



Dr. Robyn Benson: Hello everyone. Welcome to the Healthy Traveler's Global Summit. We're so excited about our speaker today and we just want to pause right here because many of you have been with us to this summit since the very first day where we started out with Donna Gates, and we have had these seven amazing categories starting out with the importance of food, hydration and movement. And now we're going to learn, in our seventh category, learn about ecotourism... or learn about medical tourism which is growing exponentially around the world. We've got the best possible person on the planet to talk about that, John Cote, who's our speaker today. But also, just to learn how important it is to see that we are looking at the... this whole industry in greening it; how the greening and the ecotourism message. So that's all in this... this category. So again, thank you for being on this incredible... as we mentioned, we promised this would be a journey of a lifetime and we've heard from so many of you that this has been a life-changing summit. Every speaker has had such brilliant information and content to share with each and every one of you. And if for some reason, you're joining for the very first time today because of our fabulous speaker, John Cote, my name is Robyn Benson. I'm a doctor of oriental medicine for 23 years. I've been practicing in Santa Fe Soul and I am the founder of Santa Fe Soul Center for optimal health. We're in our 10th year, we've built this beautiful center, we love that people are coming from all over the globe to visit us here. And I just want to say, also, because this is the ending of our summit, that we are having a big party, May 23rd, 2015 to celebrate our 10th anniversary of this center. And so anyway, let's talk a little bit about me. But my fabulous co-host of the self-care revolution, our two-year program that's been online where we've interviewed 160 amazing speakers and we've had live events. Kevin, how are you today?

Kevin Snow: I am doing great. This has been a great day and that's why I'm looking forward to our topic here today too. My name is Kevin Snow. I'm an intuitive counselor. I have a practice at Santa Fe Soul as well and what an incredible place that is. So do not miss this invitation to come and join us in Santa Fe for this amazing party. And really, you can hear all of this information throughout this summit. These... the tidbits, the gems, the

pearls, whatever you want to call them. But really summing it up and this topic today is going to be really powerful with understanding this idea of travel and health, bringing those two concepts together as we haven't been doing this many on our interviews. But this idea of travelling healthfully but travelling because of your health. So really, excited about this part.

Dr. Robyn Benson: And before you introduce our speaker, John, I just want to tell you that the real story... as I was gathering all of the amazing speakers and we've had so many people to choose from to get you the best voices in the industry that could really talk about how to be a healthy conscious traveler on a regular basis, I actually went to this event a couple of weeks ago. And I have to say that I was just kind of... I had every speaker that I needed and more and I really wanted that someone to give a great voice to medical tourism and to ecotourism, for that matter. And here I am in this event and the guy who's running the whole program said... was announcing one of the speakers for the event, happens to be this pilot for an airline and also wrote a book called Health Care Elsewhere, inspiring medical tourism success stories. But he's an expert on medical tourism. So literally, within an hour of me e-mailing some of my... my amazing team... I have to say a big shout out to the team, the ten people that had been part of this... the background of allowing and making this whole summit possible. Saying "Gosh, I just had to find this person." And literally, within an hour of writing this email out to my team, I've... I met John. It's the coolest story. So here he is live to be with you. So John, welcome to our summit.

John Cote: Robyn, thank you so much. I appreciate it. And Kevin, thanks very much for having me out here, you guys.

Dr. Robyn Benson: Okay. Well I'm going to read your bio because it's really important to people to understand your amazing background. But anyway, John Cote is a three-time Amazon.com number one best-selling author and the creator and host of Health Care Elsewhere, the world's leading medical tourism show. He's also the founder and CEO of John Cote and Associates, a consulting agency that creates marketing and grows strategies for businesses globally. John is the CEO of John Cote, as I mentioned. A consulting... oh, I just mentioned that. Okay. His expertise includes client platform development and with rapid content creation via book publishing, interactive online broadcasting and podcasting. Additionally, his firm specializes in product launches, lead capture and follow-up systems, social media engagement and digital advertising campaigns. As a creator and host of Health Care Elsewhere, the world's leading medical tourism podcast, he grew the show to 1.5 million downloads from over a hundred episodes in under a year. In his role as

patient advocate and educator, he interviews patients who share their inspiring success story along with leading doctors and health care experts worldwide. In 2014, he published an international best-selling book based on the show, also entitled Health Care Elsewhere. A voracious reader, John invest a great deal of time researching and implementing the cutting-edge trends and exponential technologies, medical advancements and marketing systems. He's a frequent speaker and panelist on these topics as they relate to storytelling, selling, business innovation and increasing revenue. John has a deep personal interest in merging medical technologies since he has received surgically implanted stem cells to grow new knee cartilage. His wife is a two-time cancer survivor who travelled extensively for experimental treatments, and one of his sons has bilateral cochlear implant. He's an accomplished pilot, having attained over 10,000 hours of flight time while serving the U.S. Marine Corps and flying with a major U.S. Airline. He currently resides in Huntsville, Alabama with his wife Jennifer and their three teenage children. So... welcome...great to have you here. [Cross-talk 00:06:34.16]

John Cote: Oh, I seem that my assistant sent you the full... the full Monte.

Dr. Robyn Benson: You know what, I decided I couldn't just leave a... even a sentence out of that bio. So, in the people... this is great that you get to know our wonderful speaker today. So well, that you're here with us. And... Gosh, where do we start? Why don't we just hear your story John? Let's know about how you became a pilot and how you became interested in medical tourism. So, maybe a little bit about your personal story first.

John Cote: Okay sure, I appreciate the Robyn. And so when I was a kid, I saw some TV show about flying, and pilots and fighter pilots and all that stuff. And I just thought that was really cool and wanted to do it. Now, I had an aunt take me on a trip when I was about 10 years old and that was the first time I'd ever flown. And I just thought, "Wow this is the coolest thing ever, I really want to do this". And I never let that dream go and I just kept pursuing it and pursuing it. And eventually got a commission in the US Marine Corps; and became a pilot in the Marine Corps and flew jets around. Did that for 10 years, had a great time, really enjoyed it. And my wife and I were looking to settle down and have kids at some point. So, it seem like a good time to transition out of the military and start flying for the airlines. And long story, sure everything was going great until 9/11 happened and all of a sudden we had aircraft crashing in the buildings, and terrorist attack and all those sort of stuff. And I mean; I realized pretty quickly, I've a lot of friends who lost their jobs. They get furloughed and it was...Like I mean the industry was in major peril and I just realized, "Wow I can't just sit around and wait for something like this to happen again and

maybe lose my job. I need to have a backup plan. In the jet, in the Marine Corps we have an ejection seat. You can always pull the handle and get on off out of there but I had ever a better plan than that. So I started kind of down this entrepreneurial path and decided to create my own businesses. We did that for quite some time and eventually landed on helping companies with the marketing. Marketing your companies through Facebook marketing and things like that. In long and the short of it was eventually, I stumbled into book publishing because I'd always wanted to write a book. And as you'll hear in the interview, I like to talk, I'm a talker. So I learned how to rapidly publish books by talking into my microphone. I would just record my thoughts, have them transcribed and turn it into book in a very short period of time. And in the process of doing that, we got asked to speak at... from one of these books, it was a marketing book. And the Director of the Medical Tourism Association saw that book when she was searching word of mouth advertising online and bought it and said, "Hey, we think you'd be great for... to come and do a speaking engagement for us here in Las Vegas. This was about 18 months ago. So I said, "Great! I'll go ahead and do that"; and I said, "What's... who are you with? What's this all about?" And she said, "That's the Medical Tourism Association. And so what's medical tourism? I didn't really even have a firm handle and grasp on what that is. And I found probably half of Americans kind of feel the same. So, as she explains what it all was to me; and I said, "Okay, great! I can definitely put a custom presentation for you to talk about, how you can help find new clients and patients in medical for medical tourism companies, and facilitators and things." And so I went and I spoke, and it was great, it was very well received. They gave away a bunch of copies of my book and I mentioned how podcasting was really blowing up and it was really becoming a big deal. And more importantly, if you went to iTunes and typed in medical tourism, nothing came up. There were no shows about medical tourism at all. So I challenged the attendees to go ahead and do something about that, and nobody did. So about three months later, I went ahead and said, "You know what we're going do this". And we set around one night, around a couple of beers and bottles of wine and started masterminding and figuring it out, came up with the name Health Care Elsewhere. And 10 weeks later, we launched the show that was on April 21st of 2014, a while back. And it just kind of took off from there. We had a plan all along to... not only interview experts but interview patients and allow them to tell their compelling stories. There are really some very heartwarming stories that we've been able to share with folks. And so, out of that we then created the book and it all just kind of snowballed from there. And then, like you said I met you at that conference supposed speaking at a couple of weeks ago out at San Diego. It was beautiful out there and I had a

couple of people grabbed me and said, "Hey, you've got to talk to Dr. Robyn, she's been... she's looking for you. She's gunning for you men. You better find... you better watch out, she's looking for you"; and I was laughing. And then I saw you at the meet up that night, and I was like, "Oh! Hey, everyone has been telling me I've got to talk to you". So, it just all went up... uphill from there and we've been... here we are.

Dr. Robyn Benson: Here we are! It's just fantastic.

John Cote: Yes.

Kevin Snow: Let's... Let's definitely start with some of those stories... some of the more profound stories that you have heard and you've podcast.

John Cote: Sure, I mean the... one of the... it wasn't the first interview that I did, but it was the first interview that we published and one of the first stories in the book. And it's about a woman who lived in California, and she had MS. She was an MS sufferer and she was having difficulties with the symptoms and things. And her doctor said, "Look, we've done everything that we can for you, according to the FDA regulations. Everything that we can do experimental otherwise, we're sorry, we just can't help you anymore. There's nothing else that we can do for you. You're probably going to be in a wheelchair in about a year, and beyond that you may have difficulty with speech and coherency and all of this other stuff". So, she just was not willing to accept that as her final answer. She just said, "No, I don't accept that". So she started doing some research and she ended up traveling down to Central America to get a... what at a time was a pretty controversial stem cell therapy. Because it was fairly new, nobody was really doing that sort of thing. And over a period of year, she kept going back and getting this stem cell therapy. And here we are years later, and she's still... she's still walking, she has a job, she got her own company. She is not... hasn't lost her faculties or anything like that. So I mean, she... It didn't cure the disease, but it definitely gave her a quality of life that she never could've expected had she taken no action in listening to her doctors. So, I'm not necessarily saying it. I'm not a medical professional by any stretch. I didn't stay at a Holiday Inn Express last night or anything like that. So, all I do is trying to let this people tell their stories like the doctors tell their stories of their patients. And kind of give people... I'm trying to be an advocate and an educator for people who are interested in finding out more about... maybe they don't have insurance and they need hip replacement surgery. And it's going to cost 40 grand, and they can't do that. And so they go down to Costa Rica, over to Thailand and they can get it for 50 to 70 percent off. Including all their airfare, and their travel, and their hotel and everything else. So, I was really... I found that very compelling, because of what my wife had been

through with her cancer treatments, and the travel that we did for that. And I thought this would be something that would be interesting to people and so I kind of took a flyer around and said, "Well, let's find out what kind of interest there is". So, we did that and we... because I'm a marketing guy, we did a whole launch process and made it into a... basically hit number one in its category in day one. But as people have discovered the show, I personally... I think the thing we're getting the most of the feedback is that...that it's the stories. They want to hear the stories, the compelling and interesting stories of people who have gone out and done amazing things in different countries and gotten world-class treatment that they could never have gotten in their own country.

Dr. Robyn Benson: I am going to showcase your book here. Here it is: inspiring medical tourism success stories. Can you share a little bit about your story John and maybe your wife's too, about how you got this medical treatment for your knee and exactly what happen with her for her breast cancer?

John Cote: Yes. Actually she had a lymphoma. It was skin cancer... [Cross-talk 00:13:56.22] Yes, that's okay. So, this was like 25 years ago. My wife and I were both in the Marine Corps, we are both in the United States Marine, and officers, and we met there, and we're dating and everything is going great. And she got stationed in Hawaii. She was working for a general and I was going... getting ready to start flight school. And she calls me from... I don't know how long that is, 8000 miles or however many miles away. This is before... there's no internet back then, there's no cell phones back then. This is pay phones, basically in the... in the bachelor officer's quarters, like a hotel. And she calls me one day and she said, "Hey, I don't really know how to tell you this, but I just found out that I have cancer." And it's a... she's 24 years old. And I'm going, "What... what? You have can...?" I mean, I just... I almost couldn't comprehend that to someone that young of an age. She's so healthy, she was in great shape, and she ate well and physically extremely fit. So, it was really difficult to comprehend and swallow at that time, but it was like, "Alright, well this is what we are going to do". And so she ended up doing this full surgery to try and get rid of the cancer. They caught it really, really early and so they did a surgery called "Radical Night Dissection", where they kind of pull your whole face aside and grab a bunch of her lymph nodes and everything. Because the skin cancer had spread to... It was on her face, it was a small mole on her face that she happen to sit next to, on an airplane on the flight down there while she was getting stationed down there. She happens to sit next to a dermatologist and he was talking with her and he looked at that and said, "I want you to come into my office tomorrow". And they took it off and they went, "Yes, that's cancerous. We need to check you out" And so sure enough they went through and they

found it had gotten into her lymphatic systems. So, they took out a bunch of her lymph nodes and some of her salivary glands and they thought they got it all, all the margins. It was really early so she said, "Okay, they decided not to do any treatments at that time". And we thought we are good to go. So surely thereafter we got engaged, a year later we got married. And then we... after our honeymoon, she went back down to Hawaii. She was still in the Marine Corps, still doing her thing. And she calls me one day and says, "Hey, the cancer is back; oh! Okay, that's not good" So the outlook was not good at all. She did not have a very good prognosis. So she needed doing a similar surgery, they did a lot of the same things. And eventually she went to Duke University, where they did an experimental cancer vaccine, which was at that time they weren't doing a cancer vaccine and I know it's kind of big thing right now. They're talking about it again. But 25 years ago nobody was really doing that. So, she went through that whole treatment and was one of the five percent in the group that ended up surviving. And they basically consider her cured. She's... we've had a few other skin cancer scares over the years. We've had a few things taken off or she's had a few thing taken off. But overall, her health has been... has been very good. So we've been very fortunate in regard to that. So, she... with all the travel; she was doing for that and everything. We kind of had a little bit of a background on what it was. We just didn't realize it was called medical tourism at that time.

Kevin Snow: Well, in speaking medical tourism, I really think that's... like you... its people really don't have an idea of forming their unison combining in two words that really don't fit together for a lot of people. So, just give an idea on how... how maybe this came to be.

John Cote: Yes. I mean, I'm sorry. On this part of that question. What did you say again? I'm sorry.

Kevin Snow: Well basically, how did medical tourism come about? Has it always been something ...?

John Cote: Oh.

Kevin Snow: around or is it a...? And maybe explain a little more about what... what specifically it is.

John Cote: Yes, I think for a lot of people it kind of started with something as simple as maybe they live on a bordered town in near Mexico, like here in the United States. Of course, this is a global phenomenon. People are doing this, they travel from England over to former eastern black countries to get cosmetic dentistry and plastic surgery and things. But I think it kind of started with simpler stuff like cosmetic dentistry or even just regular

dentistry. I mean... I talked... I interviewed a couple who went down to Mexico. They were from Canada and it was... the gentlemen had... he basically needed a whole new mouth of everything. He's mouth had just pretty much worn away and rotted away and he just needed a whole new mouth of teeth and it was going to cost them like 35 thousand dollars in Canada. And they were retirees and that really wasn't necessarily covered by their Canadian health care system. So, his only option was to... I think they were going to get in dentures or something. And that's not what he wanted, he wanted a mouthful of his own real teeth. So, he ended up going down to Mexico just over the border from Yuma, Arizona. And went to a company that specializes in doing a medical... dental tourism. Essentially they have a tons of Americans and Canadians who come across...so they landed in Yuma, Arizona. And they just walk across the border and they pick him up in a car. It's very safe, very suburban setting, very nice offices and very professional people. And over a period of about a week, they rebuilt his smile and rebuilt his teeth and his mouth and everything else. And then his wife got a little bit of work done to shed of few hairline cracks and things like that. And for the two of them, for an entire week including their travel and everything cost them about \$7500.

Dr. Robyn Benson: Wow!

John Cote: So when you look at those cost savings. I think for a lot of people, they do it out of necessity. Because they're like, "One, I've got this problem. Two, there are, I've got pain or I've got this problem or issue and I need to get it taken cared of and my insurance doesn't cover it, or I don't have insurance, or our government system doesn't cover it depending on the country they are from. And so they travel to get this things taken cared of; and sometimes it's a very substantial savings and obviously you have to do your research. There is always or storage you have to be careful. You can't just go anywhere, just like you wouldn't go to any doctor or any person you've always had a mouth here in your own home country. But there's some significance savings to be had and in some cases, you're even getting into things like stem cell therapies that people are doing that you can't even get in many countries just because of the regulatory environment because they're years away from approving that sort of a thing. So I think that's really what it came down to. Another... as we talk about the regulatory thing Kevin is, you've got to... for example stem cell therapies. There are certain things you can get done, like I had my knee surgery done and they put stem cells in there to repair some of the damaged cartilage and it worked great. And that's approved. But other things like getting... if you have heart problems and you want to get stem cells injected into your heart to repair damaged tissue because you had a

heart attack, you can't do that in the US unless you're in a special study. Well, one of the gentlemen who had those studies and who's doing them has said, "Fine!" He said; "This is taking too long". And they ended up opening an institute down in the Bahamas with the Bahamian, they worked with the Bahamian government to help get the regulatory environment. Such that they were happy to allow them to do it but they wanted to make sure that they didn't have any other fly-by-night companies just kind of following them in there. So they would all be regulated and joint commissioner international certified and that's kind of the big global agency that helps to certify this kinds of things. So they went down there and did that and now they have an institute, where from the eastern part of the US you could fly there in an hour or two and get world-class cutting edge stem cell therapy on your heart.

Dr. Robyn Benson: Oh.

John Cote: But if you can't get in those places and they're doing it for unbelievably... it's a pretty low price as compared to what you're talking. Some place is you can go and get stem cells therapy, it's like 50 grand or more and they are doing way lower than that.

Dr. Robyn Benson: That's good to know, because I know people go to Ecuador and I actually know some friends who've gone there to have stem cell therapy done. Actually, IV therapy and it was \$25,000 per person.

John Cote: Yes.

Dr. Robyn Benson: Yes. So, and I travel. Since I travel so much, I... seems like Costa Rica...

John Cote: Yes.

Dr. Robyn Benson: Is a big place. That's why a lot of the travelers I meet there they're for medical purposes. Whether it's a face lift or... a lot of people travel to Mexico too... and Costa Rica for dental...

John Cote: Yes.

Dr. Robyn Benson: So it's... and I just... for my book, 'The Healthy Travelers' gathered in some research on it. And I cannot believe, I mean just seeing how much this medical tourism has grown just in the last five years. And it's great that...

John Cote: Yes.

Dr. Robyn Benson: You're able to help people know that this is possible. Through your podcast.

John Cote: Yes. I mean, the podcast has been a lot of fun and it's an interesting too. I've interviewed a couple of government officials. Excuse me, from down in Costa Rica who... their job, their goal is to basically oversee all the companies who are participating in medical tourism and making sure that they're following the rules because they are from a government perspective. The whole country is encouraging world-class, very high-end, really good but inexpensive medical tourism, dental care and heart care. I mean everything, you name it. Hip replacement surgery and all of this. So they're really as a government entity, they're out there looking at this stuff and trying to make sure and encourage in their advertising in trying to bring people in to their country. Because they know there's a lot of dollars out there for this. I mean, honestly the last number that I heard which is in somewhat dispute but there's the estimated that over 10 million people traveled for medical reasons last year to another country from their home country. That's a big number. Now, even if it's only half that ... that's still a lot of people that are traveling for medical reasons. And they're getting... for the most part, all of them are getting great treatment.

Dr. Robyn Benson: Wow.

Kevin Snow: Are there people coming to the US? [Cross-talk 00:23:03.16]

John Cote: Yes. There's inbound as well. That's exactly right. Yes, I interviewed... I don't remember the gentlemen's name but it was at Indiana University; and they have in their health care system over there. They have people from other countries flying in to do a variety of different really high-end, complex surgeries. Now, obviously in this case for a lot of people that's going to be... therein, they're going to need to have insurance or they're going to have to have the bucks to pay for it. I mean, they're going to be paying for the most part a full fare kind of a thing. But then, there's also... there's a couple of companies that we interviewed that have websites where you can get doctors bidding on your surgery. And it's kind of appear like, "Oh wow". And so, of course some people in the medical community are like, "Well, that just seems unseemly and I don't like that"; and everything else. And now I'm like "Oh, that's fine. But, that's where it's all going. I mean, you just so... you can go out and say, "Well I can go, let's say and get a knee replacement surgery or hip... I think it was a hip replacement surgery one of our interviews, the gentlemen that we talked to. And he added... he went and put his stuff in, his information in. Everyone looked at his medical records and said, "Okay, we can do it over here in India for say \$10,000. And they could do it in Thailand for \$8,000. Costa Rica was like \$15,000. There was a company doctor in Houston, right here in the United States. He said he would do it all in, all

expenses, everything, no extra, radiation fee, or whatever or x-ray fees. The whole cost of the whole thing was going to be, I think it was 16 grand. And so, this was a surgery that if you were to call to the top ten agencies or hospitals in the United States and ask them how much does it cost for the surgery; cash. He'd get it anywhere from 50,000 to 70,000 or 35,000. But he felt comfortable with this doctor, he interviewed him over the phone, had a video chat with him. The guy called them on us. He decided to go with this gentlemen. He ended up paying more than he would've, but he felt more comfortable staying in the United States. Other people have traveled to other countries, but the bottom line is it's being... you're getting the information out there. You can see reviews on the doctors, kind of like Angie's list or Google interviews and stuffs like that. So you get a better idea of who they've worked with and the kind of success rates they've had. So, yes. It's just a whole of variety of things that are happening in the industry. They're really starting to get this thing going.

Dr. Robyn Benson: So, when... medical tourism, people fly into other countries. Typically, people have to be prepared to pay themselves right? Because...

John Cote: Yes.

Dr. Robyn Benson: Because that's important part to... of this. But... [Cross-talk 00:25:33.06]

John Cote: I mean, it does cover some. Depends on where you're going and the type of procedure you're doing. And I'll let you continue with your question. I apologize for cutting you off. [Cross-talk 00:25:42.05] But yes, you can, it depends.

Dr. Robyn Benson: So, but also insurance companies might want to be looking at that too, because they can save 10, 15 thousand dollars, right?

John Cote: Yes.

Dr. Robyn Benson: I mean, it's... it's so expensive in this country.

John Cote: Oh, yes.

Dr. Robyn Benson: If you have any... even dental, I can't even believe like a little dental procedure can cost \$3,000 right?

John Cote: Right yes. Exactly! And it's interesting from the insurance perspective. We interviewed a company who I happen to see... it was a couple of years ago. But they got interviewed on one of the major networks on their evening program or something like that. And I was like, "Wow, that's pretty impressive" So I reached out to them and said, "Hey, we'd love to interview you on the show and we've finally got permission and they came

on the show. So they're based at North Carolina. They've got about 3 to 400 employees, and they're a manufacturing company. So, their health care cost and insurance cost were spiraling out of control. They just keep going up and up and up. So they decided to start doing some research on, "Hey could we maybe get some partners in other countries?" So first they were doing like Thailand and India but they very quickly ended up going to Costa Rica because it was closer, it was... you could basically get a direct flight right out of Charlotte or something like that. And what they found was they told their employees and said, "Look, we need to cut costs but we want to make sure you're getting good care. We want to take care of you so here's what we're going to offer, you can use the regular health care system the regular insurance. And let's say for example you're going to go get hip replacement surgery and that was going to cost whatever it's going to cost, and it'll cost you \$5,000 out of pocket. Alright, for your deductible okay? Or you can go down to the facility that we've vetted out, we've vetted out the doctor and the facility and the nurses hoops and the translator down with you. We'll pay for you and your spouse to fly down there, round trip and give you a hotel room and pay for everything. We will pay for all of it, including daily money, per diem for you to get food, we'll pay for your hotel, we'll pay for your air fare and we'll pay for the entire procedure. No deductible, and we'll give you \$2,000 running around money.

Dr. Robyn Benson: Wow.

John Cote: So, do you think many people took them up on that? Yes, they did. They absolutely did. So what ended up happening, they became a huge success story about this. Because I think they said they've had over... It's something like 200 procedures were their employees have traveled down there to get different things done. And so, they found that it has reduced absenteeism, its improved moral. People are recovering from their surgeries more quickly. They've been very pleased with everything that's going because they're talking to each other and saying, "Oh yes, I went down there, the doctor was great, they did a super job, it was all world-class, loved it and it saved everybody a ton of money. And it saves the company that's providing this service to them. By doing even paying for all that stuff. They're still seeing I think it was a 20 to 30 percent cost savings on their annual health care bill.

Dr. Robyn Benson: Wow.

John Cote: It's a big deal. So, a lot more companies are just starting to look at that.

Dr. Robyn Benson: Well, so where... where did all this people go to?

John Cote: They are going down to Costa Rica.

Dr. Robyn Benson: Okay.

John Cote: To different doctors that they had vetted out through the company. And if they wanted to go to a different doctor, that was fine, yes. But if they wanted to go to Thailand or somewhere else, they had a set up. So that was part of a self- insurance program I think it was. It was... It's been a while since I did the interview. But they had it all set up, they had a company that does this professionally. So now there's companies set up to help your small to medium size business of up to several hundred or maybe even a thousand employees set up a program where you can do this to get costs savings.

Kevin Snow: That's excellent! Simply [Cross-talk 00:29:04.26] I think that's... very catalyst and I think it's different....

John Cote: Yes, you're going to love that.

Kevin Snow: So, there's got to be some fears and we've kind of identified some of them.

John Cote: Yes.

Kevin Snow: There's some fears about where do I go and as your time about vetting people out. So, what... how can you get a help with that?

John Cote: Yes, one of the... I actually got calls and emails fairly frequently about, "Hey, can you give me a recommendation on them." And I'm like, "No, I don't do recommendations, I'm just interviewing people and being an advocate..." But I will tell them, "Yeah you do need to go out and you know when you call... say you pick three, five hundred many people you're going to choose to take a look at. What are their accreditations, are they credited in their country or by their local boards? What about the doctors, are they board certified in their countries? Where did they get educated? Now, just because they are not American or European trained doctors doesn't mean that they are not good doctors. They're still great doctors that have been traveled and have been educated from all over the world. So, you just need to kind of open your eyes a little bit and do the research. There's a lot of websites that you can go to. Even in many other countries where you can get reviews, honest reviews from people who have used that doctor for a variety of things. There are companies right now who are setting up essentially. It's kind of like a mash up of Angie's List and a take-out menu, where you go in, and say you type in knee replacement surgery. And it comes up with a whole list of all the different places that they work with and it's got the prices, pictures of all

the places you're going to stay, and the surgery room, and the doctors that will be doing your surgery with reviews from real patients. And these all get verified and vetted out by the local agencies and things like this. So, they're trying to build it out. One of these companies over in Germany, I think it was Medigo. They actually went out and got a six or seven million down round... a round of funding to go out and build this thing out. So, they mean these are... they're starting to be big institutional money that's going in to this and realizing that the way to health care system is right now in the United States and many countries is broken. And this is... we need to throw some smart minds at this and figure this out. So, having the ability to find those reviews, I think to answer your question Kevin is really important being able to vet these people up and talk with them and get a better idea. And maybe, can you give us some people that you've worked with where things went well. Can you give me a name or two of people where maybe it didn't go so well. Who... because if they're willing to say, "Hey, look. Yes, we had a problem with their surgery but we brought them back and we took care of the problem or whatever." I think that shows a willingness to admit that, "Hey we're not infallible. I mean, we make mistakes too." And I think those are all... the things that you can kind of get started when you go out and do your research on that.

Dr. Robyn Benson: Well, as we know the US medical full care system is the most expensive in the world. Correct?

John Cote: Yes.

Dr. Robyn Benson: I'm thinking, this must... I mean, I'm wondering... the big CEOs of hospitals and maybe you're looking at male clinic. I wonder what they are thinking. How this is impacting our local medical establishment would you say. I mean, I'm wondering how they feel about that. Do you know?

John Cote: Well, I can tell you that there seems to be kind of two reactions. At first there's kind of a, "Oh yeah" I mean, like if you go and talk to your local doctor and we've had many interviews where patient said, "I'm going to go do this procedure or surgery down on another country." And the doctors are like, "What are you nuts? You can't go do that. That's dangerous, or they're just going to steal your money, it's not sanitary, it's not everything." It's like, "Well, have you been out of the country?" I mean, let's face it. A lot of Americans have never even left the country. Don't have a passport, right?

Dr. Robyn Benson: Right.

John Cote: So, let's... first of all, let's try and dispel some of this, "Well, I saw a report on such and such TV show that said this poor woman went down to

Mexico and she had a bad experience and she died or was deformed or had some other problems. And I'm not saying that that doesn't happen. Of course it happens and that's unfortunate. But, you know, no one's talking about that. The last time I saw in the medical journals there was something like 44,000 people died in the United States of America for medical malpractice last year.

Dr. Robyn Benson: Yes.

John Cote: So, I mean. Let's not have a double standard here. I mean, these things do happen, it's unfortunate and you need to do your research. But, when you talk about... I can tell you for a fact, I've talked to some of the CEO's of companies down in Central and South America and other places who are getting... they're looking to do partnerships with some of the big time male clinics and the Cleveland clinics. And the cancer centers like Ades Cancer Center. And I don't know specifically if those are the brand names that they're working with. I'm just giving some examples, I'm not trying to say that any of them have any specific agreement with them yet. But they are working on this and realizing that, "Hey, they can open up clinics in other countries and get a huge cost savings. So they don't have to deal with as many of the insurance from regulatory issues. When I say regulatory, I don't mean that in a bad way like they are trying to skirt around it. Sometimes there's so much regulation in a way they just can't get anything done in a cost effective manner and that's all they're really trying to do. So, I think that like...I just... my feeling from talking to a lot of these different people at different levels in the industry. I really feel that there's starting to be an awareness at that level that, "Hey, this is..." We have the world's most expensive health care and I think last I saw we are rank 23rd by the World Health Organization in efficiency and use of resources or something like that. France is number one.

Dr. Robyn Benson: Wow. I heard [Cross-talk 00:34:26.03].

John Cote: I'm sorry?

Dr. Robyn Benson: I heard that US medical care system ranked 37th.

John Cote: Yes, I think I've heard that as well.

Dr. Robyn Benson: Something...

John Cote: So depending on the stat you're looking at.

Dr. Robyn Benson: Yes.

John Cote: It's not... we got up... we spent all that money but it's not providing the level of care that it should for the amount of money that's being spent. Totally agree with you, yes.

Dr. Robyn Benson: Great. So disease management and now about prevention and that's a big message for you on this Healthy Travelers Summit... Global Summit is this prevention because you don't want to land on a hospital at any time soon. But also, do you understand. Unless you get a big message here to John I think is that we just don't end up waking up one day with cancer or a chronic disease. It's accumulation of our choices for 10 plus years.

John Cote: Yes, sure.

Dr. Robyn Benson: So, that's why another big reason, a big why of this... of this summit.

John Cote: Yes, There's some interesting things happening now too. Not too long ago, Apple talked about the Apple watch, right? With health kit on it. And so now not only health kit they have another thing on there that will allow a large universities and organizations to have apps that they can build with Apples on health basically, where they can take... they can strip the personal data out, right? And now Apple doesn't seem knew this and you opt-in to this and this is strictly your choice. But if you're a diabetic or you have autism or you have some other kind of thing and you're trying to do studies. Now, all of a sudden you have millions of people wearing this watches that have the ability to do a little test on them and things like that. Where they can get a better idea of what is happening in the population and the geographic data, and age data, and all this other kind of stuff. So, all of a sudden it really helps when you start talking about big data and computers and the cloud to crunch all that information and get a better idea of what's actually happening in these different communities around the world with these different types of diseases, and cancers and problems like that. And how it can even just remind people, give you a little tap to remind you, "Hey, Evan stood up in a while. You should stand up and be... or just move around a little bit to keep no blood clots and keep your health going and everything else. So I just think that that revolution will be a big deal. Because other companies will follow suit. Android watches will start following suit and everything else. And I think that's good for everyone.

Kevin Snow: That's right. We need to take our deep breathe. That's what we need, a deep breathe.

John Cote: That's right. More meditation, more deep breaths, seems right. Sitting on a plane for six hours at a time. You have to get up and move around.

Kevin Snow: So, there's definitely talk a little about cutting-edge medicine and... So where have you seen like some of the hot spots for people to travel and what kind of cutting-edge medicine are they receiving?

John Cote: Yes, I mean stem cells is a really big deal right now. I can't even begin so there's so many different places and people that I've interviewed. I mean, off the top of my head, I know there's a company down in Australia that has a new method where they can take a pint of blood out of you. Just as like as if you give you donate blood. And this has all been scientifically vetted out. It's approved. It's been... They've got papers written about it that have been vetted and it's approved by the Australian government. And so anyway, what they've done is they figured out how to create something around the order of... I think it was five or 600 million stem cells out of your own blood in a week. And they figured out how to do this fairly rapidly. So now, what do you do with that? You can inject it into problem areas, there's lots of different things you can do with it. For those who are not familiar with stem cells again, I'm not a medical professional, the way it's been described to me is they're kind of like a little healing engines that go around your body and are in your body in different areas that allow you to help heal problem areas. And so, they're looking at a variety of different things that they can use stem cells for you... you know for myself. I had some seriously damaged cartilage that had worn away from my time in the Marine Corps, and I was a life-long runner. And so there was a really bad section in there. It was basically, when you scoped at it, it looked like angel hair postages, it's kind of hanging around and floating around and which just all torn up. So they were able to cut that section out and put in donor stem cells that basically helped to grow new cartilage for me. So as you know, if you know any about that cartilage doesn't grow, once you get to a certain age, it doesn't grow anymore. But now, because of the stem cells that have been donated, I was able to get... grow the new cartilage in there. So now, I can go out and run and have a normal life again. I'm not having to go and get a new replacement surgery or something like that. So we did it biologically instead of mechanically which I think is awesome. And then when you look at... let me think here. There was a great example of a woman whose son had an auto immune disease and I think it was autism, as I recall but I'm not positive, I'm pretty sure that's what it was. But anyway, he was having all kinds of problems with just... I mean, his I.Q. was like in the 50, 60 range, he was like eight years old, still in diapers. Just not a normal, functioning eight-year old kid. And so, medical science in the United States have done everything they could for him, everything that was FDA approved and she found out about this... this experimental treatment down in Panama, I believe it was, and she ended up going down there, it was very controversial, her doctors were like, "Don't do it", "It's a rip-off", "They're

just trying to steal your money" and all these, and, "It's dangerous" and all these other stuff. So she did the research, she did a ton of research and became an expert and then ended up going down there and bringing her son and he got a bunch of these treatments over several year period and it's been a little while since I talked to her but this young man is now a teenager, he's in high school and he has been tested with 100 I.Q. So, I mean, you're like, "Okay", so I know that there's probably doctors and scientists in the audience who are probably saying, "Well, that's anecdotal, it may have been luck" or could have been a lot of different things. I've just seen so many things that have come out like this over and over and over again and have this conversation so many times for a variety of different things. I just think that there's a lot of incredible advancements that are happening in medical science right now with genomics and mapping and stem cell therapies, and nanotechnology, biotechnology and all the rest of the stuff that's coming, I really have a very good, positive feeling about scientists being able to crack a lot of the harder things like Alzheimer's and cancer and stuff like that.

Dr. Robyn Benson: So... this is such an exciting topic. You know what I'd love to do? Because I'm sure a lot of people that heard that you're a pilot who'd love to kind of move the conversation into...

John Cote: Sure.

Dr. Robyn Benson: You've been a pilot for... I guess 17, 18 years, right?

John Cote: At the... Yes, at the airline. Yes. And I was in 10 years in the Marine Corps for that. So over 25 years. I just... I think I just crossed 11,000 hours. Somebody was telling me the other day or something like that. So...

Dr. Robyn Benson: Well, you know as I have been travelling over the last few months and just being at the travel good show in Vegas, I mean people are so excited and care so much to learn about how they can improve their health with travel because it challenges people. So, from you, being our only pilot that we're interviewing to talk about from your perspective, what you've done to kind of protect yourself, knowing some of the hazards of your job. So maybe speak to that.

John Cote: Sure, absolutely. As I was preparing for this interview, I kind of was curious about this. I looked at my log book and got a general idea of how many hours and flights I've had and everything and I've flown somewhere on the order of about 650,000 passengers, I can't even tell you, countless of hundreds of millions of miles around the world and so I know there's plenty of people who are very experienced travelers who travel a lot,

they're flying a lot, they're on planes two or three times a week just like pilots are. So, for them and even for the casual traveler, one of the things that we talk about all the time is the importance of hydration, it's really... you don't really get and understand and then think sometimes. It's just how much you lose when you're up in the pressurized cabin like that, you're at 8,000 feet, some airplanes at 6,000 feet and the air's kind of dry and the bottom line is you get dehydrated very, very quickly and that affects a lot of different things. I can tell you that one of our flight surgeons who I was talking to recently said the flight surgeon, the academy, the group of people that cover them was saying that since 9/11, there's been a highly increased incidence of kidney stones in pilots because there's this security issue of coming in and out of the cockpit, right? You've got to set up the security and make sure there's people there so you can get in... So you don't want to get up and down out of the cockpit a bunch of times, it's the security issue. So we try and, at the most, get up maybe one time, maybe two on an international flight. Well, if you've got a four six-hour flight and you're just sitting there and... we try and drink as much as we can but now, you're like, "Well, I can't go to the bathroom as often as I need to so I'm not going to drink as much because I can't get up and go to the bathroom as much." And so they're trying to figure out the best way to get around that to get people to hydrate more and still be secure and have security in the aircraft because obviously, we don't want anyone coming into the cabin or the cockpit for any reasons at all. So that's been an issue and they've said that that's something they're looking at. Another issue is solar flares. When you're up that high altitude, I don't remember the specifics of the radiation that you get but every five or 10,000 feet, you go up an altitude, you're getting more and more radiation exposure. And if you're flying on a couple times a week, yes, you're going to have more than it would be if you're getting X-rays and stuff like that. But still, if you have a large solar flare event happening... again, I don't know... I'm not really up on all the science of it. I just know that they report that to us as pilots to let us know. And on days when there's huge solar flare activity, we actually fly at lower altitudes to stay out of... stay out of lots of radiation exposure. Again, it's not the kind of thing... it's not like you're walking through a nuclear plant that just melted down or something like that. It's not like all of the solar radiation happening today... this one day, with that amount of... it's like getting an x-ray. But over time, they want to try and alleviate that so we try and be cognizant and aware of that. And then just the body clock and sleep issues, especially for international pilots, when you're flying from New York to Tokyo or wherever and all of a sudden, you're on the other side of the world, and you're trying and... Natural body clock up. It's very difficult. You'll get used to it but over a period of years, over and over and over

again, I think it definitely takes toll on pilots and anyone who travels extensively like that. If you're changing massive amounts of time zones like that.

Dr. Robyn Benson: So where do you find that you're doing for yourself and what do... I mean, in the industry, are you really caught? Are you... do you get like health classes on how to really prepare your body for this kind of lifestyle?

John Cote: I would say initially no when I first got hired, they talk about cockpit resource management is a really hot bottom item. They want to make sure that the captain and the first officer are both talking with each other and communicating and effectively flying as a crew instead of just kind of doing it one at a time. Which used to be a problem back to 30, 40 years ago. Because people have the kind of, "Hey, I'm the captain and I'm in charge of everything and I'll take care of it, don't worry about it." And so they wanted to reduce the mishap rate and they successfully did that because we all cooperate. But... so the... there's a... we go through tons and tons of training. And every nine months, we go back in and we get all kinds of emergencies thrown at us, whether it'd be engine failures, engine fires, you have to divert because the passengers got a medical problem or a hydraulic failure, all these different things. We trained all that stuff but the health aspect of it really, honestly gets pretty short shrift. I mean, they just kind of say, "Yes. Stay hydrated, try to eat healthy, and if any of you eat first-class meals, you don't want to eat that three or four times a week every... there's nothing wrong with the food, it tastes fine. But I mean, it's just not a really healthy thing to be eating for half of your meals of the month when you're going out there, all the time. So, I actually have made an effort and a lot of pilots do to try and eat healthy at the airport, and that also can be difficult as you know, you might have... you're running from one plane to the next, you don't have a lot of time. So, trying to find a good healthy thing and not just throw burger into a bag. I don't do that anymore. I really just... I can't do that anymore. So I try and eat as healthy as I can, I know a lot of guys who feel the same way. I try and exercise as much as I can to just relieve stress, and be sharp and fit in the cockpit, I want to try and make sure I get as much sleep as possible the nights before I fly. Sleep deprivation is proven... it's a major problem. And it's caused accidents in the past, fatigue. So those are all important things to think for pilots and for general travelers, you know how it feel when you get there, you can fly for eight hours or even six hours or five hours and you get there and you just kind of, "I'm so exhausted." Well, that might be your second or third lag for the day, it might be yours too. Well, we have to actually land the plane safely with all 160 or 250 people back there. So you have to be sharp and ready to go at those times. You know so those

things they're are all important; circadian rhythms and healthy eating and exercise and all that kind of stuff.

Dr. Robyn Benson: Wow. Well, what happens when you're... some of those days, it must just be exhausting. But to keep your brain power going what is the number one thing that you do? I mean, is there a supplement that you highly recommend? I mean, I know... in my book, *The Healthy Traveler's Guide*, I mentioned astezamton which is really excellent for radiation exposure, nori, the food nori, [Cross-talk 00:47:33.01].

John Cote: I hadn't looked into that. I wasn't really familiar with that before.
[Cross-talk 00:47:36.13]

Dr. Robyn Benson: Do you think you have to read my book, John.

John Cote: I'm going to have to read your book, absolutely. Send me a copy. It should be on Amazon and I'll order or... I'll pay for one.

Dr. Robyn Benson: I know. You'll get a free copy one time. Absolutely. And also, Vitamin D3 levels, really important for every pilot and flight attendant and anybody who travels on a regular basis. I mean, for any of us in today's world, we need your Vitamin D3 levels above 50.

John Cote: Yes.

Dr. Robyn Benson: And increasing Vitamin C and Vitamin E and selenium, also really important for thyroid health. So, I just thought I would kind of chime in here...

John Cote: Sure. You mentioned flight attendants too and for them, it's a different kind of job that they're doing back there. But they have all the same exposure risk that we do; fatigue and up in the air all the time. And they're actually authorized to fly more hours per month than we are. So, I mean, you can imagine their ... I mean, they're flying even more hours. I mean, it can be exhausting to be up there. And let's face it, dealing with the travelling public can be very fun and it can also be very taxing. I mean sometimes, people are just... we see wacky and crazy things that people want to do in their own tiny, little, personal space and you're like, "Okay, come on dude. You're on an airplane with a whole bunch of people on your...", maybe you could wait to do your personal hygiene items so when you get off the plane or something". And you just kind of see all sorts of wacky things. But for all of us, I think, really who are travelling extensively all around the world, that whole exercise, eating... all of the things that you normally want to be doing anyway are that much more important to

keep you sharp when you get to wherever you're going and do so in a healthy manner.

Dr. Robyn Benson: Yes. Wow. Yes, this is why... again, that all the extra list that we provide on all the speakers, we're really are talking about the hormonal issues and the hydration and the food issues. So we... I think we've covered just about every subject you can imagine. We've also covered electro-pollutions. So all the smog's. Well, now that there's life flying planes and people are... that really affects... there is a category of health that the World Health Organization recognize. It's called electro-hypersensitivity. Which... the symptoms of hypersensitivity are palpitation, gastro-intestinal problems, anxiety, raise heart... just to name a few. But it's a growing... the amount of people that are being diagnosed with this it's growing exponentially. And now, some people are like... they won't... they will try to go on a plane it's not Wi-Fi. But just so you know, we interviewed Magda Havas , so everyone who's listened to this interview definitely go back and listen to her interview because she is world-renowned, she has published many books... gosh, written many articles, a true... there's a tremendous amount of research. I don't know if it's a magnetic pollution, especially coming out of Sweden and some of those countries... unbelievable amounts. So we're not designed to be in these frequencies. And so, speaking in an airplane is pretty high EMF.

John Cote: Yeah, yeah. It is. And we're talking about this in the pre-interview a little bit, the plane I flew in the military actually... that's what we did. We jammed the radar, right? So think of the amount of power it takes to jam in and I mean the radar that's trying to push power through to get a missile at you. So the canopies were tinted with gold and all these other stuff and that's great. But the long-term effects of that, they're still debating. We used to joke around about that kind of thing all the time but it's just part of the deal. They did everything they could to protect us as well as they could at the time and I haven't seen any adversarial effects but they did talk about the fact that yes, you need to be careful when you're on the ground. You don't turn those jammer pods on or anything like that when you're running around with your radar, just too...whether radar or your weapons radar and anything, you don't want to be putting that out on the ground because obviously, there's people around and you could radiate them and that would be bad. So, we have procedures to try and minimize that. And so we've been talking about that kind of thing is a risk for many, many years. But I've only recently, as you said, become aware of just kind of the general concept with Wi-Fi and all the rest of the EMF that were constantly being bombarded with. And up in the cockpit, we've got all those CRT screens on most of the aircraft, there's a lot of stuff coming off of that, and then, we've got very high-powered radios, we

have a radar up there. There's all kinds of stuff going on. So yes, there's definitely risk factors for pilots, I think.

Dr. Robyn Benson: Well let me just share with you, John, she... she has meters so she's been doing this, I guess research, for quite some time. And she said that the luxury of first-classers, a lot of positive reasons why everybody want to travel first-class. But she said the closer you get up front to the cockpit, the more radiation there is in terms of electromagnetic radiation.

John Cote: Yes.

Dr. Robyn Benson: So it's very interesting. So I think about your pilot and... There are a lot of great remedies we've learned some incredible solutions throughout this whole summit too. So there's... even one of our main sponsors, Virginia Brown and Bioelectric Shield. All of you should definitely look into that as something that you want to have for a couple of hundred dollars, you can wear something on your body that will really help protect you from this fields. And the other thing I just want to mention... another amazing person that's part of a sponsor, Oxylent , but the hydration piece you've mentioned for when you're actually... not just drinking water but when you put minerals into your water, really essential... because we want to absorb our water. We can drink all the water in the world but does not mean we're absorbing it. I dedicated a whole chapter in my book just to hydration. So, just to mention some of these things that... ways in which you can help protect yourself from these frequencies.

John Cote: Sure. And it's... there's some other things people don't really think about, too on the pilot's perspective. You'd be shocked at how much sun there is in a cockpit. I mean, we actually... for a time, I used to wear short sleeve shirts in the summer time because it's hot, right? You're down in Dallas or somewhere, or in Houston and it's really hot out and you get your short sleeve shirt on and take that off for the sun's beating down on us, starting to get kind of a farmer's tan thing going on. And of course, my wife, being a cancer survivor and had having had skin cancer, I was actually starting to wear suntan lotion to keep that. So I get... eventually, got to that point where it was like I was starting to doing that. So I was wearing a long sleeved shirts now, I always wear a long sleeve shirts in the cockpit to... because you do have an extensive amount of sunlight coming in through the windows there and just one other little thing that you have to worry about and or not worry about that, make sure you're prepared for and taken cared off so you're not getting out there and getting yourself sunburned and all that.

Dr. Robyn Benson: I'm glad you mentioned this. Dave Ashby, one of our speakers, the Bullet proof exec... we spoke about this. He always travels with... he's a big bio

hacker, and long sleeved clothe... I mean long sleeve shirts and just always covering your skin. But also that there's a line of clothing, too, that you can get which is at... I mentioned in my book about protective clothing, really. To protect you from... along with this radiation. So it's really cool to see that there are just endless solutions out there and that's again a big reason for this whole summit.

[Cross-talk 00:54:44.09]

John Cote: Yes. That's interesting that you've mentioned that. I'd be fascinated to know, for example, like the workout shirts like the long sleeve, really thin workout shirts to help quickly sweat away and stuff like that. If they could make something like that, that would kind of repel or resist EMF and other things like that. I would consider wearing something like that under my uniform shirt as long as it wasn't too big and bulky or something like that. That would be... I have to look into that. That's interesting.

[Cross-talk 00:55:08.04]

Dr. Robyn Benson: Yes, it's fantastic. This... silver threaded clothing that are... you can go online and find out about it but there's one that I recommend in my book. But also, I know the shield... the bio-electric shield that, is again, one of our sponsors of this summit. Excellent. I mean, the research that was done. It was actually designed by a neurological chiropractor 30 years ago. This is how some people really caught on early... the advent of electricity's been a blessing. As Tesla says, a blessing and a curse to all of that. But, little did we know that we would have Wi-Fi and all of these different frequencies that are impacting our lives and are... the quality of our lives. So we certainly want to shuttle that off at night as much as we possibly can.

John Cote: Yes. Sure.

Dr. Robyn Benson: Good. I think this is really cool that... to hear from a pilot, your concerns for your own health and for your colleagues, and also to the passengers. But to know that there's things that you can do. So this has just been fantastic. I know Kevin, we must have about 15 more questions, right?

Kevin Snow: Absolutely. One of the questions that would be asked all the way through is if in your time in the industry, what have you seen that really can be changed and what would you really prefer to see changed in the entire whole industry? It's typically enlarge.

Dr. Robyn Benson: Wow. Yes. That's a good one. Just like everybody else, I think I'm tired of seeing everyone squeezed in to the nth degree down in the back and of course, you can always buy a first class seat. But of course, not everyone

can fly first class, right? So, I know certain airlines have kind of a more room throughout coach so sometimes, that's an option for you were the first 10 or 15 rows of seats, you can pay a little bit more and you have more room. I mean, I've been on plenty of different airlines, I've flown a zillion times where... I'm not a big guy. I'm only 5'9 and my knees are scrunched up against... and then of course the person in front of you push their seat back. I know they've got a product up that's supposed to stop that and the airlines like, "No, no. You can't be put that out there to keep people from putting their seat back. But having the room to be able to stretch out, if you can't do that, then you need to be able to get up and kind of move around a little bit on those longer flights. But then, from the crew's perspective, that's a security issue. They're trying to do... either move the carts around, they're trying to do it... so it's... that's a really tough... I don't know what the answer is to that question. But that's something that's... I know they've got revenue, gas prices are down right now, they're trying to...they're making money, that's great, but as soon as gas prices go up and the economy takes a turn, all of a sudden, they're going to be losing money again and they can't be taking seats out of the airplanes to give you more room because they want to stop as many people as they can and there's...I don't... To me, that's the biggest problem and I think the biggest complaint that I heard in my career during my time out there was that people were constantly... hey, there's just not enough room on the airplanes to get around when they're full like that. And they're mostly flying full. I think that just the general whole... everyone just seems so hurried and stressed and the whole thing from the gate agents, to the flight attendants, to the pilots, and the passengers and the TSA people that are running you through... everyone's just like... we're just and such a go, go, go society that it really raises your stress level a lot. For me, the way I've helped to combat that is just to try and... I mean, if I've got in two hours in between flights or whatever, I'll set a circadian rhythm app to basically let me nap for 20 minutes or 40 minutes or whatever it will set me up for, and take a little cat naps like that whether it be on the plane not obviously long, flying, of course, some time I'm opposed dead heading to another destination. But, on the ground while waiting in between flights and stuff and I found that that really helps me to stay very alert late into the evening when we have a longer flight or something like that. So fatigue, I think, is a big thing for all of us on the crew side. And on the... the passenger side. And I don't know if I have a good answer for you but to me, those are some of the biggest problems that I see. And I'd love to see someone innovate that and go make a trillion dollar company out of how to fix that problem

Dr. Robyn Benson: Yes. That is cool, this circadian rhythm app. What's it called?

John Cote: I don't remember the... I just found it the other day. But basically what it does is... you got like a strap on you that kind of... to takes so much from moving around or whatever. I think it's really more designed for overnight sleeping and you can set your alarm like, "Okay, I want to wake up at 7:30," and it will wake you up plus or minus... not later than 7:30 but up to half an hour earlier. So that there... you're waking up in a time of circadian... high or I think it is... Anyway, they don't want to wake you up when you're in the middle of deep REM sleep. Because you know how that is. When you're just like you're way out of it and the alarm goes off and you're just... you're just having a hard time getting up. And then other times, you've had where you just said, "Okay, I need to wake up at five a. m. and you just wake up at five all of a sudden and you feel great. And it just happens to be that you happen to catch on the right circadian rhythm. So they do give us a lot of training on that from the pilot side, how circadian rhythms work and what the cycles are and how to find your own cycles and make sure that you're not waking up on a period of when you're in deep REM sleep because that really just messes up with your body clock and your functionality for until you actually wake up an hour or two later so...

Dr. Robyn Benson: Yes. Another great... have you worked with heart math before?

John Cote: Which one?

Dr. Robyn Benson: Heart math.

John Cote: I don't think I've seen that on the floor.

Dr. Robyn Benson: Yes. That's fantastic too. And actually, when I was... flew to New York last week, I actually was able to use it while I was flying, and just... it's a breathing technique too... and focusing on your heart and positive intentions of over... any of you there listening that have a lot of nervous anxiety around flying, that would be a great app for you to get. It's like \$129. I like the... I think it's called inner balanced and it was great that I could get myself into the whole green zone. That means that my heart's coherent, even in a stressful environment. You're flying, I have to say one of the most nerve-wrecking things for me and I'm getting better at it. The turbulence things seems to be worse. Is that true with the pilot? I'm not a big fan of turbulence.

John Cote: I can say that driving in most major cities, there's more turbulence when you're driving because you're getting a lot more potholes. I can tell you that. Now I can't say that I've noticed anything like that but I do want to mention something. I do get fearful flyers come to us every once in a while and say, "Yes, I'm really scared of flying and the bumps and

everything else" and I explained to them, "Yes, just like going over a pot hole or whatever." If you're ever curious to see what it looks like, you can Google this and go on You Tube and look at like 737 wing destruction test. And what they do is they clamp the airplane down on the ground and then they put vices out on the wings and they just keep pushing up until they break, just to prove that they can handle so many G-tons and everything else. And they're usually pointing about 45 or 60 degrees in the air. I mean, it's like... so you see the wings fluttering out there a little bit as you're going through some turbulence and those planes can handle a tremendous amount of that. I mean, any... more than anything, most... even in a severe turbulence, since, and it's very... it's almost unheard of for someone to have an airplane coming apart for something like that. But yes, that turbulence thing, they have new radars that they're working on that they've just released that give us a better idea. Because we can paint precipitation and severe wind shifts but it's really hard to find just regular turbulence, clearer turbulence. But they have new radars that are supposed to help us with doing that. The ground controllers, all that they can tell us is, "Yes, the last person that flew through there didn't have any problem. Then all of a sudden, the wind shifts and you get a major sheer up there and it can be eye-opening for people. And it's... it's really more of an annoyance. You're just back there and you're bouncing around and I'm just trying to watch my movie or read my book or do my work or whatever. But... Yes, that's all I've got to say about that.

Dr. Robyn Benson: Wow. But we're so lucky for our travel and I have to say that gosh, I forgot the statistic. But, I mean, when you think about it, are there about... how many flights take off a day?

John Cote: Let me think. In the United States alone, I would have to... off the top of my head, I think it's about 12 to 15,000 departures a day. Just in the United States. And some of those are flying to other countries. So I don't know what the global number is. But that's... it's a lot of flying and so there's a lot of planes in here. You got a flight tracker online and you can see all the planes that are up airborne and where they're going and where they came from and everything. And during the peak tower, you'd be shock at how many... you see this masses of... huge mass ball of airplanes all together, over all the different major destinations and everything, so...

Dr. Robyn Benson: Wow. But still, it's just amazing how little happen... I mean there certainly are plane crashes but compared to car crash even you're...

John Cote: Yes. It's very nerve-wrecking. Yes. It's very rare.

Dr. Robyn Benson: Right. Yes. So we're [Cross-talk 01:04:03.02].

John Cote: I know. Hey, you've been asking about apps, I've got one for you. I recently got turned onto this app called headspace. And what it is, it's free for the first 10 episodes or whatever. But basically, what it is, it teaches you how to meditate and it's not religious, specific or anything like that, there's no weird stuff going on. It's just this gentleman who's a specialist in meditation basically talks you through getting your mind to relax. And so the point is not to put you to sleep or getting to some special state and say ohm or anything like that. Basically, it's just trying to get you to relax and let your mind just get to a point where it's resting in a conscious state. And it only takes 10 minutes a day and you can do it while you're on the plane. And I have actually... when I'm commuting to work sometimes in the past, I've done that before, I've done that before flights when I was kind of tired or whatever. And again, it just takes 10 minutes, and what it does, it kind of refreshes your brain, it's almost like taking a 45 minute or an hour and a half long nap and you just feel refreshed and energized and it's a great way to get yourself going before you get off the plane and hit your next meeting or whatever it is you're going to, when you get your destination.

Dr. Robyn Benson: Okay. Great. So, how can people... as I wrap up here...

John Cote: Sure.

Dr. Robyn Benson: Gosh, we could interview about five more times, I think, and we wouldn't be complete. But how can people find out about your podcast?

John Cote: Sure. Well, we believe in the 'you everywhere' now concept so we're on just about every single podcasting platform on the planet, if you like to call it podcast, we're on Spreaker Institute Radio and all of them, pretty much. We just applied the iHeart, we're hoping to be out there pretty soon. But you can go to healthcareelsewhere.com and that's our website where we hold all the episodes, we've got 104, 105 episodes to date, at this point, and of course, iTunes and everything else. So obviously, I'll put the plug in. We'd appreciate your support listening to the show. If you subscribe, we would appreciate that as well. That's how we get to show our success to people who are interested and everything. So we would love your support on that and so yes, so healthcareelsewhere.com is the primary place or... wherever you find podcast are found, how's that?

Dr. Robyn Benson: That's where you are. Well, we can't wait to hear some of your podcasts. And again, thank you for being part of the Healthy Traveler's Global Summit and sharing so much incredible information for all of our listeners to learn about medical tourism, number one, if we didn't know about it. But also, to get the insights from a pilot's viewpoint of the travel world. So thank you very much for being here with us today.

John Cote: Robyn, it was my pleasure. Kevin I really appreciate you, guys, time and the invitation. I just had such a great time meeting you down in San Diego. It was so... just serendipities and a lot of fun. I'm looking forward to hanging out with you guys, getting out there out west and see what you're all about and hope to do some more of this in the future, that would be great.

Kevin Snow: [Cross-talk 01:06:49.24] Tourism come out to Santa Fe Soul you've got what's going on.

John Cote: Okay. You go.

Dr. Robyn Benson: You could register our center, you can get PRP, you can get injections, prolozone, we have incredible practitioners, we have 5J, retreats called freshstart.com at Santa Fe... and our website is santafesoul.com but yes...

John Cote: Well, I'll tell you what, before we go real quick, let me tell this out to you then, I would be interested in interviewing some of those doctors and their patients for... if there are some kind of... if they're travelling in to do this for different kinds of treatments, I would be interested in interviewing some of those doctors and patients on our show because I think there's something... I think there's some good information there that would be great for our listeners on my show.

Dr. Robyn Benson: I would be happy to.

John Cote: Super.

Dr. Robyn Benson: Thank you John.

John Cote: You're welcome.

Dr. Robyn Benson: Take care and happy flying. And to all of you, again, thank you for being part of this incredible summit. And we're just super happy that you get to be part of it and just stay tuned because there's going to be more once the summit's over to keep you engaged in this really important message and just know that you can opt in and have this library for your own... for your own schedule 24/7 so... just that's it. Easy click and to be part of this message and just show with your friends and loved ones. Take care. Goodnight.