How To Reduce Your Inflammation By Changing What You Eat Transcript

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Introduction and Personal Health Journey

Welcome, David. I'm so glad that you agreed to join me and be part of this amazing summit. So what I'd like to have you do is introduce yourself and explain why you have this area of expertize.

Yeah, well, thank you so much, Dr. Wahls. And my name is Dr. David Jockers, Doctor of Natural Medicine. And yeah, you know, growing up, I was I was an athlete and my mom actually was training to become a naturopath.

And along the way, you know, for me, as an athlete, I was always thin. So I thought I had to eat six meals a day, 5000 calories a day to maintain my weight.

And that caught up to me in my early twenties. I was a personal trainer and I was doing the had to have a protein shake before I went to bed and then I'd wake up in the morning, had to have this big breakfast.

And I thought, this is something I had to do. And this is what all the, you know, bodybuilding magazines taught me and caught up with me. I developed irritable bowel syndrome and I went from about £170 down to £140.

I had orthostatic hypotension. Where I go from sitting to standing, I feel really, really dizzy. And I realized, you know, my body was chronically inflamed and I came across some information that talked about a lower carb diet, which for me, I thought I was healthier.

And everybody around me, I was eating whole, whole grains. I was a lacto ovo vegetarian, you know. So I thought. I was so familiar, my friend. Yeah. That's right.

I thought I was healthy, but, you know, that diet wasn't working for me. And so Dr. Mercola, he was a website that I started looking at and he had a no grain diet.

And I thought, Oh, interesting. So I took that out. I started buying, I started ordering grass fed meats and things like that, and it dramatically transformed my life.

And I started, you know, I started gaining my weight back on my energy back. But, you know, I noticed that I was very, very satiated and I was in graduate school at the time and I noticed I had 7 a.m.

classes and I noticed that I was very, very satiated oftentimes and didn't didn't have as much hunger. And I felt better when I was in a fasted state and I had never heard anybody talk about intermittent fasting or anything like that.

I was in a natural health college, so I had heard of, you know, extended fasting and things like that. But there was never there wasn't this kind of idea of intermittent fasting.

And I just knew that I personally felt better when I wasn't eating food in the morning and I would just drink a ton of water and I would start eating when I got hungry, which is usually around 2:00 in the afternoon.

And I would eat between, let's say 2:00 and 8:00 and I felt better. I was getting stronger in the gym. I had more resilience. My immune system was better, less issues with my gut and, you know, it was until years later that I realized, oh, this term intermittent fasting, I'm like, that's actually what I do.

And, and so this is something that has definitely transform my own health and something that I've taught other people and been really passionate about understanding the science of it.

And in general, I'm just a performance biohacking type of nerd, you know, I'm all into that stuff and learning about

things that I can do with my nutrition, with my lifestyle, to really optimize my overall health and my performance.

Okay. So everyone who's listening, we have a doctor of natural medicine and he has his own personal transformational story. And actually, I love that.

David Certainly that mirrors my experience being a low fat vegetarian and a great diet by traditional standards, but did not serve me well. And I think and everyone who's listening, we have a diverse set of genes, a diverse set of microbiome.

And so there may be a diverse number of diets that can be helpful for humans at large. But is it helpful for you? That's a really great question. And we're going to talk about influence and we'll talk about nutrition.

Okay. So this is a common problem. We think we have a really great diet. I but we discover that the diet that is described as a really fabulous diet is not serving as well.

And I want to go back to the question of inflammation. If we have multiple sclerosis or any of the neuro immune conditions of systemic autoimmune diseases often have neurologic or psychiatric symptoms.

So that's a neuro immune inflammation.

Inflammation and How to Measure It

What is inflammation and what's causing it? Yeah, so inflammation is a immune reaction in our body and as you see, our body was really hardwired for survival and it has to look at you basically.

What are threats to survival? Well, a high toxic load. So if we ingest something that's extremely toxic to our body, we're breathing in, you know, carbon monoxide or whatever it is we're in.

If we're exposed to toxins that are exposed to high levels of pathogens, where the body senses that there's a lot of potential dangerous pathogens in our body, by looking at endo toxins or actual live bacteria, live microbes, microorganisms in our blood and the body has to react to that.

Or if we're under tremendous emotional stress or physical stress, because we know that throughout the history of mankind, more people have died from systemic infections than anything else.

And what that means is that, you know, people would have a flesh wound or something like that, and these pathogens would get into the blood and they would spread throughout the body and they would get into the lungs, cause pneumonia, get into the brain, cause meningitis, whatever it is.

And so the body is adapted to create this inflammatory process to help protect against dying quickly from an infection. So if we're under some sort of emotional stress, the body associates out like when our ancestors run or emotional stress.

There was risk of injury, there was risk of some sort of a wound that that could take place that could potentially cause pathogens to get into their bloodstream.

Right. And cause this sort of this sort of death. And same thing with toxins. And so the body reacts with this inflammatory, very process and this inflammatory storm.

And it's a healing process. And it's a it's a normal natural process. The issue is that it's meant to be short term so that if we have trauma, if we have injury, that the inflammatory process is part of the healing process should be short term.

And then once you know the triggers for it, once the trauma is under control, the healing is initiated, that inflammatory process should slow down and eventually stop in our society.

We keep provoking it in a sense. We keep pouring gasoline on the fire. And so now we end up with this kind of low level chronic inflammation that eats up, you know, all of our different tissues and, you know, obviously can excite the immune system into an autoimmune type reaction and a neuro inflammatory autoimmune type reaction like you're talking about here in this summit.

Okay. So the root causes, we've sort of gone over how inflammation is protective, but if it persists too long, then it becomes maladaptive. And that's what's going on.

When we have multiple sclerosis in, that's what's going on if you have these other systemic autoimmune diseases. So it's now become pathologic. How do we measure it?

You know, because I'm thinking of me normally, you know, I go see my neurologist. He orders MRI surveillance a the tells me I've got new lesions or that everything is quiet.

Are there any other ways that people with a mask or any of the other neuro immune conditions can figure out, is there inflammation still active? Yeah, for sure.

And there's some some normal blood labs that you can ask your doctor to run if they're not already running. And these are typically covered by insurance.

Some of them are for, for example, high sensitivity C-reactive protein, you know, C-reactive protein is part of the immune system and elevates when there's inflammation in the system.

And so we always want to see that under one, okay, ideally under one. Now if you're dealing with if you've had an autoimmune condition, oftentimes it may be like really high.

I mean, it may be 20, 30, things like that. And so if you're seeing it reduce with, you know, every three months or whatever, whenever you're getting your blood work done and you're following a healthy lifestyle like Dr.

Walz recommends, that's good. Right? You want to see it reducing ideally getting it under one. There's also something called the erythrocyte sedimentation rate or ESR, which is looking at basically how blood is clumping, right.

And if it's very, very clumpy and thick, okay, that's a sign of inflammation. And so we want to see that, you know, the blood isn't too thick, that it's that it's thin, that it's, you know, it's not super vice vicious.

And we can also look at fibrinogen as well with that. You know, that's another good marker looking at basically the viscosity of the blood. So again, when we are inflamed, we tend to get more vicious blood that's more prone to clotting as well.

And on balance of inflammation, does that make people higher risk for stroke? Absolutely. Yeah, for sure it does. Yes, definitely. And those are early markers that we could look at that could indicate, you know, that that could tell you that you may be more predisposed to something like a stroke or heart attack. Yeah.

Or that you just have autoimmunity in general, right? That that's driving up inflammation. So for sure, homocysteine is another really good marker. You know, talking about stroke and inflammatory activity in our blood vessels, homocysteine is a really good marker and that is a breakdown product of an amino acid methionine.

And it's a normal metabolic byproducts. So we're always going to have some, but we want to keep it in kind of this, this, you know, this optimal zone and which typically.

An optimal zone. Optimal zone. And it depends on who you ask. I always like it for sure under nine and a lot of practitioners like to see it under seven.

Okay. Based on some of the latest research that's out there. And when it's when it when we have the right

nutrients, particularly B vitamins play a role in this vitamin B2, vitamin B9.

So that's folate. Vitamin B12. B6 plays a role in zinc and magnesium. Well, we have sufficient levels there. We convert homocysteine into glutathione, iron and also into Sami, which are kind of universal.

That's a universal methyl donor that helps with the production of serotonin. All of our different neurotransmitters and glutathione on is our master antioxidant that helps keep our immune system under control.

So we need it. We need to create those. And if we have those right nutrients on board, then we're going to have, you know, more optimal levels of homocysteine in some people, more genetically need a little bit more of those key nutrients for that metabolism.

And they may see homocysteine high. But the thing about homocysteine is, and I'm sure you've seen this on labs as well. I've seen people that they don't complain of any major symptoms, like they think that they're feeling fine and then you'll you'll do a, you know, a blood test on them and their homocysteine is 12th.

Right. And that's why a 20 year. Yeah. Or, you know, I've seen 60 like, oh. My goodness, wow. That person's really at risk. And anyone who's listening, there's increased recognition that high homocysteine are we've known for some time higher risk of heart disease.

But it's also seen people with M. S. have higher homocysteine. So people with other neuro immune conditions have higher homocysteine. And so I'll come back.

What are some of the foods that would be rich in B, vitamins that you are encouraging your folks to consume? For sure.

Blood Sugar, Insulin Resistance, and Diet

So when I'm thinking about folate and when I'm thinking about vitamin B too, and I'm thinking about B12, some really good ones, organ meats in general.

So like beef liver, right, or grass fed beef liver is a great one for folate. Also, dark green, leafy vegetables are a great source of folate, vitamin B12 you're going to get from your animal products.

So we talked about organ meats, but also, you know, just grass fed beef in general base in all of your, you know, red meat typically is higher in B12 than your wider meat.

Right. But you can get some from poultry, can get some from eggs, from fish as well. So you can get your B12 there. But red meats typically are going to be higher in that.

And so those are going to be key. Those are also high in zinc, high and choline, which is which is also critical for methylation and metabolizing homocysteine more effectively.

So those are going to be the best thing. So, you know, dark green leafy is getting your your salad, a steak salad. Right. Is a great way to get a lot of those nutrients in there.

Yeah. Okay. Now let's talk about blood sugar. So give thoughts about what's the role of your glucose metabolism in inflammation. Yeah. So our body is very sensitive to where the blood sugar is, where glucose is.

We should have about a teaspoon of sugar circulating in our bloodstream at any given time. We measure that in our blood glucose measurements. And when our when our blood sugar goes gets up, it's elevated.

We call that hypoglycemia. And these glucose molecules will actually bind to proteins in our bloodstream and create something called an advanced glycation end product or an A-G.

And these ages are sticky proteins that are highly reactive and they particularly are reactive with the endothelial lining of the blood vessels. And so they create massive oxidative stress and they drive up inflammatory activity.

The oxidative stress creates the tissue damage and then inflammation comes in to try to heal, heal the NFL colliding ends up causing a plaque formation, right.

A scar tissue, in a sense. And so it also damages the kidneys. I mean, you think about somebody with uncontrolled diabetes. They have very high they have hyperglycemia.

So they end up damaging their nerves. Ryan They end up with peripheral neuropathy or optic neuritis where they lose their vision. They have kidney failure, heart failure.

So they don't actually die from diabetes, from hypoglycemia. They die from the effects or the downstream effect of these advanced glycation end products and how they damage these major organ systems.

And so very, very important that we keep blood sugar down, but we don't want it too low because then we get hypoglycemia and we don't have enough glucose to drive energy in our neurons.

And so then the neurons start to die because they become, you know, malnourished in a sense. They're not able to produce energy. And that creates a cascade of inflammation.

So very, very important that we keep blood sugar in a very tight, regulated state. And a major hormone that's associated with that is insulin or insulin.

And glucagon would be the secondary hormone insulin's job is to take sugar out of the bloodstream and like a key going into a door, it opens up the cell and we have a receptor on the cell called the insulin receptor.

So it the insulin is the key goes in the receptor, opens a door, allows glucose as well as other nutrients like magnesium to get into the cell where we can now produce cellular energy.

And that's really key that we have a sensitive function. What happens is in our society, we're eating all the time and we're eating hypoglycemic foods or higher carbohydrate foods.

We end up creating higher blood sugar and a higher need for insulin. And over time, the cells become less sensitive, less responsive to the insulin. And so we have higher and higher loads of insulin.

And insulin is a pro-inflammatory when it's elevated in our bloodstream, it's a pro-inflammatory free fat storage hormone, meaning that it stops our ability when insulin is elevated above a certain threshold, we're not going to be able to burn fat for fuel.

And that's key because that reduces our metabolic flexibility and puts us in this mode where we can only really burn sugar as an energy source and sugar is an important energy source glucose.

However, if we're primarily only burning glucose, we produce a lot more oxidative stress and oxidative stress that creates more damage within the cell, more damage in the mitochondria, and drives up more inflammatory activity also inside of our cell will cause a reduced function or a dysfunction in the mitochondria.

We call that mitochondrial dysfunction or in a sense, these mitochondria start to age faster and then they become, you know, again, less functional. And we call that senescent mitochondrial senescence, right?

Where these mitochondria become aged and very poor at actually burning fat for fuel. And so now we might even be able to get our insulin levels down to actually turn on fat burning.

But our mitochondria that are in the cells are actually so dysfunctional that they can't burn fat themselves. And now these cells are reproducing, creating more new cells that have poor dysfunctional mitochondria.

And then over time, you know, just we end up with with overall, you know, systemic lower function in our body and, you know, and it causes significant issues and so very, very important that we're keeping.

Yeah, good question. What do we do? So high blood sugar, high carb diet, can lead this insulin resistance, lots of downstream damage to our to our brain, our nerves in our other important organs, liver, kidneys, heart, lungs.

Oh, my goodness. What do we eat? What should we we be doing if we see that our blood sugars in insulin are creeping up for sure? Well, the first step is I always recommend reducing sugars and grains and certainly all the ultra processed foods, things that you have to like open a bag to eat.

We want to reduce or even eliminate all of those types of foods. We also want to change the fats. So we want to get rid of our processed vegetables, slash seed oils.

That's going to be things like canola oil, soybean oil, safflower oil, cottonseed oil, peanut oil, canola oil. And we want to get rid of those things.

They're very inflammatory. They end up driving up insulin resistance in the body. And we want to switch over to healthy fats. That's going to be your extra virgin olive oil, particularly like a fresh pressed high polyphenol extra virgin olive oil, coconut oil, grass fed butter, pasture raised eggs, avocados or avocado oil.

We want to consume those kinds of healthy fats. And then as much as possible, we want to change over our animal products from grain fed, conventionally raised to grass fed, pasture raised because they have more nutrients and less toxins.

And that should be our idea when it comes to nutrition. Do more food that has minimal amount of toxins. So minimal amount of pesticides, herbicides, you know, things that spike our blood sugar, processed seed oils and maximal amount of nutrients.

Right. And so particularly real food based nutrients. And so that's what we want to focus on. And then we build our meals. We want to make sure that we've got I always recommend at least 30 grams of high quality protein, particularly animal based protein in each meal, at least 30 grams, if you're doing a lot of strength training, particularly if you're male and you're doing a lot of strength training, many more 40, 50 grams of protein in a meal. Okay.

You know, and David, so people as I'm looking at my plate, I can't convert that to grams of protein easily. So I like to think about if I'm eating my meat, fish, poultry and you know, I always have my hands on hand.

Yeah. So how how much of my hand should be devoted to the meat size should. Be about your whole hand, right? You should have a whole hands worth in a day or in a meal.

In a meal. Right. So roughly that whole hands worth okay is going to be good. And then you want to basically you want colorful vegetables with it, right?

And so you want lots of colors. So you're you're really building it around the healthy protein. You've got healthy fats in there. And the fats could be coming just from the animal products itself and maybe a fatty piece of meat or something like that.

Or you can add in extra virgin olive oil or which is high in polyphenol. Super good for your body. Avocado. So grass fed butter, things like that. And then you want lots of colorful vegetables and getting an array of different types of colors.

All of those things have something called polyphenols in them, which protect the plant from ox, from, for example, UV rays, but also from natural predators and the polyphenols confer benefits to our body and to our microbiome.

They help us deal with UV stress, right? They help us deal with radiation. They help us quench oxidative stress in

our body. They help to benefit our microbiome and create a more diverse and less inflammatory gut lining and microbiome in general.

And so we want to make sure that we're getting colorful foods. We want to make sure we're getting lots of protein, lots of healthy fats should make you feel satiated, right?

If you feel hungry a few hours after your meal, that's a sign you either eat something your body was sensitive to or you didn't eat enough protein or fat.

Right. It should really satiate you for at least 4 hours after you consume that meal. Okay. So satiation refers to just feeling full contents. Your aunt, your aunt having hungry.

And if I'm looking at my dinner plate again, I make it visual so people can can really see how to think about this. I have my dinner plate, I've got my green leafy vegetables, cooked greens, mushrooms, some asparagus, maybe some beets.

Well, the variety of vegetables, what? A third to half that plate should be my protein in the other, the rest should be my vegetables. And I think what I'm hearing is that you'd rather have more non-starchy vegetables than starchy vegetables.

Beets and carrots are good, but we want to have the majority of those vegetables be non-starchy things like brussel sprouts, broccoli, cauliflower, kale, spinach, a Swiss chard.

Am I describe describing things accurately. Okay. And then what I like to do during the summer, I have all sorts of green herbs. I blend them and depending on know that early in the summer or late in the summer, I blend them with my cold pressed, extra virgin olive oil, some garlic and whatever green herbs.

So it might be basil, oregano, parsley, cilantro. I grind up green herbs, olive oil, make this beautiful pesto and I place it over whatever protein sources I have, I put it over my vegetables and I'll probably have 2 to 4 tablespoons of my pasta with every meal.

So that's where I'm getting my fat. I'm getting a lot of green earth with that. It tastes delicious. And if everyone is listening, I encourage you to try making your own pesto with a really nice olive oil with fresh herbs you can grow and put it over everything.

You eat it. It's like, Oh my goodness, so lovely. Yeah, I love that. I mean, that just makes me hungry. Even thinking about it, just with all those different Mediterranean herbs which are absolutely amazing for your body.

We know olive oil has things like alio canthal and hydroxy tyrosine, which actually cross the blood brain barrier. And they're in a sense, they're like nature's ibuprofen, right?

Nature's Tylenol.

Intermittent Fasting and Muscle Preservation

They don't have the side effects, but they're really powerful at quenching inflammation, quenching pain and improving neurological function and helping to balance the the immune system.

Okay. All right. So we've we've designed a diet that we think will be very, very helpful for anyone whose blood sugar is creeping upward. I and you're also, I know, very keen on intermittent fasting.

So let's talk about how we can use this intermittent fasting to further reduce inflammation for sure. Well, you know, one of the best ways to get insulin down, right.

And we talked about insulin resistance. An issue with that is actually just not eat itself. Right. So eating a lower

carb, the kind of diet that Dr. Charles and I just talked about, is key that will bring insulin down.

But also just taking time between meals actually helps bring insulin down. And so when we insulin goes under a certain threshold, our body starts burning fat for fuel and it starts undergoing a process of self-healing and self repair.

We call that process autophagy, which means self eating. And the body says, You know what, I need amino acids, but we're not taking in any dietary amino acids because we're not eating.

So what does it do? It says, oh, well, there's some amino acids here inside of our cells. And there, you know, right now they're the structure of this mitochondria that's old and damaged and not functioning well.

So you know what? I'm going to actually break that mitochondria down and I'm going to take the raw materials, the amino acids, and I'm going to create a new, healthier mitochondria.

And we call that mitophagy. It's this process of breaking down the mitochondria, right? And we create a stronger, more stress resilient mitochondria. Also, when we go periods of time between meals, the body says, I need to be more efficient at burning fat for fuel and creating cellular energy.

So I actually need more mitochondria within my cells and really the quality of your cellular health right? The quality of your life is going to come down to the quality of your cell, your cellular health and the balance of your immune system.

But then the quality of your cellular health really comes down to the amount of strong and stress resilient, metabolically flexible mitochondria within your body.

And so by going periods of time but without eating, of course, we do need to eat, but taking some periods of time, whether it's 14, 16, 18 hours, maybe a day, 24 hours without eating, we increase the amount, we get rid of the bad, the dysfunctional mitochondria, and we increase the amount of strong, stressed, resilient, metabolically flexible mitochondria.

And that's going to increase your overall quality of life and help keep inflammation under control in your system. Okay, listeners, what we're describing is this intermittent fasting that we're in.

Lengthen the time that we do not eat. And in my clinical practice lab, people do this very gradually at a pace that they can accommodate. So you eat your first meal of the day a little later in the day, you take your last meal, the day you move that little earlier in the day, and you do this at a pace that works for you and your family.

And over time, my people become very successful at either time, restricted me or intermittent fasting. I have some folks. And David, I'm going to be very curious on your opinion on this.

They go to one meal a day or med and they find that to be super helpful. Yeah. Now I'm getting a more sensitive I'm I'm and the mature side of my life over the age of 65.

So now I have to worry about sarcopenia and loss of muscle mass. So what what advice do you give to someone? In my age group over 65, we have to worry about muscle mass.

And I also know that my mitochondria, my immune cells are getting more mature as well. So I'm worried about that. Senescence. Yeah. What, what would you be telling me for sure?

And that's, that's, that's a really great question. So what we want to do is we want to create a good balance between feasting in a sense, and famine, where the body says, okay, we've got a lot of great nutrients, a lot of amino acids, nutrients on board for a period of time and then periods of time where the body says, okay, wow, we don't have enough nutrients.

So now we need to scavenge. We need to break down all these, you know, damaged cells, burn fat for fuel. So we create a good balance between that. And of course, we also want to actually create mechanical load on the muscles and on the joints.

So that way we create a stimulus that allows the body to say, I need this lean body tissue. And this is one of the things that a lot of older people, you know, just a lot of people in our society in general don't do is we're not actually we're not exercising.

We're not doing strength training. And that's so critical. So we need the load as well. So doing strength training, resistance training three, four times a week, really, really beneficial, particularly compound exercises, things like squats, deadlifts.

And I know that might sound intimidating to some of the listeners out there, but, you know, you start small and you can get on YouTube and just kind of look at like, what does it air squat look like?

What does a deadlift look like? You know, if you're still confused by this, you can get a trainer who can actually modify exercises for wherever you're at and get you started.

But these kind of exercises are really critical to help maintain lean body mass and build lean body mass. And then when it comes to, you know, fasting and nutrition, there are some people that just really do well on one meal a day diet.

But that doesn't mean it's for everybody. You know, that's a small subset of the population. If you are doing resistance training, if you are exercising regularly, then it's probably going to be a little bit harder to do one meal a day.

So I'm more of a fan of two or even three meals, depending on how you handle in a sense, a larger meal in a let's say a 6 to 8 hour eating window. On a typical basis, you're doing 2 to 3 meals in that in that time span.

Again, like I talked about getting at least 30 grams of protein, at least 20 to 30 or more grams of fat, depending on how well you metabolize and digest fat.

Some people, if they don't have a gallbladder, they may need a little bit less fat in a meal and they may need smaller meals. Right. So you just kind of have to do it based on how you feel when you're eating.

But you're trying to get 2 to 3 meals a day. And then I'm a huge advocate of one day a week doing kind of a deeper autophagy, fast, where one day a week you do something like a 20 to 24 hour fast. You kind of push your system a little bit more.

Now you're drinking water. You can drink herbal tea, black coffee if you want during that fast. But trying to just get it into that 20 to 24 hour range.

So like a lunch to lunch fast. David, let me ask, do you change your workout schedule? So, yeah, that's a good question. Yeah. So for me, here's how I do it on Wednesday.

I don't work out right. I might take a walk, but I don't do any sort of strength training. And I eat lunch and then I fast until lunch on Thursday. Now for me, I've been doing this a while and so I'm very metabolically flexible, so I'll actually work out before I break my fast on Thursday.

So at lunchtime on Thursday I'm working out. I feel great, I even feel hungry and then I'll break my fast shortly after my workout on Thursday. So as you get better at this, your body becomes you get more of these very, very metabolically flexible stress, resilient mitochondria, and your body gets so thrifty and good.

And I'm very low in body fat, but my body's just so good at burning the body fat that I do have because I'm metabolically flexible and I've trained at this way.

But what I wouldn't recommend is working out in the beginning of like a 24 hour fast. That wouldn't be smart. When you work out, you're going to drive up cortisol, you're going to break down your blood sugar, which is going to trigger some insulin, and that can end up causing more hunger and more cravings.

So that isn't as advisable. Better to work out at the end of your fast. And really if you're doing intermittent fasting in general, it's usually more advisable.

Most people just handle it better. They have less cravings that they work out kind of towards the end of their fast closer to that when they start eating.

Although some people based on their schedule and I used to do this, you know, in years past they have the only time they have to work out is in the morning and then they want to fast until 12, right, or lunch or whatever it is.

And it just works better for their schedule. They can do that or you can do early, you know, if that doesn't work for you, but you have to work out in the morning based on your schedule, then you can do early time restricted feeding where for example, you eat at, let's say 8 a.m.

and you eat at 2 p.m., right? And then you fast through dinner after that. And if even if that doesn't work, I've still seen really good results. Some people just do like two meals, like a breakfast and a dinner, right?

And just kind of fast through lunch as long as, again, they're eating a very blood sugar, stabilizing breakfast. I've seen people feel really good and bring down inflammation, you know, just by eating, let's say, at 8 a.m.

and and 6 p.m.. Right. And just not eating in between. It's really the the act of constantly grazing, right, are the more times where kind of putting food in our body were driving up inflammation.

And when you eat two meals as opposed to four meals in a day, that actually reduces the overall insulin load by 25%, even if it's the same ingredients.

Right. It's just reducing the amount of times that you're eating. And so you're going to create more insulin sensitivity that way, and which means you're going to burn fat for fuel, you're going to create more of those healthier mitochondria.

Now, we talked a little bit about toxins, and I want to have you comment on what the role of toxin chemicals have to do with our our lives. I know that's in our food supply.

We've already mentioned that. But do you have thoughts about toxins in other aspects of our life? Yeah, I mean, there's toxins everywhere. So, you know, there's toxins in our air, particularly.

They you know, EPA says indoor air is significantly more toxic than the outdoor air. Most people think of air pollution right as the main issue. But inside of our house, you might have formaldehyde coming off of our furniture.

We might have, you know, different toxins coming out of paint that if we recently painted, we might have mold in our home. Right. And so we could have mycotoxins and mold coming out of the walls of our house.

And so, you know, we're being exposed to toxins. There's no way around it. You're not going to get rid of all of them. But there are definitely things you can do to help reduce your toxic load.

And I think that's really the idea is let's try to dilute or reduce the amount of toxins that we are being exposed to on a regular basis. And our body can handle a certain amount of toxins.

But the more stressed we are, the weaker our mitochondria are, the more sluggish our drainage and detoxification systems are, and the more in inflammation primed our immune system is, the less toxins we're going to be able to handle.

And and without driving up more inflammation and creating a whole cascade of negative effects. And so, you know, in general, what do we want to do? We want to do our best to try to get organic foods.

So that way we're not being exposed to pesticides or herbicides.

Toxins, Detox Support, and Closing Resources

You know, if you can't find organic, you can look for non-GMO as well, which is key because that's, you know, some of the more damaging herbicides that are used are typically used on foods that are genetically modified in such a way that they're resistant to those.

And so that's key as well. So you're looking for that inside your house. You can get an air purifier. I like the air doctor. So I've got air doctors and for example, my office right here in different rooms in my house in the summertime or, you know, when the weather's nice, you can open up windows, all right.

Which, you know, helps things off gas. If you have if you're getting new furniture, try to let it sit out. Right. Or try to off gas it in general. Right.

If you get your furniture put in, it's a good time, you know, to go take a vacation or put it outside if you have, you know, a covering overhang kind of thing to let it just air out, I think that's a really good idea.

So we're trying to do our best to help reduce our exposure to these different types of toxins. And while meanwhile, we're working on developing our our body's own natural resilience, helping move these drainage pathways or helping support our liver, you know, I always tell people, you got to pee your way and poop your way to good health. Right?

That's how it's how we get rid of these things. And so for drinking a glass of water, every every hour. Right. While we're awake, other than maybe the hour for we go to bed, it's a really good idea, people will say when they start following a healthy lifestyle.

I'm sure you've probably gotten this doctor, because a lot of my clients say they would say, you know, I feel a lot better, but I have a problem. I've got to go to the bathroom every hour. Right.

And I'm like, well, that's good. You got pee and poop your way to good health, right? So you got to be moving your bowels, you know, really ideally twice a day, certainly at least once a day.

You want to move out all the endo toxins and waste from the day before each day, and you should be urinating as well. And that's how we get rid of these toxins if you are able to be in an environment where you can sweat.

We talked about also things like infrared sauna or even traditional sauna getting out, you know, in the summertime, getting out in the sun on a regular basis.

I mean, really all throughout the year, getting out in the sun is so powerful for your mitochondria and so good for your body, even if it's cold out. But getting sweat as well and getting more of your body during the warmer months can be extremely powerful, right?

Really great for your body. Great for opening up your drainage pathways, eliminating more toxins and improving mitochondria function. Well, David, this this has been just so fabulous.

There's so much great information on inflammation, on blood sugar and the things that we can do to lower inflammation, improve our blood sugar, control. Now, where can people come learn more about everything that you do and can people come work with you if they would like to?

Yes. So my website is drjockers.com. You can find me on different social media. Just look up Dr. David Jocker's YouTube podcast. I personally don't work with clients anymore, but I do have a health coaching team that does.

And so you just reach out there. They're expert, trained, are amazing. They work with people all around the world virtually. And so you can reach out to us, just look up coaching on drjockers.com and my podcast, Dr.

Jockers Functional Nutrition Podcast, very popular one. Where are we talking about all these kinds of same things that we're talking about here in this in this interview?

So thanks so much for doing this summit and inviting me on as well. Dr. Wahls. David, this has been just wonderful. I look forward to be able to see you at one of the next integrative functional medicine conferences that I attend.

Sounds very much like you and your family. Yes, you too. Thank you.