# Health Starts in the Mouth: Dr. Debbie Ozment on Oral Diagnostics Transcript

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## Introduction and Guest Welcome

You're listening to the Lifestyle Medicine podcast with Doctor Ivan Russell Post, brought to you by Access Lab, where we explore new perspectives at the forefront of personalized health care.

Hey, guys. How's it going? It's Doctor Ivan Roscoe with the Lifestyle Medicine podcast, brought to you by Access Medical Labs. If your doctor's not checking your labs, he's not a doctor.

And have I got a treat for you today? It's something that I am very interested in actually learning. I have Doctor Debbie Osman here who is a oral health specialist.

If you ever got a chance, please check out her TEDx talk. It's one of my favorites. One is called the The Forgotten Corpus and it sounds scandalous, but it is super fun.

I'll tell you what. So no, it's been it's been great. She I see she graduate from Oklahoma dentistry school. She's been working with the a forum and a fellowship, something like that for for I don't know how many years I've actually, let her get into that one.

And again, so she she's done so much in the field. So I'm super excited to to welcome onto the show here, doctor. Debbie, thank you so much for stopping by.

Thank you. Doctor Ivan, it's a pleasure to be here. Oh heck yes. Yeah. So now I want to get into your Ted talk. First and foremost, I spent the 14 minutes nerding out on it, and it was just absolutely, really, really unique for me because in the in the medical field, you don't really learn too much about the, the, the oral cavities, you know, I mean, or anything like that when it comes to the first part of what goes into your digestive system.

So it's super unique to actually hear about things such as bleeding gums and all this kind of different thing. So if you had to summarize such an amazing Ted talk in about one minute, how would you do that?

I would say health starts in the gut, but the gut starts in the mouth and very good in the microbiome. And specifically what's happening there too. Now had had to help people get well, you know, I've learned and been convinced in 40 years that unless we address the forgotten orifice, it does sound scandalous.

## The Forgotten Orifice and Oral-Systemic Health

Which is why I named it that, too. I love it, too. I mean, like, I was like, what are we getting into here all right now? Yeah. Had so funny. I've been, whenever I, I did my masters through, the Masonic College of Medicine, and I was the only dentist, and they were like, why should we take a dentist?

You know, what do you what do you need? Information for? And I was like, well, give me a chance. Well, then I wrote my thesis and called it The Forgotten Orifice.

And, you know, all my case histories contained, salivary diagnostics, you know, the DNA from the mouth and how that impacted, full body health. And so.

So then I get this phone call asking me to do a Ted talk, and literally, I thought it was a joke because I am always playing a joke on somebody. And so I thought, well, I'd tell my husband, somebody is playing a joke on me.

They want me to do a Ted talk on the Forgotten Orifice. And so he's like, well, maybe you should call them back. That might be that might be serious. So anyway, that sort of had happened.

Oh, that's super, super cool. And I was curious. One of the biggest things about that was what was the aspect of when you, when you, you, you mentioned bleeding gums as if, as if it's a prelude to something else.

Could you expand on that for me? Because it's funny. So this thing in South Beach where people do parties, they're doing things that they should do. And I hear a lot of people complain about, oh, I want my, my, my, my gums are bleeding more.

So could you kind of expand on that for me? Yes, sir. The thing that has shocked me and continues to shock me, is that even a tiny bit of bleeding is significant when it comes to, say, blood brain barrier, health, memory, cancer potential autoimmunity, just generally, you know, metabolic health people all the time.

Tell me, my dentist said my gums bleed a little bit, but no big deal. And I say, oh, yes, yes, yes, big deal. Yes. So, so bleeding gums, are something to not be ignored and not let anybody tell you they can be ignored.

Because it's pretty easy to get to get healthy. I mean, the thing is, when you see pictures and I'm sure and in all of your teaching and I for him, someone will talk about, bleeding gums and you'll see some picture of, well, here in Oklahoma, we would call Billy Bob teeth.

You know, these teeth are just, like, terrible one looks in them and they say, well, I'm not that bad, so I must be okay. And but it's really not that way.

It can be, you know, somebody who just looks awesome. They're very well put together, but they just have this, this chronic, low level infection causing a chronic inflammatory response throughout their whole body that really sequesters their immune system.

And now, through DNA testing of both the oral microbiome in the gut microbiome, we can look at, the pathogens that are causing that. I so appreciate what you're doing on your podcast and in your teaching and telling people to to test.

Don't guess be very specific at with therapies. And that really helps people get well know for sure. And again, precision medicine is the there the root cause aspect is always diagnostic testing.

So if you have somebody who comes in with any type of oral issue, including, bleeding gums, or are you implementing various types of tests, you you had mentioned DNA.

Are you checking for hidden pathogens like, you know, EBV infections, CVS, Candida, anything like that? Or do you have a like a specific panel usually do.

Well, I started in 2010. My, my world changed when I attended a, stroke and heart attack prevention course given by some cardiologist, who had launched, an oral DNA test.

So a saliva test that tests for 11 different key oral pathogens. So bad bugs that had had already started to be researched to figure out, you know, exactly where they go in those days.

I mean, we thought it was all just, mainly vascular inflammation. We thought about it in terms of of blood vessels, you know, and so people say, oh, I'm fine, Doctor Debbie. All I have is heart disease.

And, you know, and I say, well, that's, you know, 60,000 miles of blood vessels and limbs go to the really important places. So you might want to do that.

So, so I so I've been saliva testing, since 2010 and that just, you know, you just start to see all these correlations. When did that class originally because I was starting to see, you know, there's way more to this than, you know, fixing teeth.

You know, when our daughter was, in kindergarten and her teacher said, you know, what does your mom do? And

she said, well, she's a laundry lady and she fixes teeth.

And, you know, we're trained very most people to be carpenters. You know, we really we really fix teeth. But but it's so much more exciting and and really impactful.

Even when we look at the oral microbiome and how it's impacting the rest of the body. So now I do oral microbiome testing and I do stool testing. I, I'm currently using the GI map because it looks for, a specific oral pathogen called piece, a bacterium nucleotide, in the gut.

## Testing for Oral Pathogens and Gut Connections

It's an oral pathogen and has to come from the mouth if it's anywhere else. And, of course, now with with sophisticated testing, we can know if these bacteria have translocated to, to the gut, to the brain, you know, to the joints everywhere.

So I do those two tests as well, as a 3D x ray, what's called a cone beam x ray. Through that, through with those three things. Yeah. We can find out a whole lot.

Oh, let's say I again, you know, it's always nice. I call myself a student of life. I always like to learn, you know, of course, I always like to think I may.

I'm the smartest guys at the table, but it's always good when I'm never the smartest guy at the table. So, you know, learning things like this, I think not only makes physicians and health care practitioners, dentist, chiropractors, everybody better people, but I think it'd be it provides such a more quality of care, for, for for patients and, you know, people alike.

You know, I think it's fascinating. One of the biggest things that I find here is that I do a lot of chronic pathogen testing, blood based. And we're finding chronic EBV infections pretty much in almost every single patient, with, with autoantibodies through the roof.

Now, is this something that could sit there and lead to such, an immune dysfunction that it could actually manifest with bleeding gums with oral and, you know, hygiene issues and things like that.

Although it is a two way street, I'd say the wider street is coming from the mouth downstream. I say the mouth is upstream. Then, because these oral pathogens, create this low grade inflammatory response and that makes people more susceptible to every you mentioned.

So I often see, specific bacteria high in people who have, you know, autoimmunity. Of course, we're seeing so much more autoimmunity these days. My my patients are all physician referrals.

So so there's quite a group of physicians, in the, in this region that send patients to me who have chronic inflammatory problems. So of course, these days, you know, a lot more autoimmune, way too much colon cancer, as you know, I see yeah, so much, so much colon cancer.

And so in so many, in young people and it's very related to oral bacteria, very related to that same, back I told you about if he's a bacterium, nuclear atom.

In fact, I find that in colorectal tumors, probably about 50%. So it's considered to be cause at this point, since the Ted talk, in fact, a German researcher, wrote to me and said, oh, Debbie, it's not just impacting those tumors.

It's actually causal. So, super interesting, Beth. And great thing. Well, I wouldn't say great thing. I've been. But the thing I would like for your listeners to know is that this particular oral pathogen, when it colonizes in the gut, it actually causes colorectal tumors to be chemo resistant.

So it causes these tumors. Great research in this area. It's all on my website. I have a ton of a whole research

portal, this free, but it causes, chemo resistance to five fluorouracil as well as cisplatin.

And, and I've seen that in real time with patients whose who has chemo is just not working. So, super interesting. Oh it's crazy. It's extremely interesting. So.

No. So say you, you identify, a type of pathogen. What is your first line to go after and actually treating it. So I mean I identified it. Step one what. Step two.

Step two is called a comprehensive periodontal exam. That's just, really a standard of care exam IV in that, is has kind of fallen off a lot of people's radar in terms of what happens in the dental office.

I mean, it's something, I learned in 1981, you know, long time ago that, it's the best way to figure out what the extent of disease is and to assess the situation.

So so that's the next step. And then I actually do, a deep cleaning, a really good cleaning. And I use a laser. I, you know, I use, I have my protocol that, really, has been shown to work.

I use a laser, I use ozone. So a lot of those, you know, integrative therapies to help get rid of those bugs. Additionally, I really just give, depending on the person, or what their level of interest is.

Pretty much, if they come to me, they're very interested in. Let's get this cleaned up. I teach them how to keep it clean. And it's not just, you know, use floss.

Oh, floss. Better. Oh, floss better. No, no, I have some very specific, simple solutions that, that really work. I use some black seed oil, Nigella sativa.

Oh. Okay. So you you go go, go. But can you share some of these right now? No, no. I'm curious. You got me hooked. Oh I do, yeah. I'd love to. Okay. I think if you listen to the TEDx talk, you heard me talking about these two sticks that I learned about on a mission trip.

I was in Nicaragua. And, you know, when you're when you're on a mission trip like that, you kind of know the people that are heading to the dentist are the ones with, you know, a toothache.

They have a, you know, they're in pain, they interact with their mouth and but once in a while, I'd see somebody who's, just beautiful teeth and just wanted me to take a look.

And I learned even that those people generally were getting a little twig off the tree, you know, peeling it smooth and then using that as a little tiny brush between their teeth.

So, so probably starting in about 2004, I came home and, I started going to Nicaragua in 2004, came home and, it started, you know, what can we find here?

What can we find at Walgreens that, is similar and, because my patients were not going to go, you know, get a twig. So I ended our.

## Treating Oral Biofilm and Practical Cleaning Methods

Yeah, a hard sell, you know, simpler than floss, but but but still, so at this point, you know, that's sort of evolved over several kinds of, tools, but at this point, and I grabbed it before we, got on camera.

I recommend that people get some sort of some form of little brush. And these are simple to find, you know, they're plastic. I wish they weren't plastic.

Wish they were something, you know, good. Like bamboo or something. Right? Yeah. No, we just do our best with what we can at the point. But these little, these little brushes, the beauty of these little doohickeys is that they they

remove the bile, they help keep the biofilm disrupted between the teeth.

So I actually tell people to get in there in, like, scrub, scrub, scrub, scrub until it squeaks. You'll probably hear it squeak here in a minute. Thank you.

I, I think and that's when the biofilms disrupted. Because that biofilm lives way in between the teeth. Kind of where a regular cleaning may not get into.

So you you want to get in there and and if, if you haven't gotten, you know, really good cleaning you you're not healthy. You're going to get some bleeding at first.

But keep after it. You're going to you're going to disrupt this bacteria. Your body's going to cleanse that and heal it. And like you could not you could not make my gums bleed, period.

I mean, they they don't bleed because they are super, super healthy. So I so then, you know, you know how you learn. I know you are such a learner. And you, you find one thing in that, nothing else.

And it's so much fun. Well, for my podcast, a couple of years ago, I was researching, Nigella sativa, black seed oil, black seed, Cuban oil, just in terms of blood sugar and all of that.

I came across an incredible research article talking about how, black seed oil is effective against fuze, a bacterium, nuclear atom, this, this oral pathogen, as well as some other oral pathogens we know now.

But what's so interesting? The active ingredient of black seed oil is simmo quinone and sorrel quinlivan. You know, if it could be patented, I mean, we couldn't afford it.

You know, it's it's so amazing. It's so and so much for us. So so now generally what I have people do is put a little bit of black seed oil in their hand. I bottle it up for people.

I, you know, organic, cold pressed, hexane free, you know, well, caught, black seed oil and, and I haven't just put some drops in their hand and, and dip it, dip their little brush in it and scrub it in there.

Okay. Amazingly inexpensive, amazingly simple. And we'll up here it works. It works. And I test, did you have done, you know, anecdotal studies, but using, actually using oral DNA and having someone do this for a month and let's, let's check your levels.

It's amazing. 30% decrease in of bacteria in the autumn with, with, you know, with simply with flaxseed oil and other oil pooling just now I wish I, I tell people I think the most of the, the best cures in the world are the ones God gave us, you know, I mean, the ones that are on earth just chilling around.

I mean, like all those processed and nonsensical things. Again, there's some things that are amazing, but I still think the most influential thing we've ever seen is penicillin.

That comes from nature itself. You know what I mean? So tricks like that, I think are just invaluable in nature. Ivan, you're so right. I mean, God has given us everything we need, and we just have to figure it out.

And it's not supposed to be complicated. It's not supposed to be expensive, and it's not supposed to be no fun. I mean, you know, like, this is something, you know, you can see all the cool people in Oklahoma are doing this. Ivan. Yeah.

Sit around this rabbit. Yeah. So, you know, it's it's hilarious. It, it's it's, you know, it's you don't have to have a lot of dexterity to do that. You really just have to approve, right?

Cos people will always say, oh, doctor Derby, my hands are too big for my mouth for floss, you know? And, and and I just lost the front one people. You breeding out there in Oklahoma.

I mean, my goodness, you got some giants out there. Your hands too big for their mouth. Yeah. You know, we do actually live in Tulsa, so it's kind of funny how players are so, so anyway, yeah, it's you're right, you're right.

It's it's the simple things that makes a difference. It's the things that everybody can access pretty simply. I don't even think it it cost, you know, $0.10 a day.

I love that. So so it's it's kind of unique. So over your 40 years of just, you know, learning and procuring all sorts of unique information, what would you say your, your biggest, biggest excitement is for the next five years in medicine?

I you speak for the A forum. You're on the cutting edge of everything when it comes to functional wellness medicine. What do you what are you most excited about coming up here?

Gosh, that's a fantastic question. I am so excited about seeing the the body connected, just like you mentioned. You know, we we have all these separate professions, but you know, we are body, soul and spirit.

And when we start connecting the whole body, including emotions, you know, including all of it, I then then people start feeling better. And when people know that there's so much they can do, you're helping people know about things they can do.

I'm helping people know about things they can do for themselves, that they are their own best doctor. Then people are going to start feeling better. So. So if there's a succinct enough answer that in the next five years, I think people are waking up to the fact that they have power.

They have power. That's the body you don't get. You're right. God designed these bodies to heal. And and literally I since I see so many sick people, I have them stand in front of the mirror because they'll come in and say, oh, Doctor Debbie, I'm a cancer patient.

Doctor Debbie, I'm. I'm having memory loss. Doctor. Debbie. You know, and I say, okay, first of all, let's go stand in front of the mirror. Here's what.

And I write it and I write it down our video what to say? You know, my body is designed to heal. I'm a child of the living God, and I just need to figure out what I.

What my responsibility is in that. But I know my body is designed to heal. So once people, you know really believe that Ivan. And not just not just give all the all the power over to their doctor, that's exciting, that's exciting.

And what's coming up for is just. All right.

## Future of Personalized and Integrative Medicine

Yeah. Just with podcast. I mean, just think about all the people you reach that I reach. It's it's just thrilling. Because that's just free information for people.

Very true, very true. And I think that the birth of AI in the whole medical space is scary, but it's also extremely exciting because I think it's it's going to bridge that gap and inform patient is a poor doctor's worst nightmare, whereas an informed patient is a good doctor's best friend.

And I always try to tell people that, you know, it's a situation to where, as you know, when you come in and you're a patient who actually understands what they're supposed to do, you make you make my job.

You make your job much easier. Whereas a patient who comes in and, you know, just, you know, to a physician who doesn't know what the hell is going on, it's just like, oh, that's that.

That's their worst day incarnate right there. That that is an incredible statement that you just made, because I think

people should fire their doctor.

If their doctor came in for, you know, for making a suggestion, asking questions, in a, for your dentist, if your dentist, if you want to ask them, questions about, say, fluoride or, root canals or X-rays or whatever you want to ask questions about, it's your body and you should just never get shamed.

You should get you should be honored and, given, you know, researched information about that, know for sure and know the the amount of information out there right now is, is unfathomable, which is amazing.

And the access and the ease of patients being able to not only understand what they're supposed to do with their body, but also identify what their bodies actually need.

And again, that's why I sit there and say, like, you know, the the diagnostic part of this world is first and foremost more important than anything else.

Then you have peptides and this, that and the other, which are awesome. I mean, they are just spectacular things out there, but not, you know, not not guiding those treatments correctly almost, you know, you do more harm to your patient.

Whether it could be financially, emotionally, because they get excited and all of a sudden this peptide or hormone is not working because they never needed it in the first place.

Or like you said, you know, I think doctors need to be fired. Yeah. It's not one size fits all. And that's what's so great about all the testing. Personalized medicine is thrilling because people can see, you know, their, their blueprint and they can see what what their body likes, what their body needs, and and then they can in real time, you know, through your testing, through, all this great testing, they can see if it's working for them and they can know how they feel.

And I think that's very hope filled, extremely hope filled. And again, there's a lot of excitement about the future. And I know, I know like you said, I mean you both work you know, hand in hand with the a forum which, which kind of is like the, the major credential or the major, you know, you know, breeding pool of new information and new things that come in the industry, which is super exciting.

And it's always unique to sit there and see. I remember the last time I was there, I think I was in May, I walked by a stand and said, let's talk shit.

And it was about these the this, you know, the introduction of, you know, prebiotics. You know, what's going on. I mean, we're both. Yeah. So what are your thoughts on that one?

I'm curious. Oh, gosh, Ivan, thanks for asking this, because I probably started asking my patients about their bowel movements, you know, 12 or 15 years ago, and it would be so kind of shocking here.

You know, at that point, I was still in a regular, you know, restorative practice, so very boutique ish. I mean, people that I really knew a lot about and cared about.

And so I would say, well, tell me, you know, Joe, tell me, how are your bowel movements? And they would always be like. And then they would say, oh, doctor Debbie, they're nonexistent.

I only have one every, you know, four days or it's like, then it's like, okay, no, we can I can help you. Yeah. And just and, you know, usually I've it would be, you know, some very simple lifestyle measures, but, additionally, once we get the oral microbiome healthy, then the gut always responds.

I mean, who knew who knew that a deep cleaning could help somebody with constipation? But it really can. We're not. Yeah, I wouldn't have gotten that in America.

Was it, you know, next got Talent show is, you know, in Oklahoma. Give me that. You know that that's anywhere. So that's pretty good. I, I really hope to see that question on jeopardy soon.

So that's pretty good. Okay. So I'm curious. So again, you have a plethora of knowledge with 40 years. I asked you about the future. What have you seen over your 40 years that you would say was probably the most impactful, I guess transition or how do you say movement that has started in, in this industry?

Well, of course, oral DNA testing, but I want, I, I wish every single dentist would be, would be doing some, at least oral microbiome testing and also 3D cone beam technology.

So 3D X-rays. Ivan, we can eat an airway. So, you know, you know, all about airway that impacts sleep, that impacts, you know, cognition. But we can look at any of the any, hidden infection around, say, root canal teeth or areas of previous wisdom teeth extractions where there might be pockets of infection.

I mean, crazy, I found a baby in a guy's head, you know, that showed up.

## Advice for Dentists and Questions Patients Should Ask

And you can tell what? Holy cow. Yeah. And he was like, oh, I was bird honey when I was, you know, so. Yeah, crazy. But, all kinds of things, root tips.

You know, we just find a whole lot that that does not show up, really on a two dimensional picture. So three dimensional 3D technology is huge. If I were telling or I have it online course it's free.

It's called Upstream Gut Health. But one of the things I talk about in it, some questions to ask your dentist and make sure your dentist has a 3D cone beam X-ray and knows how to read it because oh my goodness, some simple, simple things can really make people feel better and I'm not talking about their mouth.

I mean, I'm talking about full body health. I'm talking about recovery of of some lost memory. Oh, Ivan, you will love this. I've gotten about seven women pregnant that that surprise you?

And that's from games. Yeah, yeah, yeah. The woman pregnant. I need to come to Oklahoma. I'm slow. They're wild. Crazy. But no, it's because I have oral.

But the impact of the oral microbiome. These bacteria can, lodge in the fallopian tubes. They can cause you know, adverse pregnancy outcomes in term, including miscarriage, low birth weight.

And so, like the most recent case, a woman came in and she had five miscarriages. And, got her mouth cleaned up. I mean, literally got her mouth. So she didn't even need antibiotics.

I mean, are you gonna. But sometimes, depending on what they got going, but she didn't need it, and, but we got rid of that pesky bacterium, and, she sent me a picture of her baby at five months, you know, in utero and now, you know, she's the baby's walk is the walk in, and it's just moving.

It's just so thrilling, you know, because it's so vital, which is awesome, you know? Nobody's named one after me yet, but, you know, I'm. I don't give it.

You never know. You never know. I would like to ask everybody two questions on this one. So the first one would be for, for any aspiring Dennis who's graduating school right now, or they're transitioning from the, you know, you know, typical box based, practices.

What's the best piece of advice you could give them to southern? Say, listen, this is how you bring integrative health into your actual practice. I would say, be aware that there's, you know, a lot of ways to do things that, that once you get out of school, you've just got to continue learning and to maybe look at the, integrative great integrative medicine area of dentistry.

There's a whole lot of groups, sprouting up. There's there's the whole biological, area of dentistry, which is fascinating. I office with a biological dentist, years.

Yeah. They they do things very differently. There's, an there's a group called the American Association of Oral Systemic Health, and it's called ash aos h.

Lots of good people learning. It's. I talk people like you and I that are that are saying, oh my goodness, I have so much to learn. I, I realize I don't know very much.

There's so much more exciting things to learn. And so I would just say keep an open mind, get through school. I would, you know, keep your head down and get through and talk about it till you get your diploma.

That because you know, the schools, you know, they're run by people my age still is 60. You know, the 66 in that group that, you know, really are still doing things the same way in a lot of places.

So, there are some schools I've been that are starting to integrate, some saliva testing, but, you know, yeah, nobody drives the same car they drove 40 years ago or so.

Hopefully they're not one close. You know, there's just so much to learn. And, and it's not, it's not. And patients love it, you know, if they will learn some new things, I tell people, do yourself a favor.

Learn something new. If they'll learn some new thing, the patients will flood in. Oh, I love that. I love and, well, it's kind of go hand with the second question.

Second question is anybody who's currently seen a dentist, which is pretty much everybody be watching this. What is something that you should ask your dentist that would kind of not only stimulate better conversation, but also better oral health and in turn, better longevity and vitality?

I would say, can we talk about my comprehensive periodontal exam, which that's that good rule. That's the test where it's it's very objective, measuring around the teeth.

To actually, detect early pocket depth to find problems early what that what that test does. And that's what I mentioned earlier. That's really standard of care.

A lot of everybody should be getting be getting it done once a year. And, when I do it, I, I use a, a topical anesthesia called Aura Kicks that just keeps it from hurting.

Because if people are inflamed, it hurts and nobody wants people. So a lot of times the test might like the pockets might be a little deeper than measured because you don't want to hurt the person.

## Closing Remarks and Access Labs Promotion

So that's why I started using this anesthesia. So I would say let's talk about my oral microbiome. And if they say, oh, you're great. You know, they really don't want to have that conversation, you know, fine, fine.

If you want. Yeah, exactly. Fine a new one. I think patients are so nervous about firing a doctor. Find a dentist, find a chiropractor firing or whatever, because, you know, everybody thinks that, oh, they graduated from school.

The other my best interest is their best interest. It's not, you know, I mean, like, let us just be honest. Medicine in general, no matter what field you're in, is a business.

And finding somebody such as yourself who's been in it for 40 years and has evolved every single decade, every single year, is is is very hard to find these days.

An age, I guess, like you said, get stuck in the same way. They're, you know, they're wearing the same clothes they

have for the last 40 years. So I think finding a physician who's always, you know, bringing new things in their practice, kicking the old things out, you know, once, once the data gets going is, I think, the Paramount and I think the measure of of what makes a health care practitioner actually involved in health care, right?

Yeah. So I must say, this has been such a delight. I must say this has been awesome. I'm going to go home and get my teeth cleaned immediately. I have my whole exam going on, you know?

And again, I really want to, you know, everybody who's watching this. Please check out her Ted talk. I mean, Doctor Debbie, it's been an absolute pleasure having you on here.

The Ted talk was awesome. I learned a lot myself. And I always it's it's hard for me to learn something these days because I'm always trying. So it's been such a pleasure to have you on really.

And thank you so much. Oh thank you. Y'all join me on Instagram doctor Debbie Oz event Ozy me T and thank you Ivan I, I so respect what you're doing and thanks for asking me.

It's just been a joy to be with you today. Oh, it's been such an honor. So you all want you have an amazing day out there in Oklahoma. I'll try to do the same thing here in South Beach.

And hopefully we we, reconvene at the forum. You betcha. All right, guys, have a good one. Thanks for joining us today on the Lifestyle Medicine podcast at Access Labs.

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