot of technology hitting the mainstream now.

**Ben:** PEMF is all over the place. Like I go to biohacking conferences, right, like London, Finland, Dave Asprey's conference in LA, and there's like 5 or 6 booths that are all just pulsed electromagnetic field therapy. So, I mean, it is really interesting how many people are catching on to the power of this stuff. I own the EarthPulse. I own now this SR1. I think it's a great tool to have in your tool box. I mean, if you like to own nice things, these things make your life better. To me, the way I tell people this is a good solid night of sleep to me before a big work day. It's worth 20 bucks. I'll pay 20 bucks for a good solid night of sleep. And so, for me, to spend, whatever 500, I mean in the case of the EarthPulse, it's like several thousand Dollars. Depends on how much you wanna invest in your body, right. 'Cause over a year of sleep, 365 days of \$20 nights, if that adds up to you having that much extra productivity and happiness, my opinion, it's worth it.

I wanted to ask you and now is the point where, like we don't want to sound like sales-ey or whatever, but I know you have, like people can get this. And if they don't like it, they can send it back. Is that the deal?

**Michael:** Oh, yeah. 30 day money back guarantee. It's usually what's going on with the device within a few days. I mean, some customers are that first night. Some to take two to three weeks, but if you reach out to me, and we've got a case going, I got a file going on you, I've extended that warranty for customers just to keep trying to experiment. And then they hit that three week window, and things start happening. I've had a couple of customers not get anything in the first two nights. They just get frustrated. 'Cause they expect it to work like it works for other people. The thing about the device, like to side track just for a moment, it's a great barometer for discovering the source of what your sleep issue is. If you're not responding to this device, there's something going on. It's not because the device doesn't work. If you change the battery and then all of a sudden what you have with 'em is a bad battery, but physicians are using this as a barometer to discover things with patients.

**Ben:** I was shocked when you told me like how many doctors and stuff are using this with their patients.

**Michael:** Yes.

**Ben:** It's a lot. And again, like I'm totally cognizant if you're listening, I don't want this to sound like an infomercial or whatever, but I mean like I wanna tell you guys about stuff that works 'cause I know a lot of folks have trouble with sleep.

**Michael:** Well, originally last year we got cleared, we're classified by the FDA, and we were selling only through physicians. They came back a couple of months later, and reevaluated, and said it's classified as low-risk, lowest responsible. You can go to the end-user now, which is why we created the Delta Sleeper because we didn't want to outsource the lifeblood of this technology to a regular company that was just gonna carry it like any other product

out there. We wanted to give it, I wanted to give it my own personal customer service touch, and be able to be reachable to people, and really kinda keep an eye on what was going on with the end-user side. But, through all this, you know, I have some physicians using it that don't think this device should be sold straight to the end-user because sleep issues are so complex, and everybody's so different that they feel that they should, anybody using the device should have a complete work up.

**Ben:** I think that's bull. I'm a cowboy. I say slap it on and...

**Michael:** Hey. You know.

**Ben:** Like that's the way I rumble though. Like I'd rather just try stuff out, but I do a lot of Guinea pigging. The guy who shoots coffee up his butt.

**Michael:** You know physicians are though. They protect own ground and they're really like their patients. They like helping, but somebody might get discouraged or get frustrated 'cause they're not getting results. Well, there's a reason why you're not getting results, and you gotta dig a little deeper. You know, and a physician helps you kinda checked down the list. We have physicians discovering bipolar. You know, food intolerances, you know, OCD.

**Ben:** Yeah. I want to talk more too in a future podcast that I'm gonna do 'cause I started off, I was talking about sleep qualification, right. And I've had a lot of people who have issues with getting like this laboratory-grade sleep equipment sent to their house, like the EEG stuff, because it keeps them awake when they're wearing it.

So I'll talk more about this ring and stuff I've been using in future podcasts. And like I mentioned, I'm gonna work up a post where I show you guys some of this pretty shocking data on what this SR1 has done for me as far sleep latency, sleep efficiency, deep sleep cycles, amount of time spent to sleep, heart rate. Like I mentioned, it's dropped three freaking beats. It's crazy. So my resting heart rate now wearing this is 36 beats per minute. That technically means I'm gonna die, or my thyroid fell out. No. But, seriously. It's pretty crazy.

**Michael:** That's deep sleep.

**Ben:** It's very deep. So, a couple other things. First of all, I think I smell dinner wafting. So we're off in a separate cabin, kinda like in Michael's guest cabin out about 30 yards from his ranch that he's kinda restored out here in the middle of nowhere. But I think I smell, is that bison burgers wafting?

**Michael:** We know what's in there. Stuffed peppers with bison.

**Ben:** So we are gonna have to wrap pretty soon, but I wanna tell you guys a few things. First of all, money back guarantee on this, but we're also gonna toss you a 5% discount, which is 'cause the retail on this is, is it 499?

**Michael:** 499.

**Ben:** Yeah. So, 499, which in my opinion is a very, very good deal for something that's gonna help you to sleep well the rest your life. Especially when you consider the batteries are like a few bucks to recharge the battery every 6 to 8 weeks.

The discount code you can use to save another 5%, which obviously knocks another 20, 25 bucks off for you, is Greenfit10. Greenfit10. I know that's stuff to remember, but I'll put a link in the show notes. And the show notes are at [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). That's [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep). I can tell you from personal experience that Michael's customer service is freaking awesome. Even though I'm serious, man, you gotta get some help 'cause I see how hard you work helping people out with this stuff...

**Michael:** Labor of love.

**Ben:** Yes. There you go. If you're listening in, contact me if you want a job in customer service and you like this kinda sleep packing stuff. I should connect with Michael 'cause he needs some help so he can spend more time shoeing horses and fishing.

So anyways though, [bengreenfieldfitness.com/deepsleep](http://bengreenfieldfitness.com/deepsleep) is where you can access this and also where you can leave questions, comments, feedback about anything that Michael and I have talked about in today's show. And Michael, first of all, thank you for being who you are and for actually caring. Sometimes when I meet somebody who sells stuff to help people, they're in for the money, and I know you're not. I've met your wife, I've met your kids, I've seen the love that you have and the whole reason you got into this in the first place. So, kudos for creating something that actually helps people.

**Michael:** That's the campaign. Thank you.

**Ben:** Yeah. And then second, you ready go punish some peppers with bison?

**Michael:** I'm ready.

**Ben:** Let's do it man. Thanks for coming on the show.

**Michael:** Awesome. Thank you.

**Ben:** Alright, folks. This is Ben Greenfield and Michael Lares from [bengreenfieldfitness.com](http://bengreenfieldfitness.com), signing out.

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