She loves potatoes and gravy. She loved rice dishes. So I could do this. And she started to follow it. A year later, she went back in for her annual eye checkup for macular degeneration.

The doctor said, there's no blood vessels, just the back of your eyes. Your eyes look young and healthy. I've never seen this before. What are you doing?

Well, I started eating vegan a year ago. So I don't know why it works, but keep doing it. And that's a diabetes side effect. Let's run your diabetes plan.

It says you don' have diabetes anymore. Hi, I'm Dr. Scott Stoll and welcome to a regenerative life podcast where science becomes hope, food becomes a catalyst for healing and every conversation explores the profound connections between personal health, human flourishing and the earth and future that we will share together.

But more importantly, we'll explore one of the most important questions of our time. What happens when we actually begin living in alignment with the way we were designed?

My take away from that conversation is we should just have the committee of collaborators around Plantrition Project. You got ACLM, you got PCRM. you've got Food Revolution Network do our version of what we think they should be and just make it available to people who care about their health.

So like MyFitnessPal was the thing I used a lot years ago for dieting and tracking my calorie intake because I could just scan a barcode and or type in some fast food meal that I ate and get the calorie info right away.

Are you ready to start? Okay. All right, all right. So let's build that out. Let's work with your collaborators and build out that app and not wait for the FDA to do something they'll never do.

Right. And that's a marvelous way to help direct people. Yeah. Just pull out your phone. Pull out you phone and change the nutrients we care about to have fiber at the top and then carbohydrates for energy.

And then protein and a little bit of fat, but you can get most of it from the other food you eat. You don't need to add fat. Anyway. So tell me, tell how you came to this place where you're on the board of directors now at Plant Fisherman.

Yeah, that was a big surprise. Japan. You never thought you'd be here, right? No, no, definitely not. Especially the way I lived my life up until I had about with cancer five years ago.

I ate whatever I wanted, which was mostly fast food and restaurant food, or my wife's a great cook and she makes traditional Japanese food often at home.

So that was the one time I was eating healthy was when my And she was all the time trying to get me. I was at 115 kilograms at my peak. Uh, I'm now down to, um, trying get under 90 right now.

Got a ways to go, but I, uh, was the least likely person in the world. Well, there, since there are many like me, among the most likely people in world to ever be at a conference like this until five years ago.

And I could have been here five year earlier than that if I would listen to mom. So, my mother was a basket case at 65. And if I'd kept living the way I was, I'm now going to be 65 next month and I could also have been more of a basketball case by now.

At 70, she had severe asthma from childhood. She was basically wheelchair only, mobile at 65, morbidly obese. If there's a level above morbidity, she was that.

Super high BMI. Rheumatoid arthritis, nearly blind for macular degeneration, connected to type 2 diabetes, on the verge of starting kidney dialysis for kidney dysfunction.

sepsis, like you name the chronic diseases, she had them all. And then at 72, one morning she said, I'm not feeling really strong right now. My father, who had had a heart attack prior to that, recognized immediately that she was in the middle of a and said, we don't have to come to Cali.

I'm just hopping in the car and taking you to the hospital. They got her to hospital just in time and miracle of modern medicine. Doctors are amazing at dealing with crisis situations with motorcycle accidents like I've had, with heart attacks, any crisis situation.

And the doctors who deal with those crises feel incredibly rewarded by the experience of having someone's life. Well, she had one artery 100% blocked, 190% block, 170% blocking.

They put a stent into two mainly blocked ones and told you, you've got a month to live. This is an opportunity to say goodbye to your family. It's highly likely that you will be gone in a months.

If you survive a couple of months, come back, we'll put in the third stents and good luck. Eat healthy. and hopefully we'll see you in a couple months.

Two months later, she went back, got the third stent and she turned to it and said, I've got my stents now, i'm fine, right? She said no, no no. Once you've had a heart attack, the likelihood you'll have one again is super high.

I said well, what can I do to avoid having another heartattack? And he said lose some weight, exercise more, eat healthy. And whatever that means, you figure it out.

And this is a lady who was real concerned. Exercise more. That's the last thing she could do or would do. And eat healthy. I could eat healthier. She knew the heart attack had a lot to do with her lifestyle choices up to that point.

So in every follow-up, she would ask her, what should I be eating? Eat healthier, eat healthier, and after about six months, he turned to her one day on the way out of her follow up visit and said, you could go vegan.

And she said, what's that? And he left the office. She went to the bookstore. she actually picked up Dr. Esselstyn's book, how to prevent and reverse heart disease.

This couldn't possibly be true. Put it back on the shelf. And then she saw the starch solution by John McDougall, took it out, flipped through a little bit.

this seems pretty consistent with the kind of eating advice I get in my Mormon faith. I could do this. We're taught to eat less meat, taught more vegetables.

It resonated with her faith, And it was simple and made sense, not terribly scientific or complicated diet to follow. It's just eat, eat. Get as many whales out of the diet as you can, get all the meat and fish out and eat a lot of starches.

She loves potatoes and gravy. she loves rice dishes. So I could do this. And she started to following it. A year later, she went back in for her annual eye checkup for macular degeneration.

The doctor said, there's no. blood vessels, just the back of your eyes. Your eyes look young and healthy. I've never seen this before. What are you doing?

Well, I started eating vegan a year ago. So I don't know why it works, but keep doing it. And that's a diabetes side effect. Let's run your diabetes plan.

It says you don' have diabetes anymore. I don't know why it works, but keep doing it. And then one by one, the first one she noticed was the macular degeneration diabetes.

I know now that she could have found that out a month after starting the diet. She wouldn't have had to wait a year to know that. Eventually, she wanted to get hip surgery.

The doctor wouldn' t do the surgery because she'd had a heart attack. she said, you go to your cardiologist. He ran the battery of tests. pulled out her file from just after she'd been in the hospital for the heart attack and told the nurse to go back and get Don's file because this couldn't be the same patient.

So he was stunned by how strong her cardiovascular tests came back a year later, year and a half later. Then one day she noticed that her movements in her shoulders and arms was not painful anymore.

And then one she used to, because of her asthma, she would carry four bottles of spray everywhere she went. She had one in a purse, one the car, and one by the bedside, in the living room.

So no matter where she was, when she felt an asthmatic episode coming on, do an inhaler and deal with it. And one day she felt that was coming, took her inhalers out of the bedside table and thought, I haven't taken this out for a month.

She had dealt with severe asthma, she had difficulty going to school, so you'd have to take a week or two weeks off of school and elementary school as a kid, her entire life.

and actually moved to America from England to be in a drier climate to help deal with her asthma. Her family moved, to helped her with asthma, so anyway, one by one.

And as she's doing this, of course, she has found not only Dr. McDougall, but Dr Esselstyn, and she found all of the people who were basing their recommendations in science, who didn't seem to have any agenda other than helping patients heal, versus there are some doctors in the health eating space who have clearly got an agenda as you watch their videos.

They're trying to sell something or push something and it's more self-interested than patient focus. And she was able with a high school education to figure out who to listen to, who not to listened to.

She bought and read the China study. she bought, and she started anyway. So, As she was doing this and feeling these improvements, we were seeing her health improve.

And every time any of us kids would go to visit her, she'd make us a plant-based meal and said, you should read this book and you can do this too. I'm so much healthier now.

and I love you, I want you to be healthy, want to live long. We're so happy for you mom, good for. let's have ribs for barbecue today. Let's, have ice cream after dinner.

And so, you know, four or five years of her telling me, and it wasn't until I myself was going into hospital chemotherapy with stage four, DLCLBL lymphoma.

Hmm. It's during COVID, so I can't have any visitors. We had a weekly zoom call with the family that we set up, but my father was in his final stages of brain cancer.

And in that weekly call, first day in the hospital, I said, Alan, you might find what Dr. William Lee has to say interesting. I'd never heard of him, had never of angiogenesis, have no idea that there might be any link between food and cancer.

And she knows me well enough to know that I want scientific proof. I want clinical studies. Even her episode right in front of me, even mom, I'm not going to listen to her just based on her experience.

I want compelling scientific evidence." And she knew that, and she'd seen enough of Dr. Lee's work that she know I would resonate with what he said. And so I looked him up on this Can We Starve Cancer?

Ted Talk. I said, wow, there's something called angiogenesis. Never heard of that before. What's that? Wow, 250 foods that perform at the level of anti-angiogenesis drugs.

Wow! And I knew that most pharmaceuticals originate in plant chemicals, and then the pharmacist just figures out what they can add, how can they package it so they patent it.

And so it's basically patented plants is what a lot of pharmaceutical, he talked about that in his TED talk. And then I bought his book. And in his books, he's positive on some kinds of fish and hard cheeses.

He even had dark meat from chicken as one thing to help repair one of your body's repair systems. I could eat my yakitori and I can have my sushi and have one glass of wine and one beer.

So for me, Having him as my entry point into this world gave me hope that I could actually follow his recommendations. And because of who I am, I also made a big spreadsheet of every food in his thing.

I said, which foods impact all five body repair systems? I want to eat more of those. After about a week, that was too complicated. And I just kind of stopped eating red meat.

But anyway, one by one with that as a start, I got interested in it, started to look at some of the other doctors and researchers that mom had been telling me about and realized ultimately that she kind SOS vegan is one way we call it.

I almost created a, I am a starchivore teacher at one point, because I was so persuaded by his historical discussion, biological discussions, the simplicity of his diet.

And I looked and looked for a doctor in Japan who knew this stuff would be able to support me in my recovery journey and my health journey in maintaining my healthy going forward.

It took me a year and a half. to find any doctor in Japan who was aware of the recent emergence of lifestyle medicine in the States, who is practicing it, Who was well informed on it could talk about the mechanisms underlying disease.

But she lives in Kyoto and I live in Tokyo. And I it's kind of 40 million victims. How many people live in Japan? 150 million in japan. And it took her time to find one doctor that was informed about lifestyle medicine and knew the diet, knew all the details behind the diets and it's because she'd been coming to the Plantrition Conference for 13 years, along with a handful of other dentists, interestingly.

There are probably more dentist in Japan that know about Lifestyle Medicine because there's a very friendly, outgoing dentist who sort of gathered them to come to this conference for several years.

than there are doctors. The Japanese are terrified of cancer. If anti-angiogenetic foods have a potential impact on cancer, the Japanese so terrified with cancer that there is a specific category of insurance, which is cancer insurance.

Then you will get paid for your cancer treatments and or death from cancer so they're so terrifying of it that that's a whole viable category insurance there.

So I said, I can't, and I looked when I was in the hospital, like looked at the Antigenesis Foundation. This is fascinating. He has it collaborating researchers all around the world, hospitals, universities, everywhere.

And there was one very minor university in rural Japan that had one macular degeneration, professor and his grad student, those were the only people in Japan collaborating with him in this country that's terrified of cancer.

Says, that can't be true. That was my first wake-up point. And I said, if that is really true, my life has been about bringing new ideas from the United States to Japan, trying to have some impact on introducing them into Japan.

So as a kid, it was bringing the Mormon church to japan. I thought I was helping everybody by teaching them to believe in Jesus Christ and Joseph Smith.

And then when I started my career, relational databases were just emerging and Oracle was at the forefront of that, and they hired me to go to Japan. And I used to tell a joke that I'm an evangelist.

I use to you, believe in Jesus Christ and you will be saved. Now I am saying, Believe in relational database and then you'll be safe. And then I got involved with Salesforce.com at the beginning of cloud computing and software as a service, because Mark Benioff is an old friend from Oracle.

And so my next phase was software-as-a-service, cloud-computing that will help all the businesses in Japan. Japan needs more startups. I was in Silicon Valley and there was not in 2000 when I moved back to Japan, There was not much of a startup ecosystem in Japan.

I said, Japan needs more startups and need people to understand how Silicon Valley really works. And so each major stage of my life has just happened to be that there's something that's happening in the United States that I think would be valuable for Japan to know.

Whether that is true or not, I believe it. And I want to facilitate it and then off of back my cancer, discovering how little is known about this in the States.

And the more I learned about how impactful it's being for doctors, having the joy of actually healing their patients of chronic diseases and for patients being healed and from my mom and them for me.

So this is, this my next mission. I'm getting at the stage of my life where I don't have time to do too many more of these. and so I'll tell people sort of, my last.

evangelism exercise is in Japan is going to be finding some way to get lifestyle medicine adopted here. And actually it was Dr. Suzuki who's here at the conference this week and is the doctor I found in Kyoto who said, you might find the Plantrition Project.

I think I'd become aware of Plantrician Project and ACLM as I was looking into it. and I Was trying to figure out what can I do in japan? I had moved beyond angiogenesis foundation as the beyond end all and discovered there's a lot more going on in the space than just angiogenesis related things.

And when I saw the ACLM, well, it's all doctors on the, and I, if I wanted to, how can I bring either ACLN or Plantation Project to Japan? And ACL was already there through a group of doctors that, unfortunately, I think it was maybe the wrong type of doctor is yoga teacher and a mindfulness teacher.

the traditional MDs, the doctors that brought ACLM to Japan are sort of in the woo-woo space. It's a rude thing to say because I know that there's more to what they care about.

But the perception is it's woo. The perception for whole food map base is still a little bit woo woo But if it's being brought over by yoga teachers and those kinds of medical specialists, I thought it would be really hard for them to get traction in the classical, conventional, modern medical world.

And all of the board members at ACM are medical doctors, and many of them very extraordinary medical doctor. Oh, William Lee is on the Board. He was my entry point.

Oh, there's a marketer. There's businessmen. The Plantrition Project has other people and doctors on their board. They're reaching out to a large community.

I said, maybe, Scott would be okay with a person who has no medical background, just wants to help move the message in Japan. Maybe he'd be OK with me trying to do something with Plantrician in japan.

And I came to the conference. asked around, is anybody from here from Japan? I met a wonderful woman, Mamiko Matsuda, who is the reason that all the Japanese doctors were here for many years.

She was just a very vibrant, active connector for this world to a handful of people in Japan. And then a whole lot of citizens of Japan would go to her lectures and became very interested in plant-based because of her efforts.

Met her the first time I came and met you and just with very little hope that the answer would be yes. would it be possible for me to maybe figure out how to get Plantrisian Project going in Japan?

And he said, yes, we'd love that. And I was looking to do something. It seemed like Plantrician project would be open to having me work with them. The other thing that really struck me the first time I came to the conference is how accessible people like Dr.

Clapper, Dr Gregor, all the luminaries that my mom is a super fan of. She's not into music idols or she's never been that into Hollywood stars, but Dr.

Esselstyn, Dr Clapper, Doctor Greger, she didn't know you. You need a better social media presence. But she was so thrilled when I brought her the second year to meet all of her heroes in the space.

And I was stunned at how accessible and friendly and welcoming and hugging everybody was here and the size is right. And I thought if I start bringing people from Japan here, then they'll actually be able to connect and build relationships and not just be sitting in the back of a big room, listening to speakers far away on the stage, afraid to ask questions, feeling afraid, so the the sides of the conference And the personalities, I think in my experience, the presence of all the doctors, whether they're here or not, most of the Doctors in this space are very compassionate, caring, welcoming.

And because of course, a big part of that behavioral change is genuinely loving and caring about your patients. As I get to know the community, it's not surprising at all to me that this conference is that way.

But also the fact that it is a smaller size makes it a lot easier to connect, to have people you've seen here before, And when you asked me to join the board a year ago, I was stunned and delighted.

and continue the framework about earlier. Our first missionary journey, Japan, is in June. So you and I will be in Japan. Well, and one thing I was hoping to do from the beginning is at some point, I thought I needed to get some serious medical school in japan to learn about this, take it seriously and get it somehow into the education of medical students in the formal setting.

And I have the good fortune of one of the people that worked in my IT company, he actually ran it for me for a few years, is now in charge of entrepreneurship and innovation at Hokkaido University.

And from the time he took that job, I've been telling him I want to find some way to get to the medical school, make some connections there. Most of entrepreneurs are not in the Medical School.

there in the business school or the computer science department. And so it took about two years for him to finally connect me with a unit in Hokkaido University Hospital that's trying to do lifestyle interventions based on genetic propensity for a future chronic disease.

When I met with him, we were really struggling with getting our participants to change behavior and stay with the program. I said, well, how many of them currently have active diseases?

Well, none of And I said, there's your answer. There's a big part of your answers right there is it's really hard to be motivated and sustain motivation to do something that's preventing the risk of some event in the future.

I asked him, did you know that there are a lot of programs of doctors in United States who are getting diabetes symptoms under control in a week or two of intense lifestyle intervention and then ongoing coaching and support to

keep people on the program.

No, no, that's impossible. And so when I talked about diabetes reversal, I like to use reversal even though ADA prefers remission. I was telling someone, yeah.

Remission from a broken bone. Yeah, you break it once and it gets healed. If you have the same motorcycle accident a year ago, it was only remissions because you're doing the stupid behavior that caused your bone fractures in the first place.

So yeah, broken bones. That's remition. Sure. You could have it again if you do the same stupid behavior. So, the first thing said, well, isn't it just by weight loss and calorie restrictions?

No, no, there's very specific evidence about the types of foods and the mechanisms. And I don't know if any of them actually know what's the muscular cellular fat that interferes…

Intermiocelular fat. There you go. I'm clearly not a medical doctor. It's the fat in the cells that interferes with the insulin's normal behavior of absorbing glucose.

And my mother is the favorite example of it being insulin resistant and fat from the diet, I am assuming. that is the cause of diabetes, and high blood sugar is only the symptom.

And her diabetes was gone at least within a year, And she is still obese, definitely not morbidly anymore, maybe still extremely, but she's still obesity, because she can't get rid of her sweets, she loves her sweet.

She can lose weight because eats too many sweets. But she has not had any difficulty with diabetes since she started following the whole plant-based low-oil diet.

And so I keep telling her, stay fat, don't lose too much weight because the fact that you are still overweight, but you have had no issue with diabetes, rheumatoid arthritis, cardiovascular disease, kidneys, any of the problems that people normally, you get fat first and that leads to these.

And if you lose weight, the disease will go away. You could lose wait, But if don t change the foods you're eating that drive the chemical pathways in the body that caused the disease, you could be thin with diabetes, or you can be fat without it, if you're eating right.

And so when I told the doctors at O'Connor University, my mother's story, and what I've observed in going through the McDougall program once, in what i've learned at Colin Campbell's Nutrition and Society Certificate Program, what have learned with Plantation Project, they were stunned.

Let's gather some of your diabetes patients and see what impact, let's let you see firsthand how many of them are maybe able to get their A1C under control in a week or so of teaching and eating right with Scott.

And we haven't done it. I've not seen your program yet, so I have no idea how you run it, I just know that I, i've heard so many success stories in short amount of time for hypertension and diabetes.

My conclusion was as a place to start. something that has a quick response to raise awareness among doctors that there's something real here and something worth learning more about as a place to start and then to move on from there to you're likely to not have a heart attack now that you eat.

So you are likely not to end up with Alzheimer's if you keep eating this way. And so starting with someone who's dealing with a disease right now, to see that go away to get off medication, I think will be really powerful.

And the disadvantage of doing this in Japan is that in general, the population is healthier than here. Japan does not have the same obesity and chronic disease crisis that the US does.

With the national health insurance system, if they get sick, they just go to the doctor and get the pills and it doesn't cost them a lot. Nobody goes bankrupt in japan over healthcare issues.

It's both wonderful in that in general, the Japanese are healthier. And when they aren't, there's a wonderful national health insurance system that they can take advantage of to take care of them.

But as more fast foods and pizza in particular are becoming more and more popular in Japan, There is definitely a trend of increasing diabetes, increasing heart disease, and increasing strokes.

So the trend is in the wrong direction. And I've often talked about Japan still has a really long life expectancy, but that's because the old generation now that are in their 90s and some of their hundreds are still eating the traditional way.

They're walking, they're more conscious of movement. And my mother-in-law is now 90 years old and does Sudoku every day and other mental exercises. There's a lot of good information on television in Japan.

that's pretty solid in what it teaches them about longevity. There's the long tradition of six AM in the morning, 15 minute movement exercises, the radio TISO, that still a thing in Japan.

But all the good trends are sort of on the decline. The bad behavioral trends around the increase. And we are definitely seeing an increase in chronic diseases associated with that.

So I'm concerned. It's a good time to stop it before it gets out of control. and we're starting in June. And I would love to have you come back in six or 12 months after we've done some work, and you and I can talk about our experience and what's happening.

It's a great test case for a country. I really believe that with Hokkaido University leading, which is kind of a Stanford of Japan, Yeah, it is one of just five imperial universities that were like…

They're still… Yeah. It's Japan's, I think. And so it's… And you have a great opportunity to begin to influence that. So, yeah. I want to thank you for being on the board.

All right. Thank you, for your enthusiasm, your passion, and partnership in all of this. I appreciate and love you, Alan. Thank you. All right.