Introduction to Functional Medicine Practice

Usually people will tell patients when they come. So we have to focus on prevention first. Yeah. Right now for anything that could develop within I mean certain amount of time.

And then we should start working on the issues that you already have. But we have to go through history of course, to see where the root cause potentially could be and then do the testings.

I mean, of course it is sometimes expensive because you have to dig, dig deeper. Yes. And unfortunately, any kind of insurance doesn't cover those stuff.

So, I mean, I will give my best to decrease the cost as we can. But yeah, sometimes, I mean, I know for my own health, I spent thousands of dollars just to do testings and then find out where is the issue.

And when I found out I basically every other dollar that I have, I kept it in my pocket. So I'm not spending any more in just doing like regular blood checkups and anything because HBA one, CS one one part or insulin is one part, C peptide is one part, but what is the stuff that are leading to that?

Yeah. So we have to check it. And then I mean that's time consuming especially when you wait for results. Yeah. When you're in Europe and you're selling it to us, it's three weeks just for us.

So for you guys, yeah, we I'm sure it's too much. Yeah. Yeah. What if aging isn't about slowing down but leveling up? I'm Doctor Isaac Jones. This is the Longevity Leaders podcast.

Hi, I'm Doctor Ashley Beckman, and we're here with the Longevity Leaders podcast. And I am here with Doctor Omar Newitz, who is from Bosnia. And you're an MD there?

Yeah. Correct. Correct. So tell us a little bit about your practice first of all, and then we'll dive into how this is taking you into the longevity space.

Thank you for having me today. So yeah, I'm from I'm M. D. from Bosnia, and we have a brick and mortar in Bosnia, and we are doing racial practice as well.

So we are functional medicine based practice. We do as well regenerative medicine there. So we are focusing on metabolic health or type two diabetes specifically.

Then as well. Insulin resistance is in that condition and PCOS. So polycystic ovary syndrome. Yeah. So these are primary diseases for diagnosis. So I can say with whom we are working with.

And I mean we had really good results with people that are having type two diabetes. Specifically they have I mean, many of them get rid of their eyes totally, or at least the reduced using of drugs.

But I mean, the thing for, regarding functional medicine is it's really amazing because you're going to the root cause of the disease. Yes. So what have you been seeing as some of the main root causes in your clinic?

Yeah, it was really interesting. Regarding type two diabetes, I mean, that was a few years ago. 4 or 5, approximately. So when I had first patient with type two diabetes on functional medicine based practice, we did DNA testing, epigenetics.

And I've seen that they don't have any kind of mutation from FTO gene or PRG two genes or, the TCF seven.

Root-Cause Testing for Metabolic Health

So those are basically genes for type two diabetes or for for fat, basically developing obesity. And he didn't have any of those. He had only GSD one and GSD one no genotype.

So he had deletion of these genes. And that was really interesting because that's when I saw that diabetes type two doesn't have almost any kind of connection with here.

It can be of course, but that's when I seen that, that the guy specifically, he had heavy metal toxicity, and he had more toxicity as well. Yeah. So he had aluminum all over the head and he had a toxin.

Ake it was really, really high. So when we started cleansing him. So because of course he had these mutations. So he couldn't do detox properly. So we did step by step, he got rid of.

He was using temples today. Oh, wow. So different ones. He had hypertension. Goats, gout. Sorry. So he had, fatty liver, diabetes, type two, depression, hemochromatosis.

Oh, wow. So he was, like, all over the place? Yeah. Really, really big mess. And after three months, he stopped using everything. Wow. These labs were perfect.

Yeah. I was like, okay, how fast he got results? Yeah, I mean, that was really fascinating. He did even a testimonial for for us a few months ago. That was three years ago when we did all of the program and everything.

So I was fascinated, really, how he responds. I mean, that's the thing where you can see the people change their lives and family, of course. Yeah. Because right now his wife or significant other doesn't have to worry out, right?

Well, he have crushing of sugar or too much high sugar. I mean, that was really eye opening moment. So he was open to changing his lifestyle. Yeah. He did everything.

I mean, he was entrepreneur, so he couldn't do stuff without his wife. Of course, he was working like 18 hours a day, so sleeping. And he's six. And his wife basically was on meeting with him and consultations.

So they decided she will cook because she was a housewife. She will cook and he will handle everything else. So he was really like, like in Navy. So he was following everything.

Oh, yes. And I mean, that's why he got results really quickly. So he changed food and everything. And I think that's the thing that's amazing to see is people think some of these things, which they do take a long time, like for mold, detox and metals.

But the blood sugar, you can regulate that fairly quickly when you make a lot of the correct changes. I agree. Food plays really crucial role because if we see how we are eating today, it's yeah sad systems something American death I called as well as be the standard Bosnian that I was pretty much sure there is a SVT, the silver.

There's no much different really, because it's based on carbohydrates all the time. You have some meat, but that's grilled one so you don't eat. That's much beneficial fats.

So yeah, unfortunately that's lifestyle. I mean we have to change our lifestyle if we want to get rid of the blood sugar. I mean blood sugar spikes. So yeah, he did that and there's many others.

So and that's the moment when we saw falling down of the blood sugar, few of them stopped using even insulin injections. So yeah, that was really, really amazing stuff.

Yeah. It's it is really amazing. And it usually does take a family or a team effort. Right. Because it's difficult when someone or only one person is choosing to make the changes and, you know, then they still have treats around the house or things like that.

So it's really important to get the whole family on board. I agree, if you don't have supports, that's really hard to do. For example, I have advise them so move anything that's processed or that's non-organic from their house.

Yes, because otherwise he will sell it. Some time. He'll I mean that's what I mean. If you're having sweets on your table every day and you're looking at it and that right now you are having blood sugar spikes and lows.

So highs and lows. So you'll have an issue. Definitely. I mean you couldn't handle it anymore. Like after seven days you should you'll each take one. So yeah they did I mean every every question that they said they did.

So they got really good results. I mean, beside him there are a few more like specific stuff. What what's going on? What was going on. So one guy, he was doing night shifts, for certain times.

Yeah. He developed type two diabetes and he was just on metformin using it. And it was pretty much stable, if I can say so. The most spikes were up to 300.

So I mean that's high. But then Covid happened. So he was three months off. Oh right. And then we started working. So we get rid of even metformin in the like month or so.

Yeah. But since he started again. Yeah. Do night shifts, his blood sugar again went up and you couldn't do anything. So that's the point when I told him, okay, if you're going to do night shifts, we are much limited. What we can do there, we can support you.

Of course, we could handle other stuff, but we can, we can. We cannot go. I mean, at any point like you were before, right? Your body can't handle its it cannot just regenerate itself.

You have to give him sleep. You have to give melatonin enough growth hormone enough so to regenerate and everything. So yeah that was eye opening is one woman.

So how much sleep plays a role in blood sugar and that circadian rhythm. Right. When you're going against nature. Yeah. It's it is more a lot more challenging for the body to you know, it will react much more.

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Lifestyle Changes and Blood Sugar Improvement

Book your million dollar strategy session today by clicking the link in the description. I agree because longevity concept usually we are going yeah, of course all the time to research new stuff.

We are going to introduce it. But we are we have to focus on basics. Yeah. If you don't have enough sleep there is no supplement that will help you with that.

No, if you are not eating correctly, there is no supplement supplement that will change the stuff. So we have to get to to the root stuff. Yes. And then change and add supplements and all of these other techniques.

So then you're able to do the basic like urine mycotoxins testing to use vibrant. Yeah. Or we use basically there is DNA life or Nordic Labs. That's how they, they are basically they're distributors for from US labs here.

So in in Bosnia and specifically I mean, we use micro tox profile from, their mosaics. Yes. It's like de Los six. So you from them that you use that we they use heavy metal from doctor data analysis.

We do provocative testing a lot. We do a 360 from Doctor Data as well. DNA testing from Nordic. They have their own alienates things. So yeah, those are the three, four main ones there as well.

Testing for toxic toxins like life was eating all of those stuff. So we do that as well. Neurotransmitters we do from doctor data as well. So vibrant is not that much present in Europe unfortunately.

But they are really amazing lab. So I would wish to have them here. I mean in Bosnia, but in USA I'm doing all over Aruba health. So yeah, because you could easily manage the stuff. Yes.

So then are you seeing a lot of glyphosate that's high. Almost every patient that I see. So it and really really high. So that's not like small value a really high because they're all of the food.

When patients usually come they all they are already in high inflammatory state. So even though they are using some some of them are using or trying to use organic food, but that's contamination from years ago.

Oh yes. You have to clean things or stuff. Yeah. And you're seeing a lot of metals as well. Yeah. So we did one research. I'm planning to publish it on our clients or the patients specifically.

So it was shown like 84% had aluminum really a high of the patients 75 had two metals aluminum and some other and 65 they have three metals. When we do provocative. Yes.

Of course, lead was really present as well. High values uranium. Yes. Really high. And mercury from time to time depending on amalgam fillings. If they eat fish or not, usually. Usually.

Yeah. So mycotoxins. That was really one of the eye opening moments. So 91.8% of patients had had at least one. Yes. Micro toxin present. Yeah. And around 87 I think percent had two.

So that was really, really. Yeah. In my practice I don't remember the exact markers, but it was 95% of all my clients have, I'd say three or more. And now I'm seeing that where I used to think, you know, 6 to 8 markers was high.

Now I'm seeing multiple clients with ten types of mycotoxins. And it's, you know, it's a really big issue. Every I mean, unfortunately, we, I mean, before when I started to do functional medicine, this was a moment that.

So I oversee, or solo stuff because, since I started functional medicine and I had my own health issues, that was my eye opening moment. So because, I mean, I had mold toxicity from our childhood.

Yes. So we we were in war during 90s. So afterwards the houses and everything were pretty much destroyed. And then you're building it. Yeah. From scratch.

So I have mold toxicity. I had the infection. I had dairy reaction. Salem I mean, I had mCMC with gene mutation. So we had that. There were like cat kills in my body.

So that was what led me to functional medicine generally. And, and I and I had insulin resistance as well. So that was my eye opening moment for opening doors for Metabolic Health signature program that we are doing right now.

How did you get into what to be an MD before you got this? That's a really good question. Yeah. So my grandma, I was really connected to her, when I was in high school.

So fourth grade. So. Yeah. And year. So she was really sick.

Toxins, Mold, and Lyme in Longevity Care

She got, colorectal carcinoma. So it was already met them at the size. And they did operation surgery basically they removed some stuff, but she was, like in half coma, comatose state. And, I mean, physicians were really bad

acting to her in Bosnia specifically.

So that was my moment when I decided, okay, I will I will go into medicine, just maybe like that. So at that point I wasn't looking at any and the other stuff, but, I mean, I was really, really connected to her.

And when I saw those things, I said, okay, I will pass the exams, everything, but they'll at least at least try to be human, right? At least that's the most important stuff.

Or we can do whatever we wish. But you have to be human all the time, and you should put yourself in the shoes of another person when you see them at the practice.

Yes. So, I mean, I got goosebumps when I mentioned those stuff because really it was a hard time at that part. I, you, I mean, they, they gave me, their own apartment, so I would sell it to, to go to medicine at their school because I didn't have money at the time.

So. Yeah, but it's different stuff than it's in the USA because you have scholarships and everything, but you don't have that many. So it's pretty much hard to, to do those stuff.

And then when I was like fifth or sixth, sixth grade or a year at medical school, I had developed really serious issues with my own health. And then I started to research.

I was using a lot of antibiotics, like four times a year. I was on like 2 or 3 different, dicks. One month I'm drinking antibiotics. So my gut was horrible.

Yes. I was like bloated all the time. Constipated, had pain, vomiting even from time to time. My blood sugar was up and down. I had headaches every day.

I was using aspirin or acid. Salicylic acid. Yes. So, yeah, I was in chaos. Really. And then the I started to research and then that's the moment when I found, doctor X and his website and everything.

So I found another way. That's when to the moment when I found out about functional medicine. Then I signed up for it. And then my journey started to late rock.

And how long ago was that? It was like 7 or 8 years ago, approximately. So, 2000, I think 18. So how have your clients been open to functional medicine like it seems unique right where you are or is it getting more popular?

Yeah, it's really a good question. Right now it's getting more popular. But when I started to do that, everyone was asking me, okay, what are you doing?

What the hell is functional medicine right now? And I mean, the thing is, when you're starting functional medicine, so we are we usually patient bring you all the reports that they have from previous years in history or history.

And then you have to sit down. You have to go to the reports and make some some notes and then make a, I mean, the whole plan strategy to treating them according to that.

And at the beginning it was really hard because you have to catch all these details. Yes, but right now it's not that much hard because you have experience, you have everything.

You have more knowledge than at that point of time. I mean, right now they're pretty much open. I mean, there are a lot of TVs in, Bosnia, specifically in Balkans, southern Eastern Europe, where I was as a guest speaker.

So I gave a lot of lectures in Europe all the way out. So, yeah, right now is pretty much popular. People are seeing it, especially regarding the lab testing and everything.

I think that's us played a really crucial role regarding opening the doors for functional medicine, even though I'm the

only one. So there. Yeah, but I mean, still Bosnia on the side are usually speaking English really good.

So they don't have the issue with listening podcast or something else. Right? Yeah. So yeah. For example, they heard a lot about Doctor Isaac. Doctor I haven't had an ex as well.

So those are the three ones that usually they listen to. So yeah, that was the door opening moment. And you're implementing some longevity now too, right?

We are starting to from the 1st of January. We are right now preparing the program signature program regarding longevity stuff. So we'll do it as a six month program.

So where we'll introduce all of these things that we we were researching through, through all these years. And I mean, the basic stuff that I've seen, for example, in this patient, as I mentioned before, like he was using ten pills and everything we did through a testing on him.

So it was really interesting whenever he had toxicity or issues with. So their ages were pretty much higher. And he was chronologically. Yes. So that was the eye opening moment as well.

So I've seen that if you want to solve issues or you want to have longevity concept, you have to work on all of these previous stuff because it's gut health.

So all of these things. Yeah. So I'm really looking forward to that. I mean it's fun. I love toxins, of course there's mold got me into this arena a little bit deeper.

And again, it's those things right of when you, you know, however it manifests for you, it'll go to a weak system, but you can't hop right into longevity without cleaning up things first hundred percent.

And those age and true diagnostic tests will show you some weak areas or areas for improvement. Yeah. Where are you at? Yes, yes. I mean, amazing stuff.

There's one more thing I what I've seen connection really with with longevity as well. Lyme disease. Yes. So I wasn't aware how many people have Lyme that I mean like 80% approximately from our patients the last year that we tested in Bosnia, in Bosnia.

I mean, although even some of them come from Germany or Austria. They come in. Oh, yeah. Oh, come on, we can mortar practice, but still 80% of them when we do protein sequencing, immunology testing.

And then you do a lot of efficiency CD 57 and all these things. You can see them. They're positive. And no one ever treated them because they didn't have that bullseye.

Bullseye. Right. Yeah. Yeah. So that was horrible experience at the beginning because I was like, okay, B if it should be something, some symptoms. But usually what they had is chronic fatigue and joint pain.

Yeah. Migraines right. Yeah. Myalgia. Yes. Yep. Yeah. And that's again that was part of my journey. And so you just, you know, you keep learning and diving in and learning more because a lot of the things that we were taught and especially even, I'm sure for you through traditional medical school, you're not taught to put these things together at all and not at all.

I mean, you're just used to like, if you have a bull's eye given to vertex and that's it, and you're good. Yeah, you should be good for weeks. And then afterwards, if you have some issues, go to a psychiatrist or psychologist. There's something wrong with you.

Then something in your head. Yeah. So you have to fix those stuff. But I mean, this is really I mean, I enjoy helping people, really, because when you see someone that gets rid of the disease or symptoms that he has or she has, I mean, that's my heart is full.

Really. For example, this guy, I mean, I give, give definitely this time I give him, hello. And then everything I want to to to. Yeah. To thank him for everything that he did all over these years.

I mean, if one gives me even, like, I know how much, how much of money when you see the one, the one specifically that he sold his issues. Right. You cannot pay those stuff. Your heart is fulfilled now.

And this and this stuff, they're getting them off ten different types of medications and people again, they're they're usually just in that routine of thinking that this is the way their life is going to be, but they do have to have the motivation to make the changes.

Right, because they're not going to be able to just take one magic supplement to fix it all. I agree, and there is one thing as well with which was really interesting regarding the patient.

So he's originally from from Austria.

Building a Longevity Program and Closing Thoughts

So he was like, I think one year ago he went to his usual and the allergist and just so she told, told him like, okay, let's reduce the drugs that you're using.

He said, like, I'm not using any like for three years already. So that was really interesting. Oh yeah. Yeah. But you have to be this certain. There's no way.

Well, and what's nice is as an MD, you can do that, right? A lot of us under our scope, they we still have to, you know, have them go back to their prescriber to make any adjustments.

And a lot of them are not always in a super open to that. Yeah. Right. To think they just think there's no way they would not need this anymore. But then the bloodwork will show.

Yeah, 100% what I usually advise them okay try try to find another one. If I can refer to something like we got some drugs or something I've tried, for example, if there's symptoms regarding like fibromyalgia or something, if they are going to refer to neurologists to give them or Ms.

for example, listeriosis. So you have to find another one who is open to work with you. Yes. We are not robots to just give us one thing and just follow us for five years or ten years.

So I'm a human being or living a living organism, and my body is changing all the time. If it's inflammatory state, some other things will be affected 100%.

So it's just a matter of time. Yes. Yep. And that's they're caught in that loop right of just then more things become problematic. Yeah. As they get older and 100% a bad cycle.

Yeah. Usually people will tell patients when they come. So we have to focus on prevention first. Yeah. Right now for anything that could develop within I mean certain amount of time.

And then we should start working on the issues that you already have. But we have to go through history of course, to see where the root cause potentially could be and then do the testings.

I mean, of course it is sometimes expensive because you have to dig, dig deeper. Yes. And unfortunately, any kind of insurance doesn't cover those stuff.

So, I mean, I will give my best to decrease the cost as we can. But yeah, sometimes, I mean, I know for my own health, I spent thousands of dollars just to do testings and then find out where is the issue.

And when I found out I basically every other dollar that I have, I kept it in my pocket. So I'm not spending any more

in just doing like regular blood checkups and anything because HBA one, CS one one part or insulin is one part, C peptide is one part, but what is the stuff that are leading to that?

Yeah. So we have to check it. And then I mean that's time consuming especially when you wait for results. Yeah. When you're in Europe and you're selling it to us, it's three weeks just for us.

So for you guys, yeah, we I'm sure it's too much. Yeah. Yeah. So but I mean still I tell them okay let's do it. The basics during this one month period that you are waiting for, let's fix the food. Let's do so.

Let's, take some supplements that are being anti-inflammatory. Let's do it. Try to do some sort of activity like walking or something, if you can. Let's take the sleep or earthing or just to set up circadian rhythm to fix the timing when you eat food as well.

So those are the basics. And then when we get results okay, we can go deeper in everything. So I can set up the therapy. I can follow me up even more and everything.

And that's well why don't we do that. We have a results 100%. So there is I mean, this this was really interesting when whenever we follow up patient.

Totally we got rid of the drugs whenever there was like just okay, I'll do one of my own. Love the new stuff. You don't have too much results because there are too many questions outside.

For example, if we are talking here, okay, I'm not I don't know what's happening outside. Someone can tell me, but probably that would not be correct information right as a whole.

So yeah, I mean, if we are going to do some stuff, let's do it from from scratch and let's fix everything that we can, let's work together basically. Yes. Yeah.

The foundations are always first and then there's then it's our job to dig and keep finding really the roots and and really get to there. Yeah. The more prevalent and problematic symptoms that they're dealing with.

Yeah 100% I mean what else I've seen practices is sauna. So when we use for for example for other one. So when patients use like five times a week like 30 plus minutes, usually their blood sugar just decided to decrease just with that.

That's amazing. Yeah. That was really, really good at the beginning. It was sad to go up after the sauna, but like after a few weeks, 2 or 3 weeks they start to to slightly decrease.

That was basically period when we were waiting for the results. Right. So I mean afterwards you have different influences of supplements, therapies, food and everything.

So yeah, that was really as well eye opening moment. And I mean, of course you should discuss those stuff with your M. D. or people that are following you and treating you.

So yeah, this is really good advice to implement. Well, it's been amazing to have you on. Where can everybody find you. Yeah. So you can find me on on web page.

It's Dr.. And uhi see method.com. So this is our web page. So as well we have Instagram and Facebook social medias. So on Instagram it's OMA Nordic or Norwich.

So OMR art. So NYC. So this is our current Instagram and Facebook page. Well it was such a pleasure to have you on. I'm glad you're spreading this throughout Europe and in Bosnia.

Yeah. Thank you very much for having me. And it was really nice to talk to you. Yes. Thanks for listening to the Longevity Leaders podcast. A Longevity Leaders community is on mission to transform 100 million lives by 2040.

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