

Unconfuse Me with Bill Gates

EPISODE 01: Seth Rogen & Lauren Miller Rogen

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SETH ROGEN: Edibles? I don't mess with that. Snoop Dogg doesn't eat edibles.

BILL GATES: Oh, wow.

SETH ROGEN: That's how wild the variation on edibles is. And I do not recommend this.

[music]

BILL GATES: I love learning, even if the topic is complex. I like to see if I can figure it out, and when you're learning about something, it's important to let yourself be confused, to acknowledge, "I don't really get how these pieces work together." And then it's so much fun when they start to make sense. I call that 'getting unconfused.'

[music]

BILL GATES: Welcome to *Unconfuse Me*. I'm Bill Gates.

[music]

BILL GATES: Alzheimer's, comedy, and even cannabis, come together for the couple I'm talking to today. My guests are Seth Rogen and his wife Lauren Miller Rogen. Seth has done comedies, which, if you haven't seen, you've really missed some of the best stuff out there. *Knocked Up*, *The Fabelmans*, *Pam and Tommy*, *Superbad*, and the voice of Donkey Kong, most importantly. Lauren's also super talented. She produces, directs, acts, and now, the coolest thing, which we'll get into quite a bit, is that together they started Hilarity for Charity, which is about a decade old and has been very successful highlighting the role of caregivers, providing financial support, really just building communities of people to help each other deal with the challenges of Alzheimer's. So, you guys love humor, and here we have one of the more serious topics of all time, Alzheimer's.

SETH ROGEN: [laughs] We like a challenge.

BILL GATES: So you've created Hilarity for Charity, tell me about that.

LAUREN MILLER ROGEN: Well we started Hilarity for Charity out of our own frustration and desire to do something about how powerless we felt about dealing with my mom, who had been diagnosed with Alzheimer's. She was diagnosed when she was 54, almost 55. After my mom was diagnosed, we spent those first few years feeling like most people do, which is scared and depressed and had no idea where to turn. We started talking about it and we threw our first event.

SETH ROGEN: Which was just a comedy show.

LAUREN MILLER ROGEN: We did that in January of 2012, and really through that realized there are young people who are affected by this disease, they want to have a voice in it too, they want to share their stories, they want to be advocates, they want to take action, they want to raise money. So we started as a fund within the Alzheimer's Association, and we grew our programs and we started doing support groups for young people. One thing we sort of first realized was that we're not raising the type of money that's going to find a cure for this disease. So what can we do to help people now? What can we do to help caregivers today? And over the years, I think our mission has become clearer. So that's what we're doing.

BILL GATES: So when you were calling up friends to show up and perform at Hilarity for Charity, that must have been hard at first.

SETH ROGEN: Yeah. I remember Nick Kroll was like "Do you have Alzheimer's?" People were confused at first but they were always very supportive, honestly, and happy to help. Especially people who knew us. And then you start to hear, almost everyone has some sort of personal story or some connection with Alzheimer's or dementia in some way.

BILL GATES: Yeah, everybody's going to run into this because all the progress we make on cancer and heart disease just means you live longer, and as you experienced, people can get this even in their forties or fifties. Once you get into your eighties, the majority of people have some dementia, and the majority of that is Alzheimer's. Let me ask you – when you do your events, is it mostly that they're entertaining, or do you try and educate people at the same time?

LAUREN MILLER ROGEN: Now we do.

SETH ROGEN: I'd say we've evolved our approach to integrating the serious subject matter into comedy, tonally. We were just really uncomfortable at first.

LAUREN MILLER ROGEN: Exactly. To your point, Alzheimer's and comedy aren't the most obvious combination, so therefore it was like, "Well we want people to have fun, and we want them to give us their money. But also it's about Alzheimer's." So that was a delicate walk into just figuring out how to do it.

SETH ROGEN: And ten years ago, we were in our late twenties, and very few people our age were even talking about Alzheimer's at all, in any capacity. I think we struggled with our own comfort of how to be funny and talk about it. But now it's actually very intuitive and organic and people are very understanding of it. They can really go along on the journey and shift gears very seamlessly from hearing very heartbreaking things to experiencing very funny, silly things.

BILL GATES: You probably know my dad also died of Alzheimer's, but it wasn't until his early eighties that it was really slowing him down. He lived until 93, so he had about 13 years. I was super lucky that I could afford these professional caregivers along with the family. We got to be so close to those people. My dad never knew their name but he liked them. He lived with them. So that kind of made it a shared experience. Early in my dad's Alzheimer's, there's one funny thing, which is that he was on the board of Costco, which is a super successful retailer and a very important job. I said to my dad, "You should get off of this board, Dad." And he said, "Why? I'm really good on this board." And I said "You know, Dad, you have an unblemished reputation, so you're probably not up to it." And he said, "I think I'm up to it." And then he thought about it and I told him again, and

then he called up the guys on the Costco board, and he says, “Look, I think I’m doing a great job, but my son says I should quit, and sometimes my son is right. So I’m quitting.” You have to laugh about some of the milestones.

SETH ROGEN: Definitely, yeah.

LAUREN MILLER ROGEN: It’s a cruel disease but I think a lot of people have those types of moments, where it was accidentally a funny thing you can look back on. We did a virtual event for caregivers. One of the panels was about humor, and bringing humor to caregiving. There were some very funny things.

SETH ROGEN: People have truly outrageous stories and it was very cathartic. It was a group of people all crying and laughing hysterically at the same time, which is actually very emotionally relieving for people, I think, to be able to access both those emotions, and it is just funny sometimes, because of how absurd it is, and sometimes all you can do is laugh. Comedy does have an amazing ability to support any idea if you are good with it. And there are very few things that you really can’t surround with comedy, if you aren’t sensitive and really aware of what you’re doing. Over the years, people really like that we’re able to talk very frankly and openly about Alzheimer’s and also make you laugh a lot.

BILL GATES: It still has some stigma. There’s both lack of awareness and stigma. In my dad’s case, we never really, until pretty late, officially said it was Alzheimer’s, although it had the unique characteristics, because sadly, since there really isn’t much in the way of treatment, actually making the formal diagnosis isn’t like you magically say, “Now take this antibiotic and your Alzheimer’s will get cured.” In the next decade, I’m pretty hopeful there’s a whole pipeline of new drugs that should make a difference. But I’m surprised at the stigma and how strong it is.

LAUREN MILLER ROGEN: Honestly, the stigma has put us in the place we’re in today instead of further along, because people were afraid to talk about it. They’re still afraid to talk about it. They don’t want to share their stories because, yes, there are some funny ones, but the reality is it is a dark disease, and it is painful to watch your loved one go through it. My grandfather, my mom’s father, had it. Then, a few years after he passed away, her mother started showing signs of dementia. She was sort of between Alzheimer’s, Parkinson’s, etc., and then when my mom started showing signs only five years after my grandmother had died, we knew, and she knew. But she didn’t want us to tell anyone, because she felt this shame and this sadness for herself and this fear of what was going to happen. She was a teacher for 35 years. She was someone who used her brain and was in control, and commanded a classroom of six-year-olds. That’s not easy. What we faced early on was that keeping the secret became heavier and a harder burden to bear than just telling the truth, and sharing it, and telling my friends, “This is what I’m carrying. This is what I’m going through.” Once I did that, people showed up for it, and I felt supported. It is this fear of aging, this fear of death that humans carry with them, and the loss of control. Someone who has dementia and Alzheimer’s, they lose all control of everything, and I think that is incredibly scary, but it is a reality. Part of what we’ve tried to do is talk about it honestly and openly and encourage other people to do the same, because when we share our stories, understanding happens and learning happens, and that’s how we progress.

BILL GATES: I think there’s always milestones, like is the person willing to accept somebody being in the house? It’s very private, they’re self-sufficient. That person – what’s their agenda?

Where do they sit around? And it's really hard. In my dad's case, he took a fall, and he clearly needed help for the fall, and we finessed it that those people just never left. But we should have gotten people in there maybe six months before. But it would have been such a "Why are these people in my house?" type thing. And then for other people, if you can't do it in the house, then you want to move them out of their house, but then that's often traumatic and is even somewhat associated with them not being as understanding of the environment they're in.

LAUREN MILLER ROGEN: It's a really complicated situation when your loved one is diagnosed with Alzheimer's. My mom also had resistance to people coming in early on. Fortunately that didn't last very long, thank God, because these caregivers saved my dad's life.

SETH ROGEN: Often the caretaker dies before the person they're taking care of with Alzheimer's. That was something we were seeing play out in real time with Lauren's dad.

LAUREN MILLER ROGEN: It was clearly obvious.

SETH ROGEN: Yeah, it was obvious.

LAUREN MILLER ROGEN: He had to retire early from his job to take care of her, and then taking care of her became truly a 24 hour job.

SETH ROGEN: He couldn't sleep, he was physically being taxed, his health was definitely getting deprioritized, and when you're in your sixties and seventies, that is rapidly detrimental. It's why we also were able to pay to have people come into the house. And it made everything easier. And it saved her father's life, probably, and it made our relationship much better, because it alleviated this giant pressure. That's why giving grants for in-home care became a major thing we started to do with the money HFC was earning and raising, because we saw how tangible it was. In one day, if you have someone in the house, your situation goes from being completely unmanageable to somewhat manageable. It was just so obvious and clear and it felt so unfair that we were able to do this and that millions and millions of people that were dealing with this disease had no opportunity, and were instantly buried by the diagnosis, and it instantly just ripped their lives apart.

LAUREN MILLER ROGEN: We surveyed some of the recipients of our grants, and somewhere between 85 and 90% of them said they felt more hopeful about caregiving after receiving this respite care. It couldn't be more obvious, yet our government is not up to speed on that. That shouldn't be the case. Caregiving shouldn't be a personal responsibility, it should be a societal one.

SETH ROGEN: It's something we see firsthand. If you don't have a lot of money, and you have a loved one who needs care all of a sudden, you usually have to quit your job, so you have even less money. That money quickly dwindles. It destroys your physical life. It's like mathematically instantly impossible to deal with for a lot of people.

BILL GATES: Do we have a different word when we refer to a family member who's taking care of their loved one for free, versus the people who come in?

LAUREN MILLER ROGEN: We call it family caregivers, versus a professional caregiver.

SETH ROGEN: I think that as the population is aging, and as things like Alzheimer's are becoming more and more costly, and not enough resources are being put into fighting it, the further down the hole you go, the more frustrating it gets, and the more you really are mobilized to try to do something about it.

BILL GATES: You'd think given how prevalent Alzheimer's is in our society, that getting people signed up for trials would be really easy. Sadly, it's not, because the amount of tests you have to undergo to know whether you fit a particular trial is really quite grueling. And because there's no formal diagnosis, finding all those people and seeing who might be right for the trial is very, very inefficient.

SETH ROGEN: I think it's all up against this massive societal shift that needs to happen as far as how Alzheimer's is spoken about, how it is dealt with. The amount of money it receives in comparison to cancer and things like that, which are less costly, more treatable, and exactly as deadly, I think the only logical answer is that people just don't like talking or thinking about Alzheimer's. It scares them, it makes them uncomfortable. People are very weird about their brains, that's just a thing in general. Mental health, brain health, all that is a taboo thing people don't like to talk about. All these things are the things that need to be overcome.

BILL GATES: I get to work on the science end, which hopefully will reduce this problem, and eventually eliminate it altogether.

LAUREN MILLER ROGEN: That's the dream. I would actually, honestly, truly love to hear more about clinical trial space.

SETH ROGEN: What are you most optimistic about?

LAUREN MILLER ROGEN: Obviously you know so much more about that. What are some of the things you're excited about?

BILL GATES: About 10 years ago, there was a generation of drugs that they thought that interfering with the plaques would stop the disease and relieve the symptoms. Although there are still a few of those that may have some modest benefit, by and large, that failed. You've got to give the pharma companies credit. Eli Lilly even did a movie about all the people working hard and the disappointment when it didn't come through. Now they're saying you have to get in much earlier. If you're just getting in when the tangles are there, the brain cells are already dying. So let's get to younger people. There are two big theories. One is that the basic energy factory of the brain, having run for fifty, sixty, seventy, eighty years, that the parts of the brain that are active all the time, those cells, called the mitochondria, which are the energy factories, they develop these defects. There are about six different companies that have drugs that have to get all the way up into the brain, that's tricky, but they're much smarter about that now. They're in phase one or phase two trials. So best case would be five years, worse case would be like ten years. Another theory, which is a fairly mainstream thing, is that the way your immune system reacts and creates inflammation, that's bad for your whole body. Aging and inflammation are very related, particularly if you're in stressful conditions. They see now that the part of the immune system that's in the brain, the so-called glial cells, that for the people who get Alzheimer's, they're more hair-trigger. All these immune system things, women sadly are slightly more subject to. We see that with Alzheimer's as well. There's a bunch of drugs, some of which I think will work, that interfere with that. These trials have been

really expensive because you have people come in and you take these cognitive tests, and sometimes they get really good at the test. So, it's a very imprecise measure. If we could really take a blood sample, and there are now some diagnostics that'll come first, and will make the trials a lot easier. You'll take the blood and see a clear signal of are you having an effect or not. So even though the brain is so much more complicated than everything else, these trials are very promising. If you'd asked me four years ago, I would have said it's a little scary, but during these four years, new small companies have come along, the big pharma people have largely stayed in, they'll be tie-ups between those, so we have to stay healthy for another at least five to ten years!

LAUREN MILLER ROGEN: That's why brain health is important! That's why living a brain healthy lifestyle matters.

SETH ROGEN: Kick it down the road.

LAUREN MILLER ROGEN: We've got to get science caught up. That's why our other focus of course is brain health and teaching people – everyone, teenagers, college students, adults – that you can care for your brain and perhaps delay, maybe prevent altogether, but delay until perhaps, as you say, ten years from now, when there is a drug.

SETH ROGEN: And what we've found as we've gone down this brain health journey is that the average person does not even know you can conceptually do things to take care of your brain, and if they are aware of that, they have no idea what those things are. Maybe crossword puzzles is the thing they'll say. Which is not even helpful. I think that, to us, is something that has also been very inspiring. Especially with young people, they love nothing more than to hear where previous generations have failed them, and to see them perk up when they hear, "Maybe the most important part of your body you were never told how to take care of! They completely neglected that conceptually." It really engages people, and they really like it. There are studies that show right now, up to 40% of cases of Alzheimer's are preventable through brain-healthy habits. It's not 100%, but that's a lot. That's almost half. Everyone should take that. That's something that's been really a great focus for us and something that especially as people who kind of have a line to a younger generation from a communications standpoint, they've been very engaged with and people really like to know that they can do things to take care of their brain. Just like if you don't smoke, you won't get lung cancer, probably. If you don't eat French fries all day every day, you won't die of a heart attack, probably. There are things you can do to really help your chances of not getting Alzheimer's.

BILL GATES: One of the strongest things to emerge in that area is the importance of good sleep. I've gone from, in my thirties and forties, when there'd be a conversation about sleep – sadly for me that's a long time ago – it would be like, "I only sleep six hours." And the other guy says, "I only sleep five!" and "well, sometimes I don't sleep at all." I'd be like, "Wow, those guys are so good, I need to try harder, because sleep is laziness and unnecessary."

LAUREN ROGEN MILLER: Like "I'll sleep when I'm dead."

BILL GATES: Now what we know is that to maintain brain health, getting good sleep – even back to your teen years – is super important. It's one of the most predictive factors of any dementia, including Alzheimer's, whether you're getting good sleep. So I've swung all the way to looking at my daily sleep scores.

SETH ROGEN: Oh yeah, we do all that.

LAUREN MILLER ROGEN: Same.

BILL GATES: Competing, okay, who got a 90? How the heck did you do that?

LAUREN MILLER ROGEN: Generally I do better than Seth.

SETH ROGEN: I take the dog out.

BILL GATES: I'd lose out.

SETH ROGEN: When I was young, the convention was, "You'll sleep when you're dead. Sleep isn't that important. You don't need sleep." And now already we know that's completely oppositional to the truth, and if anything, it's maybe the single most important thing you can do to keep your brain healthy. It's like how they used to think smoking was healthy. It's similar. That's where we are culturally. The things people think and understand about their own brains are where they were in the 1950's and 1960's. It's so far off from what actual science is reflective of, and it's nice to be able to communicate that to people.

LAUREN MILLER ROGEN: We have these conversations, and sleep is actually the funniest one, because people think, how can I improve my sleep? I can't improve my sleep! There's nothing to be done! That is so not true. You can do so many things.

SETH ROGEN: You ask them three questions and you're like, oh yeah.

LAUREN MILLER ROGEN: That's been a fun thing, to change my own sleep. I do track and I look every day. I know that I sleep really well, and that's really important.

SETH ROGEN: She sleeps with 400 contraptions. [*Laughter*]

LAUREN MILLER ROGEN: But I get great sleep because of it.

SETH ROGEN: She does sleep really well though. But it's like a team of people. [*Laughter*] It's like a shuttle launch every night.

LAUREN MILLER ROGEN: At HFC, we have our five brain-healthy habits, which of course are sleep, exercise, nutrition, mental fitness, and then emotional wellbeing.

BILL GATES: Hmm, interesting.

LAUREN MILLER ROGEN: Those are things that seem obvious, but they're not things that people incorporate into their daily lives. I wasn't doing that, now I do, and I feel better and my health is better. I feel optimistic about that information when I'm given it. We created this coursework for high school students and college students to learn about this stuff. It seemed to us like they wanted to know and literally 100% of them said they were more interested and would be taking steps to live a brain-healthy lifestyle. 80% of them said they were interested in studying neurology! Which would be another thing which would, of course, help this field.

SETH ROGEN: What we've found from the neurologists and doctors we know is that a lot of people in the medical field don't understand that there are things you can do to keep your brain healthy. That's how big the disconnect is, which was alarming, in some ways. What's funny is that the one scientific study that we did, that we actually had published, is that I taught this coursework of brain health, and we also had a neurologist teach the coursework. We scientifically proved that people retain information better from celebrities than doctors. Which is a heavy burden, so just know that. *[laughter]* But it is true. It was published. *[laughter]*

LAUREN MILLER ROGEN: In the next couple weeks, we're shooting five more courses with five more celebrities.

SETH ROGEN: Five more celebrities, because young people only want to hear from them.

LAUREN MILLER ROGEN: Yeah, we're doing that soon and then hopefully we'll get it out there. Again, the main issue, in my mind, is people not sharing their stories, and it's because they're scared. We give them some hope, and they become less scared. They share the stories, and that leads to energy, that leads to movement.

SETH ROGEN: Yeah.

BILL GATES: So when you first met Seth, were you surprised by how much weed he smoked?

LAUREN MILLER ROGEN: No.

[Seth laughs]

LAUREN MILLER ROGEN: When we first met, he smoked cigarettes and that I ended immediately.

BILL GATES: Oh, really?

SETH ROGEN: Yeah, she made me stop that.

BILL GATES: Well, you saved his life then.

SETH ROGEN: *[laughs]* She really did, yeah. So the weed was fine.

LAUREN MILLER ROGEN: I really, truly, was like – weed, great! Hand it over! But cigarettes, no.

BILL GATES: And you have this cannabis lifestyle business called Houseplant. Are you enjoying this new business?

SETH ROGEN: Yeah, it's been amazing. I always talked about how much weed I smoked. Ever since I was young, I started when I was in my early twenties writing, acting and producing. People always really liked that I was honest about the fact that I smoked a lot of weed and that I was a productive, normal member of society. A lot of people were that also, but no one was talking about

it, and no one made them feel like they could talk about it. The impression of every stoner was that they were a lazy loser, and I was anything but a lazy loser. I was creating a prolific career at the time, when all I would do was smoke weed all day, every day. Which is all I still do! *[laughter]* It's great now to be able to make things for people who smoke weed, that are nice things and that have thought put into them, because if you're like me and smoked weed your whole life, you've never bought anything that was nice and had thought put into it. It all seemed like it was concocted in a dorm room at four in the morning. The idea that there could be nice home goods and a lifestyle product for people who smoke weed that are actually elevated was fun from a company standpoint, but also from emotionally connecting with people who grew up like me smoking weed and being told they should feel shame about it. I think things like Houseplant make you feel like you don't need to feel ashamed of it, you know?

[music]

BILL GATES: I love music, and I always think it's fun to hear from other people what some of their favorite tunes are, so I encouraged you to bring something along. Did you bring something?

SETH ROGEN: We sure did.

LAUREN MILLER ROGEN: Yeah we did!

SETH ROGEN: Well, speaking of Houseplant, one of the fun things that we do at Houseplant, is that we created these mix records. We created essentially playlists that went along with different strains of weed.

BILL GATES: Oh, cool.

SETH ROGEN: So the sativa playlist is upbeat music, the indica playlist is really mellow music, and the hybrid music is right in between. That's what these are. Me and my friends picked all the songs. It's a lot of soul music, it's a lot of funk and R&B music, stuff like that. Does this work? Should I put it on?

BILL GATES: Yeah.

[music – “The Oogum Boogum Song” by Brenton Wood]

SETH ROGEN: *[laughing]* This is a hybrid song.

LAUREN MILLER ROGEN: And it's like a perfect hybrid song.

SETH ROGEN: It is!

LAUREN MILLER ROGEN: Because you want to bob your head, but you don't really want to get up and dance.

SETH ROGEN: It's not going to put you to sleep. It's right in the middle.

BILL GATES: If you smoke enough weed, are there carcinogenic effects?

SETH ROGEN: There's none that have been definitively proven.

BILL GATES: Okay.

SETH ROGEN: I can say, we've never had a doctor tell us to stop smoking weed.

LAUREN MILLER ROGEN: Yeah, we bring it up. We've asked.

SETH ROGEN: We're very upfront with all of our doctors. Lauren goes to a neurologist, she's part of programs and studies and no one has been like, "You should stop smoking weed for the health of your brain." So, that's been good and nice! It's nice that this thing I do is not antithetical to the other thing I do, and that potentially there are therapeutic effects to the manifestations of dementia. Things like mood and appetite, and things like that. If anything, it could be helpful.

LAUREN MILLER ROGEN: But because it's not federally legal, there isn't money to fund research into this stuff.

SETH ROGEN: And it's scheduled in a way that makes it un-studyable in a lot of ways.

BILL GATES: Hmm.

SETH ROGEN: It is federally illegal for labs to have, it's incredibly complicated to have it. It's scheduled next to like, heroin, so it's not federally accessible for study in the way it could be, so people actually understood what it was and was not doing, which I would love to know.

BILL GATES: Yeah, I've always wondered if we started from scratch, and we said, "Okay society, you can have one drug: you can either have alcohol, or pot –"

LAUREN MILLER ROGEN: Oh, my God.

SETH ROGEN: Oh, they would have picked weed, for sure.

BILL GATES: Well, weed is much less –

LAUREN MILLER ROGEN: Totally. We go out with our friends and they drink. Of course, I'll have a drink every now and then. But the amount that people drink versus the amount that we smoke, someone the day after a night of drinking, versus someone the day after a night of smoking weed –

SETH ROGEN: Oh, yeah.

LAUREN MILLER ROGEN: You're in a very different condition.

SETH ROGEN: Alcohol is the worst drug. They did a real marketing thing there. They took a drug that, like, you have fun for 25 minutes, and then you have a headache, you're vomiting, the whole next day you feel terrible.

BILL GATES: You say stupid things.

SETH ROGEN: Yeah, exactly.

LAUREN MILLER ROGEN: And act like a moron.

SETH ROGEN: They've done a really good job of selling it as a good drug, but it's one of the worst.

BILL GATES: The one complaint I've heard about legal pot is that a lot of us who were smoking it when it was illegal, the dosage was actually pretty modest, so at least as you move into the legal pot world, you can be getting really extreme doses, particularly on the edibles.

SETH ROGEN: Yeah.

BILL GATES: I think I know, okay, if I puff five times what that means, whereas if you ingest, I have no clue.

LAUREN MILLER ROGEN: Oh, no, an edible can really – they should study those and dose those out properly, because you can really do some bad stuff.

SETH ROGEN: That's a place where federal regulations would really help. It would be really nice if there was some sort of a standard. Edibles, I don't mess with edibles. Snoop Dogg doesn't eat edibles.

BILL GATES: Oh, wow.

SETH ROGEN: That's how wild the variation on edibles is. You really don't know what you're going to get.

LAUREN MILLER ROGEN: Seth's dad once accidentally ate a brownie, a whole brownie, an entire brownie, out of our fridge, that is the kind of thing that if I'd had, I would have had one eighth of it.

BILL GATES: A little bit, okay.

SETH ROGEN: Yeah. And he thought he was dying [*laughs*]

LAUREN MILLER ROGEN: He literally was like, take me to the hospital, I'm done.

SETH ROGEN: He was fine.

BILL GATES: How old were you when you first smoked pot?

SETH ROGEN: And I do not recommend this. I was probably, like, 13 years old. I'm from Vancouver, it was a different place and time. But yeah, when I was in eighth grade I really wanted to try it. I was out to try it. I was seeking it out. The first time I smoked pot, I didn't get stoned at all, and it took me a lot of time to actually understand how to even breathe it in properly.

LAUREN MILLER ROGEN: I was eighteen. Weed wasn't really around so much. I grew up in central Florida. There wasn't a ton of weed in my high school times, but it did appear a few times. But I was like, "I will only drink in high school, and I'm going to wait to smoke until college because I want to save it." But when I arrived at college, I was like, it's on, it's time.

SETH ROGEN: And back at you, Bill. When was the first time you smoked pot?

BILL GATES: My high school, of, say, 105 people in my class, I think there were three or four who didn't smoke marijuana.

SETH ROGEN: Oh, wow.

BILL GATES: Because it was kind of, hey, I'm an adult. Hey, I can break the rules. But I will say, like you, sometimes it's like, I guess I'm doing this to be cool? It wasn't so much smoking pot for pot's sake, as it was being part of the crowd.

SETH ROGEN: The culture associated with it.

BILL GATES: It's amazing how it's changed. When I grew up, it was just kind of a rebellion.

SETH ROGEN: Yeah. I think it's one of the reasons people are weird about brains in general, and it was also heavily stigmatized so much by the government. It was essentially illegal because a lunatic racist in the twenties wanted to put jazz musicians in jail, and we're still living in the ripple effects of that. But it's really encouraging, the fact that people can even admit that they like to smoke weed because it makes them less stressed out. I think that's something that people are weird about talking about.

BILL GATES: Yeah, when it first came up in Colorado and Washington state, so my state was one of the first two, I thought – wow, things really are changing. And the fact that you can have the federal level still have one set of rules, and the state rules, there's definitely a paradox there that's got to be resolved at some point.

SETH ROGEN: You would hope!

LAUREN MILLER ROGEN: You would hope. It's crazy because the benefits are exponential, just as far as financially the government should do it. For that simple reason alone.

SETH ROGEN: The truth is, a lot of people who are in jail in America, which has the highest jailed population on the planet per capita, are there because of weed-related charges. That's often one of the first offenses they get people on, and it puts them in the system, and it has a catastrophic effect on the rest of their lives. So there's a lot of money involved in weed being illegal as well, and there's a lot of people getting real rich off weed being illegal. You would think common sense would say – money! They should legalize it. But a lot of those people are also getting money on its criminalization, you know.

BILL GATES: Well, it was fantastic to have you here and talk about Alzheimer's and pot and good music.

SETH ROGEN: Exactly! [*laughs*] We're your one-stop-shop for that! Not a lot of people are going after that.

LAUREN MILLER ROGEN: But we're happy to be there for them.

BILL GATES: It's a good mixture.

[music]

BILL GATES: *Unconfuse Me* is a production of the Gates Notes. Special thanks to both my guests today, Lauren Miller Rogen and Seth Rogen.

SETH ROGEN: My first big acting role was as Shlomo Gump, probably when I was around 12 years old, I think.

LAUREN ROGEN: I played Fagin once in a production of *Oliver!* I think I was eight.

SETH ROGEN: Were you in any plays in high school?

LAUREN ROGEN: What about you?

BILL GATES: Yeah, they kind of got a kick out of casting me in a couple plays.

SETH ROGEN: That's funny.

BILL GATES: I had fun doing it, but it was definitely the nerd guy acting, not my future. I knew where I was headed professionally.

[*Seth laughs*]