Hacks for Better Sleep with the sleep doctor Transcript

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100th Episode and Guest Introduction

All right, gents and folks out there, it's time for another show. So you know what that means. It's Time for Precalibrations. What's going on today, folks?

Well, Jerry, we have Dr. Michael Bruce coming on from The Sleep Doctor. The sleep doctor. Yeah. This is exciting. Quite the celebrity. We are celebrating our 100th episode, which is absolutely extraordinary.

Wow. To celebrate, we wanted to bring on not only a friend, but someone who is listened to around the world as a sleep expert. So this is quite the treat to get to celebrate with Dr.

Bruce today. This is absolutely amazing. You know, it's interesting that we have relationships that, we've been able to leverage to get guests to come onto the podcast.

And this is one of those that goes back more than 20 years, I think, for a couple of us. So it'll be great to reconnect with Dr. Bruce. Emerson, you and I have had an opportunity to work with him in the past.

He's just incredible for the industry. What a wealth of knowledge and experience he's going to bring to the show today. It's exciting that, you know, he has his own YouTube channel as well.

And he comes on TV all the time. This is going to be a lot of fun and I'm looking forward to it. I think it's going be very, very exciting today's show.

Let's dive in. All right. On to the show folks. Sleep tech looking for new opportunities. Well, MedBridge healthcare is one of the largest employers of sleep technologists and they are growing.

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Now back to the show. Lights out. Welcome everyone once again to another episode of Sleep Tech Talk, the sleep podcast with your hosts and friends, Emerson Kerr, Robert Miller, and me, Dr.

Gerald George-Munnichorote. Folks, thank you so much for all that you've done for us. All the likes, all the subscriptions, and most importantly, sharing it out to all of the sleep techs out there, sleep professionals, to sleep curious.

Thank you for that, because of you, it's grown soo much at the time of this recording. We're at almost 45,000 subscribers on YouTube and that's all because you.

Dr. Bruceu2019s Sleep Career Journey

We also want to give a huge shout out to our sponsors. Without them, we can't make this happen. And thanks to the sponsors, be sure to check them out.

A huge thanks for them once again. We are celebrating our 100th episode with a very, very special guest. But to tell us a little bit more about that guest…

Emerson, why don't you tell us? Absolutely. Thanks, Jerry. We are honored to have Dr. Michael Bruce. Dr Bruce is a double board certified clinical psychologist and clinical sleep specialist.

He is one of the only 168 psychologists in the world to take and pass the sleep medicine boards without going to

medical school. He's also the founder of sleep doctor.com.

We just learned this just a few minutes ago that he was also a sleep tech. So we'll talk about that here in a moment. Dr. Bruce is the author of four books with the newest book from in 2021 of energized go from dragging ass to kicking it in 30 days.

I love that. Well, I actually have a new book out. Okay, just came out in December. It's my fifth. it's called sleep, drink, breathe wellness is too complicated.

So that's all to add to the list. Oh, that sounds standing. Well, thank you for sharing that. So just going back to that one, adds the concepts of movement, not exercise, and intermittent fasting to his already famous sleep chronotypes.

And it was recently named one of the top books of 2021 by The Today Show. In his third book in 2017, The Power of Wind, which is a groundbreaking biohacking book proving that there is perfect time to do everything.

based on your biological chronotype, early bird or night owl. Dr. Bruce gives the reader the exact time to have sex, run, a mile, eat a cheeseburger, buy, sell, ask your boss for a raise, and much more based over 200 research studies.

That sounds fascinating. He is an expert resource for most major publications doing more than 400 interviews per year from Oprah, Dr. Oz, The Doctors, New York Times, Wall Street Journal and more.

I even saw you on a Delta flight once. Dr Bruce has been in private practice for over 23 years. and he currently practices in Manhattan Beach just outside of Los Angeles.

So Dr. Bruce, welcome to the show. This is such a treat. We've been friends for over 20 years. Yeah, a long time. It has been a great, great journey. And just to see, you know, where we all come from those early days in Atlanta and working with our old friend Dr Rosenberg, old Russ Rosenburg.

Those are some fun days. They got to be a part of that. Absolutely. And I also worked with Robert in the past as well. So I've got two old friends and one new one on board today.

I'm kind of excited to be here. That's very cool. Well, you were telling us just before we got started that you actually started out in sleep as a sleep technologist.

Just briefly, because we want to really get into some neat topics today, tell us your sleep journey. Sure. It was kind crazy. graduate, actually my undergraduate work at Skidmore College, and I thought to myself, hey, I want to go to medical school.

I didn't end up going, by the way. But I had a year to kill because I have to do a post-baccalaureate pre-med program. And so a buddy of mine, And so she was like, why don't you come out here and get a job out for a year since you got a Year to Kill?

So I was, like sure, no problem. And she said, I know somebody that works in a sleep lab. I said sleep? What's that all about? How tough could that be?

I'm a night owl anyway, so I might as well hang out and do it. So it turned out I got a job in one of the most famous sleep research laboratories in the world at the University of Arizona with Dr.

Richard Bootson. And Dr Bootson, for folks who may or may not remember, he was one the first people to bring over cognitive behavioral therapy into the insomnia treatment modality.

He also started working on things like sleep restriction and things of that nature. And so he was fundamental in all of our understanding of insomnia, how to work with it, and how identify it and so I was one of his technologists and

that was probably the very first time I had any introduction to sleep.

I hung out there for about a year Then I went and did my post-baccalaureate pre-meds, then decided not to go to medical school, went to the University of Georgia, got my PhD, and then ended up doing a residency in clinical sleep medicine and got a first job and ended getting board certified.

So it was kind of crazy, but that was my start. I started out as a sleep tech. That is absolutely fantastic. And I love, you know, the reason I loved that too is as we, we see part of our role on Sleep Tech Talk is just educating people on possible journeys.

Oh yeah. Your journey is fantastic for anyone who's thinking, could I ever be a doctor like Dr. Bruce? Absolutely. It's an awesome pathway. Well, you know, one of the exciting things is getting to see you on television from time to time.

And as Jerry shared, sometimes it's a total surprise when we go, oh, that's our friend, Dr.

Sleep Optimization and Sleep Hygiene

Bruce. So recently you were on The Today Show and on NBC. One of things you we're talking about is a really fascinating topic of sleep optimization. I think for some people that is kind of a new word.

We hear other terms, but can you kind take us down that path and help us understand what sleep optimisation is? Sure, sure. So I want to be super duper clear here.

This is a newer term. Um, this is not a clinical term, This Is not A technical term this Is more of a biohacker term so just to give everybody a hint Biohacking is basically where you run these little mini experiments on your body to help make your Body healthier by doing different things and so what a lot of people have noticed is hey sleep is pretty fundamental to my overall happiness my Overall health my overall performance.

So how can I get better at sleep? How can, I quote, optimize my sleep. And so one of the areas that I felt was important to get involved with, and in my third book, The Power of When, talk about these things called chronotypes, right?

And, so, one the easiest ways to optimize your sleep is to sleep within your chronotypical timeframe. And so that was kind of how I started getting involved in sleep optimization.

Then I starting to look for, okay, well, what are the different things that a person can do in order to maybe make their sleep even higher quality? Because that's really the name of the game here.

It's not necessarily length or quantity of sleep, although in some cases we do that. it has more to do with how do I increase the quality of my sleep?

That's how I want people to think about optimization. So a big one, caffeine, right? We know that so many people are over caffeinated. And what effect does that have on their sleep?

Another big is alcohol, we know alcohol is the number one sleep aid in the world, but it's awful for your sleep. It is not optimizing anything. it is lengthening your asleep, it certainly is optimizing your sleeve.

Another new one that is one I've spent a lot of time now starting to investigate more is the timing of your last meal. Turns out if you eat too close to bedtime, guess what?

You're going to have an increased heart rate, which is going not allow you to get into sleep or not allowing you get to the deeper stages of sleep. So that's three different examples of areas where we can find, I don't want to call them rules, but I'd rather call it maybe some guidelines of what people can do to start thinking about how do I make my sleep quality even better.

From a clinical differentiation standpoint, sleep hygiene versus sleep optimization. How would you differentiate those two? Completely different things in my book, right?

So now, but they do have some of the similar components to them, so traditional sleep. Hygiene would help with sleep, optimization, if you have a room that's cool, that dark.

And that's quiet, which are some classic sleep hygiene recommendations. Those are all going to be super duper helpful. But I would say I argue that optimization maybe goes a little bit further in some of those recommendations by saying, hey, let's look at other areas like I was mentioning before.

Alcohol, caffeine, meal timing, even exercise timing would be another way that you could learn how to optimize your sleep. Again, sleep hygiene has, I think, some great solid ground rules for everybody for sleep.

But if you really wanna kind of start to reach that next level, that's where some of this optimization comes in. How can, you know, just thinking of our listeners, many of them are clinicians, some of us are patients, and like me, they might have an O-ring or they have their Apple watch or something like that.

How, how can our sleep coaches coach patients around sleep optimization with these tools? How could they learn from those to really make sleep better?

All right, so let's talk about trackers for a second because I always have a lot to say about them. So number one, I want to be super duper clear. There is no tracker that is really accurate out there.

Okay, none of them now the aura ring is okay. The whoop strap. the apple watch okay right but again these are not as accurate as we would want them to be and so what a lot of people do i'll tell you this happened to me the other day and somebody said hey dr bruce the aura ring hijacked my day right so it happened was is they looked at their score in the morning it was like a 37 and they're like oh my god I thought I slept so much better and they couldn't stop thinking about their sleep all day long.

So that's one of the classic things that happens. And so for a lot of these optimizers, these people who are saying, I want to get higher quality sleep, one the first things they do is they go out and buy a tracker.

I don't have a problem with trackers in general, but because the accuracy is significantly lower, about 80% of what we know for full nighttime polysomnography, We have to be very thoughtful when we look at these data.

So the first thing I tell people is, number one, never look your data every day, okay? All that's going to do is mess with your head, and it's a terrible idea anyway.

Look at it at the end of the week, And what you're looking for is a trend. So what I tell people, and this is classic, I have people walk up to me all the time like, Dr.

Bruce, my aura ring says I only got 14 minutes of deep sleep. Am I gonna die? Like what's gonna happen to be? And I'm like bro, relax, okay? What did it say the night before?

They say, oh, 13 minutes. I said, what did say night the before, 15 minutes? I say great, you're awesome. They're like what are you talking about? I need more deep-sleep.

The device is being consistently inaccurate. So we know it's consistent. So what we look for is the delta or the change. If it says 14 minutes, 10 days in a row, I don't care.

But if the next day it said 307 minutes and then the day 263, then I want to know what happened on those days. That's where I think trackers can be very, very valuable.

Until we reach an accuracy level that all of us really feel comfortable with, I think you need to look at the trends of the data and the changes in the day.

And I that's where a lot of magic happens. There is one new very, very new ring that just came out called a happy ring. I don't know if people have heard of happy rain before, but this has actually been FDA approved for full nighttime poly.

So this is actually probably, and by the way, it turns into a tracker after you use it. This is something that, by way eventually, I we're going to see take over the business.

And I've got one actually right here. It looks exactly like the Aura Ring. However, what you'll notice when you look inside of it, I don't know if you can see it in the camera here, is there are different sensors.

Sleep Trackers and Data Trends

The sensors are doubled. So there's two accelerometers, there're two temperature guides, things like that to, again, give us a little bit better accuracy level on some of these trackers.

But I do not want people to freak out about their trackors, okay? Like, look at it with a grain of salt, but, you know, don' t go crazy over it. I was just going to say, our listeners that are listening on the podcast file forums, you need to go onto YouTube to see what Dr.

Bruce just showed us. Now a word from our sponsor, MedBridge Healthcare. Medbridge Healthcare is a leading provider of sleep lab management services and home sleep apnea testing.

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Fisherman-Peckle Solo is the world's first auto-fit CPAP mask. It simplifies setup with its revolutionary auto lock technology. Simply stretch to fit, touch to adjust.

Go to fbhcare.com forward slash solo. Well, so you've always been effective at communicating to large groups of people about sleep. But I have to tell you, the unique thing I think about the way that you're able to communicate is that it feels very personal at the same time, because you you are able break down the information for the audience to make, like I'm sitting there literally thinking about my Apple Watch and even tracking my own sleep and daytime activity.

And I do the exact same thing. Right. How have you been able to do that for a very long time now, you know, effectively? And you've become really sort of a celebrity and a national presence in the sleep medicine space.

You know I'll be honest with you, I love sleep. I'm super passionate about it. And I've been doing this for 25 years. Like I loved nerding out with guys and talking about all the crazy weird stuff that we learned in sleep medicines.

So for me, it's definitely fun and I have a lot of passion with it, Also, let's be fair, I'm kind of a ham anyway, like I like the attention, so I am happy to be getting in front of crowds and having a good time and talking about sleep.

But I think the most important thing is the way I thing about how I deliver information about sleeping is really, really important. And so the way I always wanted to do it was I wanted it to be two friends who were talking over the fence just about a couple of quick questions about sleep.

So it's like if you walked out back and your neighbor happened to a world renowned sleep expert and you just had one or two quick question you wanted ask them but you didn't want to get into a long discussion about it.

Hey Michael, what do you think of this? That's the kind of setting that I like to create for people because quite frankly, I mean, I can talk somebody's ear off and talk about the neurological substrates of narcolepsy and all of that other kind of good stuff, but who cares, right?

My goal is to be practical, to give people bite-size actionable pieces of information that they can learn about, and

then hopefully either talk with their doctor about it, maybe identify a sleep specialist nearby them that can go to, or even if they happen to know a Sleep Technologist, talk to a Sweet Technologists and get some more information in that way.

So you talked about these bite-sized pieces. Now we were talking about sleep hacking and, you know, Tim Ferriss' of the world, they talk about that. Any tips that you could provide our audience?

Absolutely. So I've got a couple of ideas. Let me give everybody a five-step plan that's super straightforward and you don't even have to have a sleep disorder to be able to benefit from this plan.

As a matter of fact, it works better if you Don't have sleep disorders. By the way, if You think you do have asleep disorder, please go get tested. It's so freaking easy to get Tested now.

You can do it online, you can go to a doctor's office. I don' want people to think, oh, there's this hurdle. I've got to go make an appointment at the lab, I got spend the night there.

Ever since COVID, things have gotten a lot easier. But let me get to the five-step plan. Step number one, or one of my sleep hacks, is to wake up at same time seven days a week.

Honestly, if you could do just one thing, that would be the best thing to do because it regularizes your circadian rhythm, but more importantly, it regularly is melatonin production.

So all of us here know this, but for folks who are listening, when you wake up in the morning, When sunlight hits your eye, you've got a special cell in your eyes called a melanopsin cell, which sends a signal to the back of your brain to say turn off the melatonin faucet in you head.

But it sets a timer for approximately 14 hours later called the Melatonine Phase Response Curve. You don't have to know that part, But you do have know 14 hour after you woke up is when melotonin starts.

So if when you wake up, it's variable. So for example, if you're waking up during the week at six o'clock, melatonin starts at 8 p.m.

Practical Sleep Hacks and Coaching Advice

But if on Saturday you sleep in until 10 o clock, Melatonine is going to start four hours later. Really, all you did was wake at the same time seven days a week, you regularize your internal ambient, your inner melatonin, if you will, right, to be able to regularize that so that way you start to fall asleep at the roughly the same time and get up at roughly at same times.

So step number one is to pick one wake up time, and stick to it. Step number two has to do with caffeine. And so remember, caffeine is a half life of between six and eight hours.

What I tell people all the time is if can stop by two, That gives you eight hours until 10, which is roughly when a lot of people are thinking about going to bed to at least get half of that junk out of your system.

Now, to be fair, if you can back that up to 12 or even earlier, eventually, that's great. But I am not so stupid as to tell everybody out there that I'm going rip their caffeine out from under them because then nobody would ever come back and listen to a word I say.

So two o'clock, I think, is a good place for you as a starting goal. Step number three has to do with alcohol. Now I will tell you, every single patient, this is the negotiation, okay?

This is what they're like, hey, I want to still be able to have my glass of red wine or I wanna be to be have a bourbon or what have you. And so, Step number three is to stop alcohol three hours before bed and limit yourself to two drinks.

Also, you must add two glasses of water to this. So as an example, let's say it's 6.30, your at dinner, You have your first glass of wine. Maybe it seven, then you have a glass water.

Now it is almost seven o'clock. You had your second glass wine, have you second class of Water. Everything's done by 7. 30. you got three-hours, 10. Thirty is your bedtime.

Your good to go. Right now, to be fair, would you sleep better with no alcohol on board? Of course you would. But again, we're starting people, We want to meet people where they are.

So step number three is to stop alcohol three hours before bed. Step number four is my favorite and it's way to improve sleep. The best way To improve Sleep quality without question is daily exercise.

There's no question about it. but if you exercise too close to bedtime, you heat up your core body temperature, That makes it tough to sleep. You know, we were talking about sleep hygiene before and we talked about having a cool bedroom.

Part of that reasoning is, is we want our core body temperature to begin to drop. So exercise daily, but please stop four hours before lights out to give your body enough time to be able to relax and cool down.

Step number five has to do with the mornings. And so what I ask people to do is give the sun a high five every morning. So when you wake up in the morning, I asked you to three things.

Take 15 deep breaths, drink 15 ounces of water, because remember, sleep in and of itself is a dehydrated event. And number three is to get 15 minutes of sunshine.

The reason we want 15 of minutes sunshine is that helps clear the melatonin from the system, but it also helps to clear brain fog. So in repeat, step number one, and if you notice each one has a number in it, is pick one wake up time and stick to it.

Step number two is to stop caffeine by 2 p.m. step. Number three is the stop alcohol three hours before bed. That is outstanding. I love that. You know, as we think about, you know how we coach patients as technologists to know our mutual friend, Katherine Hansen and the world.

Oh, I loved Katherine. Yeah, she's fantastic. We're thinking about how do we educate clinicians, particularly the sleep technologist and CCSHs of the World, how can they take this type of information and help sleep patients better, almost as a an extension of you as a psychologist or as of the physician, what is the best way for them to take the type of information you use and use it with patients?

So I think the biggest thing that people have to be super duper careful about when they're not officially a sleep doctor is being able to identify when does a patient need to go to a asleep doctor, right?

If you feel as though somebody that you're working with, and now I'm talking to our audience or our listeners now, who you're thinking, gosh, you know, the hairs on the back of my neck keep standing up.

I think this person might have sleep apnea refer. Okay. Like it's very simple. Have a, have a sleep specialist that you are comfortable with. That's local to you.

And then be able to send them that patient, because what you don't want to do is coach somebody and have them have an underlying sleep disorder that your missing.

So the very first thing I talk about with all the people that I train and I do train sleep coaches now. I actually help life coaches with sleep coaching, psychologists, social workers, you name it.

The very first thing I teach them is know and identify when you think somebody has a sleep disorder and get them off your plate as quick as possible and Get them to a Sleep doc so that way they can get treated.

Now they may come back to you for other things, which is great, but number one is figure out when You need to refer. Number two is is you really wanna take a look at the external things that they are doing.

Kind of like what we were talking about, caffeine, alcohol, things of that nature. But the big area that I think a lot of sleep coaches really could use some tutelage, as it were, has to do with supplementation.

So there are so many things, that people come out after me and they're like, Michael, what's the best sleep supplement? I need to know, or I wanna tell my clients or whatnot.

I have a theory on this. So number one, I'm not the biggest fan of sleep supplementation, and I want to explain why. The very first thing I tell all of my patients to do is go to your doctor and have blood work done, okay?

And let's find your deficiencies first. If you are deficient in vitamin D, magnesium, iron, melatonin, Those are the things you want to fix first, right?

Get this unit, our body up to par level so we have no deficiencies. You might be surprised, you might fix the problem right there. I can't count the number of people where once I help them overcome their vitamin D and magnesium deficiency, they slept just fine as long as I give them a couple of rules.

I can assure you nobody out there has a deficiency in ashwagandha. But they probably have deficiencies in vitamin D and magnesium. So let's fix those first and see how that goes.

And that's very simple because you can just refer the patient to their doctor, have blood work done, then make the recommendations, and then check the bloodwork again in three to six months and how they're doing.

Let's say all the deficancies are gone, but they are still not sleeping well. Then you can start to look at the supplements and see which symptoms may line up with which types of supplements.

A word of caution though is, for example, with something called 5-HTP. So that's a fairly popular substance out there. And you have to be careful because as an example if you a patient that is taking something an SSRI or a serotonin-specific reuptake inhibitor or Zoloft, Prozac, things like that, If you add 5-HTP to that, you can end up giving that person something called serotonin syndrome, which is incredibly serious.

They could end in the hospital and things like that. So before you make recommendations for any supplement, You want to find out from your patient what medications are they taking, then look up to see if there are any interactions between the supplement you may be recommending and something that they're taking.

I think those are some of the biggies that I would recommend for sleep coaches out there to kind of think through and make sure that they're helping people in the way they really want.

Supplements, Melatonin, and Safety

That's great advice because you're right, you know, these adaptogens are so popular right now and you don't know how they are going to interface with a beta blocker or an SSRI or any of these things and all because it's natural doesn't mean it is healthy for that patient.

Well, and to double tap on that, let's look at the biggest offender, melatonin, right? I mean, so many people are like, oh, Dr. Bruce, I want to take some melotonin.

To be clear, Melatonid is by prescription only in Europe, OK? Like, there's a reason. It's hormone, guys. it is not a piece of candy that people can just pop and see how it goes.

By the way, mellotonin affects birth control. Melotonid affects antidepressant medication, hypertension medication and diabetes medication. It's a circadian pacemaker for God's sakes.

Like that's what it does, right? And so again, be thoughtful, don't just say, hey, I heard a great thing about melatonin, maybe you should take some of that.

Not necessarily the best idea. Where do I use melotonin? In my practice I used melotonin for jet lag, for shift workers, For people who have a melatonic deficiency, and in some cases for REM behavior disorder, And there's few cases of ADD, ADHD where there is some data to suggest It could be helpful there as well.

So I think people just, again, need to be thoughtful about what's going on. Doc, I want to just keep talking. This has been absolutely fascinating, but we are running out of time.

Any words you want share with us, particularly about our 100th episode? Well, so number one, it's freaking amazing guys. Like that is fantastic. I tried to do a podcast, I didn't get past 20 episodes.

Okay. And I'm pretty entertaining. So I want to congratulate you as well as all of your subscribers and listeners, because to be fair, you guys wouldn't have a show without those folks out there.

Sleep is this never-ending educational experience. You can continue to learn more and more. And these guys are having great guests on. They're having conversations about it.

So please continue. By the way, if you think you know somebody who could benefit from this, share this episode. Go ahead and share it with somebody and tell somebody, hey, look, they had this crazy sleep doctor on.

He had a couple of funny things to say. I think you should listen to it and then get other people to subscribe because everybody here wants to continue to do this and the easiest way to this is to have more subscribers.

So if you get an opportunity, please do go ahead, and do something like that. But I want to just congratulate you three. This is fantastic. 100 episodes on sleep.

That's amazing. Thank you so much, Doc. And if people want to get more information, whether it's coaching or just learn more about you and all the information you've been providing, where can they go?

Sure. So I've got a couple of different websites that are easy to remember. You can find me personally at yoursleepcoach.com. If you want see me professionally, I'm at thesleepdoctor.

com. Awesome. Thank so you much Doc, we sincerely appreciate you joining us. Oh, it's my pleasure. Also, I have a YouTube channel of the same name, The Sleep Doctor.

So folks want to check that out while you're checking out Sleep Tech Talk. I think you should check it out. We will have links in the description for this show, for sure.

Thank you so much, Doc. And folks out there, thank you all so, much. Just like Dr. Bruce said, we can't have the show without you. Thanks once again, making this 100th episode.

Shout out to all our listeners, our subscribers. Thank you for all the likes, thank you all for the subscriptions. Most importantly, thanks you so much for shares.

Keep continuing to share with all sleep techs out there, all of the sleep professionals, allied professionals and all this sleep curious. Without you, we can't have this happen.

Huge shout out for our sponsors. We continue to grow because of your help and thank so you much. Be sure to check out our sponsor. And until next time we say, lights on.

Sweet dreams. Before we go, we would like to thank our sponsor, MedBridge Healthcare. Medbridge Healthcare is developing innovative inpatient, post-discharge and population health programs to screen comorbid conditions, diagnose and treat sleep disorders.

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Oh man, oh man. What a show that was, huh? Tons of energy, tons of excitement. I mean, you come away listening to Dr. Bruce just excited about sleep. It was so much fun to hear him.

One of the statements he made that really stuck out to me was meeting people where they are. and with how he approaches sleep medicine.

Closing Thoughts and Episode Wrap-Up

And that is so important that we do that, whether it's the topic of age or gender or race, all of those things and economic position in life, just meeting people where they are to teach them sleep and help them understand the nuance of it.

Plus those five steps, my goodness, that was incredible. I love how he said that I'm your, you know, just consider me like a neighbor next door and that, I am not going to push you with all these details.

I just going give you just what you need and like you said, meet you where you are. That's great. You know, I asked him the question and I talked a little bit about the fact that he's able to communicate to large groups of people, but yet it feels very personal, the information.

So think about all the work and time and energy and effort he has had to put into creating this message that conveys an extremely important message related to sleep and sleep health.

and do it on a wide scale or do at scale, I should say. You know, it's just incredible. The message is simple. It's things that are tangible that we can all relate to, from an everyday lifestyle standpoint.

And he's able to use the things we track our sleep with as part of the messaging. So, just, incredible, what a great episode. I think, too, as you mentioned, the sleep trackers, it was really fascinating how he really wanted to draw some real distinction on that particular topic of how to use it.

Because I think we can become too dependent on it and I'm for one, do the same thing. You wake up thinking you had a great night of sleep and you look at your report and think, oh my God, it was terrible.

And then suddenly your whole day changes because of a report. Then the opposite can happen. Oh, you've had great and then you're like, I don't know what that device was looking at.

It was So it was really refreshing to hear that from him as to how to really put those in the right context of our health. And even for those of us who coach, how the coach the patient around that, I think it's so important.

Or it could just be that when we get a little older, like me, that we wake up at one o'clock and we felt like we've been asleep for eight hours already and then we can't go back to sleep anymore.

I love that. Not at all. I thought it was interesting when he said that about the trackers. He buys anything that's out there on the market because he was having high blood pressure.

blood pressure cuff. And he also bought one of those EKG things. When he saw it, he already has a little bit of anxiety. His blood had gone up and he called me and was like, Jerry, what do I do about this?

And I was, like oh man, this is really bad. Of course, I had to do that to him. But when he checked it again, it went even higher. So that goes to show you what happens with practice.

Since we appreciate Dr. Bruce putting that out for us. Yes. Great show. All right. Well, I think it was a great show and I look forward to him being back on the show if possible.

I mean, he does over 400 interviews and such throughout the year. It'd be great to have him back. Absolutely. Yep. Alright folks, until next time we say thank you and cheers.

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