Introduction and Guest Background

– Welcome to another episode of the reverse inflammaging, summit body and mind longevity medicine. I'm very pleased today to have as our guest Dr. Joel Kahn, realizing that the single greatest determinant of longevity is heart disease and our guest Joel is a expert in this field. Dr. Kahn is a practicing clinical cardiologist and clinical professor of medicine at Wayne State University School of Medicine.

He's the director of the Con center for cardiac cardiac longevity and he's written many popular books including your whole heart solution and dead executives don't get bonuses.

Welcome. Dr. Kahn. – A great thank you Dr. Sideroff. – It's a pleasure to have you here and I want to mention to the audience that I've been enjoying your newsletters for a long time now and I find them chock full of useful information so I appreciate you sending them, keep them coming kind of you.

– That's the plan and thanks so much. – Yeah, so to begin with, why don't you just kind of give us a sense of what got you into the area of longevity and your interest in that area. – And it was not a straight path.

I think there's a famous meme about reaching the end point and everybody thinks it's a straight path and it's a very secure, I am beaming to you from suburban Detroit Michigan.

I grew up in suburban Detroit Michigan. I'm a real trend center here six decades later, I haven't left but I did train the University of Michigan and conventional medicine medical school went down to Dallas conventional cardiology became a interventional stent heart attack cardiologist and that concluded training about 33 years ago.

But the only thing other than a really solid academic and clinical training experience was I bumbled into nutrition actually. Even before medical school I adopted what is now trendy to call a whole food plant based. I had a vegan diet, something I did in undergrad and I just enjoyed, felt great, knew nothing about it. But it led me on a path of reading about nutrition. When my friends, we're going to the U.

Of M football games, I was reading nutrition books and that just percolated along for about 20 years of course in the field of cardiology, being able to assist your patients and nutrition education and nutrition advice when data was coming on about the critical role of various nutrition patterns for heart health and longevity, it was very helpful to them.

And it became an increasingly big part of my practice while I was rushing in and three in the morning. And about a dozen years ago I said, you know what, there's a lot of things I don't know, I don't know my body well, I don't know the science of various fitness protocols and sleep issues.

And I went back to an integrated training, year long rigorous program. And that was about 10 years ago and I brought that into my practice until about seven years ago. I said, you know what I'm just gonna focus, I mean rather risky left a big practice, left the big hospital left a big cath lab and that's all I do now. I take the time to talk to people about their current status, very detailed testing to evaluate their inflammation and other markers of potential risk. And then put together a program for them centered around healthy lifestyle. And we got to use pharmaceuticals.

We use pharmaceuticals but we try and keep that pretty minimum. So I'm a real hybrid now and I've put in 15,000 stents. But I own the trademark prevent not stents because I strongly believe we're not reaching people young enough early enough with the idea they never need to develop most kinds of heart disease. – Yeah. Right.

Longevity, Genetics, and Lifestyle

So, um, there are a lot of variables that go into aging process and longevity. Can you give us your perspective on

the primary factors in both aging and longevity? – Yeah. If you read the science and I have to say, I read the science a lot, including today of what's up to date and aging and longevity.

And is it clear cut? We know all the explanations and we know the proper approach. Of course not. It's very much an evolving field. Some people indicate there's a famous statement, the genes load the gun, but the lifestyle pulls the trigger that you may inherit certain predisposition to disease and short lifespan, but with excellent attention to healthy lifestyle. You can overcome that.

And I do believe that how much is genetic? Some people put it as low as 8% of longevity, some of the more recent data can be as high as 40%. There's dispute in science, how surprising there's always dispute in science.

So you know, if your parents made it to a reasonably healthy 90 or 100 you're in a little better shape than somebody who lost their parents in their fifties.

You're not damned because there's so many exceptions to the rule. But there are longevity genes a lot of them do affect inflammation and our response.

Um and that's always a good factor. Uh you know, you're more of a brain guy and I'm more of a heart network guy. But there's a gene called ApoE four apolipoprotein E four and if your parents um should share with you one or two of the alleles are called.

But if you're apoE 4 your heart disease risk early in life goes up and your brain disease risk in life really goes up. So there's a lot of connectivity between the organs but that leaves between 60 and 92% lifestyle choices for longevity and maybe the you know, you can't do a randomized study.

You guys have a bad lifestyle, you gals have a great lifestyle will follow you for 50 years. Nobody's gonna fund it, nobody's gonna stick with it. What you do is you do observational studies and the best are from the Harvard school of public health And if you're around age 50 and you can say, I don't smoke, I get 30 minutes of exercise a day. I sleep seven hours a day.

My body weight is sort of in an optimal level. I eat a lot of fruit and vegetables, just better than average diet. You may get 12 or 14 extra years of longevity compared to a 50 year old. That doesn't pay attention to those.

That's studies about three years ago, Harvard School public health very similar to maybe the observations by Dan Buettner and the blue zones pocket of longevity.

And it's about family. It's about faith and it's about community and it's about food choices of which lagoons are the most common longevity food amongst all the planet. Yeah, it's about ideal body weight and you know what destroys it. The oldest woman in the world that's believed to actually have an actual date of survival is Jean Clement.

She lived 122 the last picture I ever saw her at 121 she had a cigarette in her hand. So it's people like that. They're the exception to the Harvard school of public health observations and findings.

So you know, we can't change our genes, but we always have the ability to study and upgrade our lifestyle and it's critical for the brain for the heart, for the cancer, risk for the diabetes, risk for generally just enjoying life.

– You mentioned that you are a vegan. Can people have good heart health on other diets. – Yes, probably, you know, and you can have good heart health on a terrible diet because there are always exceptions to the observations made in nutrition studies. Epidemiology studies.

You can smoke and live a long life again. These are always the headlines. Died at 103 and eight eggs and bacon every morning. But all we can do as individuals is take the mass of the data and the major trends and decide if we want to apply it or not.

So um the Mediterranean diet of course brought to the United States and books written by a famous University of Minnesota scientist Ancel Keys books very popular in the sixties and the seventies. I have copies of them in my library here in my office just a couple of feet away popularized the Mediterranean diet.

Less red meat, less dairy, no processed food, fresh whole foods, often vegetable based olive oil, not butter, red wine, not coca cola and exercise and community.

And that remains the most studied pattern. There's a version for the brain. Some people may now called the M. I. N. D. Mind diet that adds a few more brain friendly foods like walnuts and blueberries.

There's a version for high blood pressure called the dash diet That's lower insult than the average mediterranean diet, but they're pretty much all the same pattern when you get to junk food. We know that's not a good choice to process food. The common american western diet.

The controversy is the popular ones. Now the carnivore all meat nearly all meet the paleo, we mimic our ancestors and the ketogenic diet. And frankly in my opinion, strongly they have short term benefits for some people.

But to claim their longevity, diets is completely inappropriately not grounded in science. They're not traditional. I mean of course paleolithic diet is a traditional diet of 50 or 100,000 years ago, but we're not quite sure what that diet was.

Heart-Healthy Diet Patterns

It varied all over the world, just like there's different versions of the mediterranean diet between Greece and Italy and Lebanon and Israel and there are variations but uh I think it's it's not scientifically grounded to say I'm gonna put butter in my coffee and eat lots of red meat regularly and plan on longevity, somebody's gonna make it, but it's not one you put your dollars on in Vegas on the roulette wheel of nutrition choice. – Yeah, so I hear we have some pretty common guidelines and ranges, but some of the things that we want to stay away from are in agreement on most of these diets. – Sure, added sugar.

I didn't mention of course sugar, sweetened beverages, high fructose, corn europe, they're quite toxic and you know, a teaspoon is different than eight teaspoons.

So some people just need to completely avoid all sugar because they have more of a sugar addiction but clearly limiting it. I mean I essentially don't think I ever add sugar to any food I eat but you know it's hidden.

But you do your research, you get your sugar free barbecue sauce and your sugar free ketchup and your sugar free salad dressing. And you can dramatically diminish the amount of sugar in your diet. – Can you educate our audience on the different types of heart disease? – Yeah. You know the big elephant in the room as the expression goes is what is called coronary artery disease, more commonly known as hardening of the arteries. Atherosclerosis.

The fact that about 700,000 Americans a year die related to that illness usually as a heart attack or what's called a sudden death just found in bed found on the floor, in the bathroom and usually on autopsy there's very severe blockages were always born with clean arteries. Some animals just will not develop hardening the arteries, atherosclerosis, they have different physiology than we do.

I think dogs are an example of that. But we are we are a setup. We have a gut and a digestive system and a diet that I think again, predominantly a high saturated fat, high sugar diet will injure our arteries, other things will of course drugs, alcohol predominantly smoking high blood pressure.

Um but that is the big one. If we could make a dent, decrease the number of heart attacks, strokes, stance, bypass clogged arteries also throw in erectile dysfunction as a common manifestation of that problem, we would drop, you know, mortality and extend lifespan in the United States and other Western nations a lot. Um it's been the number one cause of death clogged arteries since 1918. So it's a sad tradition that for a 405 years, we've not been able to

knock that number down and get it off the list.

There are other kinds of heart disease. You can have high blood pressure without clogged arteries and that can be a killer. And you have to have a home blood pressure cuff and you have to monitor your blood pressure. There is no watch that's really reliable at this point for blood pressure. There are wearables for other purposes and like wearables, um, you can have leaky valves that weak hearts, you can have heart rhythm problems, irregularities, the most serious of which at least in frequency is atrial fibrillation, that can be a set up for stroke.

And then you have heart and brain disease Back as a pairing again, these are, there's more and more data over the last decade that what age is the brain ages the heart? What age is the heart ages?

The brain between diet and exercise and poor sleep. Poor sleep has erupted as perhaps one of the biggest drivers of inflammation and aging about the brain and the cardiovascular system. – Yeah, so, and that leads into my next question, which is the role of inflammation in heart disease.

– There have been observations really by pathologists I think. Bercow if I'm pronouncing his name right over 100 and 50 years ago that when you look under the microscope from an autopsy or even visually in a disease segment of an artery, there's a lot of components but there's a lot of white blood cells, there's a lot of signs of inflammation. And in the more modern era at least for 100 years, we know that the immune system plays a very important role in protecting our body of course in certain situations like infection but it responds to stimulation whether it be poor diet, poor sleep, smoking high blood sugar uh perhaps genetics and over activity of our immune system. So there's a panel of blood work that is different than the blood test you might get if you suspect you have a pneumonia, there might be inflammation going on and your doctor might check your white blood count or something called your sed rate, sed, for pneumonia.

But we have a panel of blood work for inflammation of blood vessels. The most famous is a blood test available every lab in the world called high sensitivity c reactive protein or H. S. C. R. P.

Heart Disease Types and Inflammation

And primary care doctors have been slow to adopt adding it to the routine panel but it's it's a role as a sign that you have excessive inflammation involving your vascular system, your blood vessel system. You have, you know, there's dormant volcanoes and there's active volcanoes, and when your hs crp blood test is elevated, you have an active volcano in your vascular system and it might be the clue to a future heart attack, a future stroke of future emergency, your room visit, or even worse, a sudden death. So, that should be a routine test.

People asked for. The hardest thing though, is it's elevated in many people and trying to track down why and what to do about it. What's your weight? What's your diet?

How's your sleep? Dental health is worth giving a shout out. People, particularly during the pandemic, have skipped two or three years without a dental exam without a dental cleaning. And gum inflammation is a huge driver of body wide inflammation and a huge driver of heart events, as well as other diseases, erectile dysfunction, diabetes, and dementia. So don't leave the mouth out the beginning of the gut. It matters a lot.

So, inflammation is a big deal. And of course, we believe in many brain diseases. Uh we share of course there's blood vessels in the brain. So, if blood vessels are inflamed, they're gonna be involved in uh you know, some people will call it a leaky brain syndrome.

The blood vessels are inflamed and allow toxins into the brain. When we talk about heart arteries, or leg arteries, or sexual organ arteries, the blood vessels get inflamed and may allow oxidized cholesterol and white blood cells to accumulate in the arteries and then you're starting to build blockage, starting to build narrowings, starting to build really.

Some people use the analogy, it's not a pretty one of pimples in the artery, you know, irritated, inflamed white blood cell rich areas and they may heal and resolve.

Probably do a lot, but then maybe, you know the trigger to why at three in the morning you can't breathe and your heart your chest is heavy and you're calling 911, you've got a very inflamed segment of one of your heart arteries.

– So you mentioned the brain and it's a good, good opportunity for us to bring in the mind into our conversation. And let me ask you for your perspective on the role of mind uh, in heart disease as well as in in longevity, – I'll quote one of my mentors, many people know the name Dr. Dean Ornish lifestyle doctor in Sausalito, California for many decades, who was asking questions as a medical student decades ago about the connection between the mind and the body and in his academic training that was, you know, downgraded is not a very much importance.

And he's famous for having asked his professor, we'll have you never had an erection, Is that proof that there's a mind body connection. It's a funny comment and I hope I didn't offend anybody.

But if you think about it, you realize there obviously is a mind body connection and I'll let women decide if they find any analogy they can create. There's a huge connection. You know, it's often quoted at the root cause of office visits to primary care doctors, unscheduled ones can be linked back to stress.

Some work stress, child stress, elderly parents, stress, spousal stress, finance, stress, creating maybe lifestyle patterns, binge eating, missing the gym, poor sleep grabbing cigarettes leading to disease or just that awful feeling.

We know when we're stressed, things ache, the back hurts, the energy is down and they may all drive, you know, doctor visits when maybe it'll come up.

So I'm not a specialist on childhood trauma, but I do take time with my patients. And even just yesterday, it just came out at the last minute. A very nice 55 year old man. No, I used to have three Children.

I only have two Children now and one of my Children died suddenly in sleep. And it led to a wonderful, warm but meaningful 10 minutes of conversation.

And you know, it's hugely meaningful to probe and discuss that. And of course it's a very approachable area. I mean whether it be through learning and meditation practice yoga practice a simple breathing practice.

There's devices. I just finished right before we logged on 30 minutes of something called a vagal nerve stimulator. I plug in my air and it buzzes away and it's a mind, body scientific based little wearable device. Um, you know, a lot of people find nature, a mind body booster, find exercise, a mind body booster, humor.

I think you and I both share, you know the fact that a good belly laugh, laughter is the best medicine isn't just a meme, it's true. So there's a huge connection and a lot of it's through just without being too obscure.

But it's that portion of our nervous system, the autonomic nervous system split maybe and maybe not so simple into the sympathetic fight or flight nervous system.

I've got a deadline. My spouse gave me grief today I'm hungry but your sympathetic, your adrenaline system is up, Your heart rate goes up, your blood pressure goes up, your blood vessels constrict your blood sugar goes up.

These things in a chronic mode are all adverse two good brain health and good heart health. And there is the other side and that's why I was wearing this vagal nerve stimulator is the parasympathetic rest and digest portion of our nervous system, longest nerve in the body from the brain down to the pelvis.

And we can train these things. It may be an app on the phone and maybe a meditative practice. Maybe a breathing practice. Probably the most impactful study I've ever seen. I'll give a shout out again when Dr. Dean Ornish did a series of studies called the lifestyle heart trial.

Everybody in the active treatment group was trained breathing and yoga and meditation and he documented without question reversal, plaque and heart arteries.

But there's a Professor Richard Schneider, MD in Iowa affiliated with something called the Maharishi Institute, but also the university. And he did a randomized study of a couple 100 survivors of a heart attack and survivors of a heart attack go through a process called cardiac rehab or exercise. But half of them were taught a meditation actually specifically transcendental meditation like jerry Seinfeld and Howard Stern And half of them were taught just a breathing practice, but not formal meditation.

Mind-Body Connection and Stress Reduction

Five years later, the heart attack surviving group that taught transcendental meditation were 50% less likely to have a follow up heart attack standby passer death medications rarely offer a 50% reduction. And this was published in 2012 and one of the most premier cardiac journals. But if you think most heart patients are told about it, of course not. It's it's something they stumble across or well listen to this conversation and something I bring up with my patients.

– So, you know, this is very helpful, very useful information. And you know, reflecting on my last um, physical that I took a year ago, I was very surprised that my uh, systolic blood pressure was elevated into the high one thirties. And I was further shocked that in my conversation with my primary physician, the only thing that she suggested was let's wait and see what happens essentially. Let's see if you'll need medication at some point in the future and didn't give me all of these alternatives that you and I both know are some things that we could do to make a difference.

I am, you know, a bio pro biofeedback practitioner and I wound up doing biofeedback and some other things and brought my blood pressure down. But I'm I imagine and based on our conversation that if someone like me comes into your office, you have many of these different suggestions and tools that you would give them.

– Yeah, there's a huge number of natural approaches to blood pressure and you know, you come in at 200 over 130 you're gonna leave with a prescription while we work on some of the natural of course we want to do advanced blood work and maybe a simple test like an E.

K. G. Or an echocardiogram. You might be very deficient in vitamins and nutrients, you might have the kidney problem, you might have a low protest and so you got to do basic good medical practice that your primary care doc can do. But if you get beyond that and say, are there natural ways? One observation is and it's just since you brought up your example the American heart association teaching on home blood pressure measurements, which I would advise everybody to get a home blood pressure cuff on the upper arm.

Just hit a button. The cuff goes up and down. It's a $70 Investment that can change your life as much or more than having home scale or a thermometer oxygen meter that many people bought.

Get a home blood pressure cuff. But the official recognition is always check your blood pressure three times in a row a minute apart. And I have all my patients do that now. If the first time you check it, it's 108 over 68 kind of perfect, you can probably stop.

But if you're 1 50/96 1 minute repeated, wait one minute, it's very often 1 20/70 and it's just like a little biology lab of how wired we are to have reactions are sympathetic nervous system.

It's like when I smell alcohol and see uh cotton swabs, I think of being a kid in the pediatrician office. I bet my blood pressure goes up. It's just like almost automatic.

I think when people hear the velcro and feel the pressure the first time around, it's a little stressful. So our nervous system is very quickly responding and can very quickly relaxed. But infrared sauna weight loss exercise.

Maybe you need a home sleep study and maybe you need some attention to sleep apnea, improve your dental health. Stop using mouthwash. People that's stop using mouth wash their blood pressure drops or at least the mouthwash with antibiotics in it like Listerine and scope. These are published data, um, upgrade your diet, have a green smoothie, grab an apple, have some pomegranates, Eat some beets, have some ground flax seed, ground

flax seeds in my world, A super superstar and lowers blood pressure.

Eat more garlic, lowers blood pressure. Um you know, use biofeedback, use heart math, use a vehicle nerve stimulator. There's a breathing device. It's a little expensive called respirator, but it's a slow measured breathing that balances your nervous system.

Many people can avoid prescription drugs or limit their prescription drugs or get off but you have to do it very carefully work with your natural or standard practitioner.

I use a lot of our diabetic herbal preps for blood pressure. They might include ashwagandha and backopa and they have science behind them. I mean I literally could keep on going with you know, boost your nitric oxide.

Some of that can be done through food like beets and greens and pine nuts and watermelon. But there's literally dozens of nitric oxide powders and lozenges.

We interviewed one of the world's nitric oxide experts recently for a project. I'm doing so. A lot of my patients, including my 90 year old mother use a little nitric oxide loss and ship it really smooths out their blood pressure.

– I appreciate all of these different types of approaches. They're really they're really excellent in giving our audience of some some good suggestions. You didn't mention some specific um lab tests, but I'm wondering what about ct scans of measuring calcium, things of this nature. – Right?

So just as a intro, if you think about it, you're 45 or 50 and you and I are a little past that Dr. Sideroff. But we can think back and your doctor might recommend the mammogram. If you're a woman, maybe a thermagram, maybe an M. R. E. For breast issues, a colonoscopy or the stool test called a koala garden.

But wait, wait, wait wait. Number one cause of death is heart disease. You walked out of there. And other than routine simple blood work. Where was the discussion about screening for heart disease?

In reality, we have really missed the ball in the western world, the entire world because for over 30 years there's a technology called a coroner artery calcium ct scan or calcium ct scan. It's about a 12th test where you're at a hospital or imaging center on a stretcher.

You're in a ct scan. No ivy, no injection, no iodine, no pain, no scare factor. And you hold your breath and then you go home. And it's very odd that in most states it's not covered by insurance.

It is covered in uh Texas. It's also free in the city of Cleveland, which is crazy in my community of Detroit. It's about $75 in some communities in California. It can be 100 and 50 to 200.

Blood Pressure, Testing, and Natural Approaches

There's still taken in a little more profit. But you want to that's a screening test that's the colonoscopy of the heart. That's the mammogram of the heart.

You don't do it if you had a bypass a stent or a heart attack, you don't need a screening test. But certainly if you had a mother, father, aunts, uncles, grandparents, brothers, sisters who have had a stent to bypass a stroke, a heart attack. If you just want to know you want to be a zero.

I mean, I'm 63 64 I've been a zero. Uh, about every 10 years I do that test. It's pretty good information gets me a discount on my life insurance because the actuarial is know that I'm not going to be in a coronary care unit.

Uh, and an expensive Admission for a heart attack because I take the time to check my arteries. Coronary artery calcium scan. Very rare reason not to do one unless you already have heart disease and maybe never again, maybe do it once at 50, maybe 10 years later.

It's a little abnormal. You got a little problem if it's a lot abnormal, it can be life changing and potentially life saving. – That's those are good points to know.

I'm curious. We can think about prevention, but I'm wondering if people find that they, for example, have a high number on that or some other indication of, of some heart disease process?

That's that's ongoing or beginning. What's the data on reversing any of these kinds of conditions. – Yeah, it's a great question. I absolutely can say uh as a cardiologist who may have seen more examples of heart disease reversal than almost anybody because that's exactly what I do in my clinic. Usually I use as a substitute an ultrasound of the carotid arteries because then we don't have to do a ct scan ultrasound.

We identify how much plaque garbage we do it with digital imaging, artificial intelligence interpretation. And a year later we asked the question, you got older, are your arteries worse better or the same? And we see example after example, lifestyle changes, uh nutraceutical vitamins, maybe prescription drugs.

And we see plaque shrinking plaque shrinking. In reality, we have to give a shout out to Nathan Pritikin, the Pritikin Longevity Institute for identifying clinically in the 1970s and 80s that you can extend life with lifestyle programs. Dr. Dean Ornish who used invasive cardiac catherization to show you can actually shrink plaque over a five year period and improve blood flow dramatically. Dr. Esselstyn at the Cleveland clinic.

We are at a time though, it's very exciting and a revolution. The corner artery calcium ct scan I mentioned is a great screening test but we have no scientific basis to believe we can make the calcium go away.

In fact, the current feeling is the calcium is the stable part of an abnormal artery. The calcium is the mortar and the brick holding the pathology together.

There's a kind of plaque called soft plaque. Non calcified plaque. Unfortunately you can't see it on that simple cT scan. You have to do a more advanced cT scan in your town.

You do it at U. C. L. A. At cedars Sinai at harbor at the world class. But anywhere in United States you can now characterize you do have to inject dye when you get the ct scan it's a little more radiation. But the the results show you exactly using artificial intelligence, how much plaque is in your heart arteries, how much is the soft mushy kind? How much is the hard calcified kind?

And we now have examples in 2021, 2023 of actually documenting to precision shrinking a plaque, shrinking a plaque shrinking a plaque. Very exciting times. And these are all published in large databases.

So we've never been more confident in saying you can shrink plaque, diminish your heart disease, lower your risk. It takes very low cholesterol levels which can be achieved through diet but often do require either intense supplements or pharmacology.

But it's it's really transformed the way I approach disease. In fact the current language, this is very new is you know if you're diagnosed with cancer unfortunately are you Stage one, Stage two. Stage three, Stage four, we're now able to address and use that language coronary artery disease Is your plaque? At which stage?

And these are still algorithms getting finalized. But the language has transitioned and obviously will approach a stage for heart blockage patient more intensely then we will stage one will treat them all but exciting times.

Very hopeful of course prevent that stent. You're far better off not having the disease and not having to worry about reversals. So the earlier you get on the bandwagon of a healthy lifestyle the better you are. – Would you if someone has a zero on the would you then recommend the C. T. A. Is that very very well rarely?

– There there is scientific examples of people who have no calcium so there's zero. But for some reason we're still concerned they have symptoms. Maybe their stress test was abnormal and very rarely you'll find somebody who has only soft black, they're usually younger.

Maybe a smoker. And the calcium score will mislead us. So you still have to talk to your patient listen to your patient and I as part of a research study I was a zero but I went on to have these artificial intelligence, coronary ct angiograms. I took one for the team because it was a little radiation I didn't really need and it just confirmed clean arteries.

So I was pleased. Pretty much absence of any plaque of any kind. And I'm a good calling card for lifelong healthy lifestyle does actually matter because I've been doing this for a long time but it's pretty rare when you're a zero.

Don't go out and celebrate with a cigar and a hot fudge sundae. But you do need less intense lifestyle modification or you certainly rarely need drugs. If your calcium score zero, you don't need statins. American heart association says if you get a calcium score and it's zero and let's say your cholesterol is 220.

The cholesterol medicine your doctor gave you may well be unnecessary. That's a radical different approach than is done in most clinics. But it is already incorporated into the language of the Canadian heart association, the American Heart Association. – We've covered a war Wide range of areas here.

But is there anything that we missed in terms of lifestyle measures to lower inflammation? – You know, there's a couple of simple tests people can do that are in the scientific literature. There was a study out of Harvard published about two years ago that if you can drop down and do 40 pushups in a row versus not being able to do that 30, 20 or less than 10.

It predicts your next 10 years of heart healthy lifestyle as well as a stress test or other measures. So when we're done with this interview, everybody can maybe with knees on the floor or maybe you can't do it.

But if you can run four flights of stairs in about a minute, it predicts exceptionally low risk as if you had a formal stress test, There's actually one, if you can do 30 squats in 45 seconds.

All these have been studied and compared to other formal measures. So that is not directly inflammation. But they are useful and easy to do. There's actually interesting data about handgrip strength that you can actually buy online a little hand meter if you really want to see a number or you can buy those, you know, muscle strengthening, handgrip spring devices.

Heart Scans, Plaque Reversal, and Risk Assessment

But as you get older, hand grip strength is a very good predictor of frailty muscle loss, uh increasing morbidity. So pay attention to these little things and then finally I just say blood work. We we, most of the time in the doctor's office do the exact same blood work we did 30 40 years ago.

But there's a whole advance available at Quest and Labcorp local hospitals. We mentioned one your high sensitivity c reactive protein. I'll just mention one other.

There's a very inflammatory cholesterol particle called lipoprotein, A. L. I. P. O. Protein and a is a lower case a in fact at some time Red is lipoprotein. Little A.

And in the last 60 years since it was discovered, we've learned that about 25% of people on the planet get from their parents the ability in their liver to make two kinds of cholesterol. The regular one, your doctor's checking but this unique one called lipoprotein, a completely genetically determined But I want to go back 25% of people, you know, that's maybe 90 million Americans and 1.5 billion or plus worldwide. And this particle which you will start making from childhood, your entire life is inflammatory as all get out, causes blood clotting and causes irritation of arteries leading to plaque.

It's about a $30 blood test. Only in the last couple of years there are now societies recommending like the European society of Cardiology, everybody should have this check maybe at age 20 once and modify the lifestyle.

If you find out you're in the 25% eat better, move more, stop smoking, get your body weight better. But I've been

ordering these uh this lab for about a dozen years, literally thousands of patients.

It's amazing how it has an impact potentially on your heart health, not having it as a good thing. We don't know any benefit to inheriting it. That's a interesting question of our makeup. But we do know that in some people that can determine your lifespan, your risk heart attack and stroke.

So get a lipoprotein, a inflammatory particle blood level. – So one of the things that is being highlighted in our conversation is the importance of awareness is different awareness is like of this genetic awareness of your calcium, awareness of uh different blood levels. All of these things are important for people to be aware of. So that they know how the kinds of changes they may need to make in their lifestyle in in their lives absolutely.

– You know, somewhere there's a quote about, you know, knowledge is power. Uh and I would say applied knowledge is power. If you find out, but you don't do anything, then it didn't really alter.

But that is really again, you asked me as heart disease reversible. It's preventable and reversible. The majority of people, it's much easier if you start early. I mean, if you knew at age 40 and that's late, but that you had some calcium in your arteries or your lipoprotein, a or your c reactive protein.

Um or you, you know, spoke to your mind, body balance is off and you're living in a chronic high stress situation. Make the changes, get on board and use mind body practices. You know, the number one symptom.

This is a very profound statement of atherosclerotic heart disease. The number one most common symptom is sudden death. Yes. Some people get short of breath. Some people get chest tightness called angina.

Some people feel weak, but being dead is the number one most frequent first symptom. So waiting to get a clue can be a very, you know, adverse lethal and sad choice.

We should be much more aggressive. And the good news is the heart cT scan can be under $100. Go to Cleveland is free at the university. The blood work can be covered by and insurance. Um, eating healthy isn't expensive, breathing isn't expensive, Sleeping 7.5 hours isn't necessarily expensive.

So this is not a lecture for the elite. This is a mass attack on lowering heart disease fatalities. – Yeah, yeah. These are very good points. And unfortunately from a psychological perspective, people wait until symptoms get to the point where they must do something instead of earlier on, where they get some symptom and now they begin to ask themselves, what can I do differently? And that's the earlier you catch symptoms and I'm hearing you say something very similar. The more benefit you're going to get by, the changes you make. – Absolutely. I think people credit pythagoras was saying, don't dig your grave with your fork and your spoon.

That's one comment. And I like that one so much. Of course he's also credited to have been one of the first plant eater, vegetarian vegans going back 2500 years ago or so and you just don't want to wait.

You wanna you know, that's why I wrote a book all dead execs don't get bonuses. My wife said, you can't put that title on a book. I said, I don't want a gentle title. I've seen people die in my 33, year career of cardiology. I've seen tragic, we've all seen and I think we're seeing more than ever, sadly younger people with tragic sudden death. So we can't stop them all.

But this conversation can do a lot. Just people have to listen and act ask your doctor for some of these testing? Read a book, go online and study this a little bit more. – So what are some pharmacological therapies to lower inflammation. – A lot of people are low in omega three.

I didn't mention yet another brain heart overlap. The number one most common nutrition deficiency in my clinic is omega three. There's a blood test, there's two of them. One is called the omega check and one is called the omega index. They both work.

Um So upping your omega and no human makes omega three. So we either have to eat salmon, sardine,

mackerel, gs, seeds, ground flax seed hemp parts walnuts. Or we take omega three or we do all of that.

Uh good at lowering cholesterol, Good and lowering blood pressure, good at lowering inflammation.

Inflammation Markers and Longevity Strategies

Um You know, a whole brightly colored rainbow fresh fruits and vegetables rich in antioxidants and plant nutrients will lower inflammation. A classic study at Yew York University, 100 patients after a heart attack, put on a brightly colored plant vegan diet are put on the American heart association diet.

The plant diet lowered inflammation more than the American heart association diet. Nobody was eating KFC buckets. These were already better than average diets.

Um lowering inflammation, vitamin D. Maybe to some degree. We always know shoutout turmeric curcumin um may be very helpful in certain people lower inflammation. I mean addressing the root cause.

Are you overweight? You need to do some kind of fasting? Uh We maybe don't talk enough about something called the pro on five day fasting mimicking diet which is available as a food product that supports Lowering inflammation levels and has some brand new data about its impact on preserving brain function and cognitive function. So you might have to use some fasting programs, you know, address the sleep, address the dental health, you'll see inflammation come down biggest one. The United States, 75% of people are overweight or obese and a roll of fat around the waistline is a very inflammatory physical structure. That's medical science and healthy weight loss, not crash diets and probably not an all meat diet but healthy diets.

Mediterranean diet reverse a lot of that. You know the Mediterranean diet is a very anti inflammatory diet. – Well, I'm appreciating this conversation very much. It feels like I have a direct link into the Journal of the American Medical Association with all of your great references that that you're giving us. So I appreciate that as a final the question I just wanted to check in if there's anything in the area of longevity other than what you're working on. That's very exciting to you that you want to share with our audience. – I think you know from my perspective the most important step in living a long healthy life begins with the cardiovascular health and you know, you can be taking I can name you 50 supplements from N.

M. N. N. A. D. The nicotine a mite riverside too, sea buckthorn and on and on that might resveratrol of course. But if you don't know your calcium score and your c reactive protein and your lipoprotein a and maybe the health of your carotid arteries. Um you know those supplements and even the prescription versions Metformin, Rapamycin, descenteb.

These are drugs that are being used in certain clinics as anti aging. Don't fool yourself. Check your heart first. That's the best longevity program. The proven longevity program.

The blue zones, mediterranean diet, Harvard School of Public Health lifestyle lessons we've learned and if you have optimal cardiovascular health then maybe adding on some of these longevity programs may be beneficial. I'm in a double blind randomized study of a drug called Rapamycin. I'm a participant.

I don't know if I'm getting a placebo for a year or I'm getting a active drug. This is a FDA approved drug for kidney transplant patients to suppress rejection.

But in a very low dose there's very hopeful data. It may be an anti aging drug. Most people feel it's probably the most hopeful drug but I don't prescribe it to my patients.

Newsletter, Practice, and Closing

I invited them into this research study and a couple have entered but it's a pain I'm getting blood work all the time. I'm getting texas scans and I'm doing stool.

It's a real research and I wanted to contribute and I may say I did a lot of stuff and all I got was a placebo for a year but that's how science goes.

So that's probably the one that I would give a shout out to as cutting edge, but we need research. So I'm doing it the way I think we ought to do it in randomized studies. – Yeah, I agree with you.

This conversation has been really very informative. Dr. Kahn I'm wondering I enjoy your newsletter. If people want to reach out, get on your mailing list, get your newsletter which has huge amounts of information or reach you, how can they do that? – Yeah, If you go to my main website, DrJoelKahn.com and that's D R J O E L K A H N dot com at the bottom of the website, there's a place to put in your email and get the newsletter not selling anything. And it comes out once a week, like you said at the top of the website is a link to a weekly podcast I do on Itunes and Spotify called Heart Doc V I. P. It's Under 25 minutes every week because my sanity only allows short podcasts and my listeners seem to appreciate short podcast and certain books that I've written are listed there too.

So thank you for that. And I have an active practice. I mean, I beat myself up seeing people from all over the world, it's busy. But if you've got a clinical problem licensed in California. We discussed that and all over the place even though I'm centered in Michigan. – Well, thank you very much.

And it's good to know that you're there and doing such good work. So we appreciate your time today. Thank you. – Thank you. A total pleasure.