Guest Introduction and Background

For this doctor talks. We have a fabulous guest, Doctor Marion Xavier. Great. Or doctor Z, as she often goes by. She's triple board certified physician in internal medicine, geriatric medicine and obesity medicine.

And she's the founder of Virtual Wellbeing. M. D., a clinic clinic that offers comprehensive, holistic and personalized care. She's also the author of several books, including the three G cycle of Life The Secrets of Achieving Joy, meaning, and Well-Being.

Thank you so much for joining me. Thank you so much for having me. It's a pleasure to be here. And we're going to talk about, I think, a variety of things, but mostly like what does this comprehensive, holistic approach to weight look like?

And, and how do we get there? So let's start off by talking about the importance of a 360 degree approach to obesity medicine. How do we integrate physical and emotional well-being into our approach to helping people with weight?

I love that question because I believe that that's the secret for really achieving the goals. For our biggest theme that is Patient doctor Ride is like, we are we are team with our patients.

We want the best for them, but we cannot separate that patient from the reality where he or she is. And we cannot separate them from their background, from their genes, from from anything we that they need to be seen as holistic, right?

They are a human being with feelings with, a specific, I don't know, taste for foods that they will like the way that maybe at a specific job with a specific a that they cannot change.

Holistic Obesity Care and Precision Medicine

So these idea that we can set a protocol that will help all our patients, is actually if it's not a reality, we need to see that individual in front of us as a unique individual with unique characteristics.

And we need to be flexible using what is, you know, in our box of tricks, to use what is appropriate for the patient. And that can go from the most traditional part of medicine to the most, new or not typical, aspects of medicine that we are seeing right now, of a level I love that. Yeah.

So everyone's an individual. Right. And so we often see like, these one size fits all approach or people going on and on about what worked for them. And at the end of the day, the reason why it doesn't work for everyone is we're all individuals.

So sometimes there's this term precision medicine that we're hearing more and more, and it tries to accompany that. Can you talk about what precision medicine is and how that might play a role in the treatment of obesity, or in helping people lose weight?

So precision medicine really means that we are creating a formula medication, self-love math. Right. That is created based on the characteristics of this patient.

For example, I go to the I go today to a store and I want to get a probiotic, to be satiated. This is real story. Right. And I try to select from 27, you know, 30 different bottles with different colors and flavors.

Probiotic for myself. The truth is, I have no clue. I will not be able to select one, and I will not be able, therefore, to

order one for you. Except that I know exactly who I am.

What do I have? What are my symptoms? And I have the ability to test. For example, for my gut flora and then create something in, you know, in an appropriate legal, pharmaceutical department that will fit specifically my needs.

That will be very different of your needs. So precision medicine is exactly that to create a formula that fits my needs. And that is is created based on laboratory results.

And it's also created sometimes in DNA testing and of course in the symptoms and the priorities and the specific characteristics of the patient. So can you tell us a little bit about where we're at with this technology.

What do we need? We are doing it. I am I have to say that I have been a physician for more than 20 years, in two different countries. I have three specialties internal medicine, ethics and obesity medicine.

I'm triple board certified, for first time. In many years of practice, I feel this new excitement of being able to really treat my patients. I am not treating populations.

I am not written by protocol. I am able to say, oh my gosh, this lady that's sent me the complete, you know, vitamin saying they need only vitamin C, why they have to pay for the complete bottle, introducing the body things that they don't need at the end.

They are, you know, chemicals that you are adding to your body that you don't you don't need to put there. And I can say, okay, this is for her or for him, and this is good.

That's how I will treat the patient. And that's exciting. It's truly exciting. So give us can you give us some examples of that technology. Like what?

What are you using. What specific tasks or how do we get that information. Yeah. So for example, we probiotics example of probiotic is real. I right now test majority of my patients for gut flora.

There is a way for gut flora, for those that don't understand the connection between obesity and gut flora, is that the gut flora, the bacteria that we have in our gut, actually acts as the gatekeepers, right?

Those are the ones that, yeah, opened the gate. So some of them will just come in and close the gates. Some others will not come when we don't have an appropriate gut flora.

We don't have enough bacteria and we will have different type of bacteria. We will have this collage of different materials. We may be missing the opportunity to observe certain things, or the amount of things that we need or to metabolize, which means like kind of digest some of the foods that we are eating.

And that means that we are interested in our body elements that we may not need or we are not introducing into our body elements that we need. So when you are able to test for the gut flora, you have the leaf of your bacteria, right?

That is what I get when I do this testing. I will see that little bacterias, the good ones are not good. The ones that probiotics, right? The ones that are neutral.

What will happen is I will have a conversation with the team that produce the probiotic, and I will be able to say my patient is sensitive to these things.

So please make sure that nothing of this goes to the in the bottle.

Custom Testing for Gut Health and Nutrients

Right? Because I do a sensitivity test. Also, these are the bacteria that are missing all the bacteria that we have to much. We need to remove a little of this.

The goal of my patient is not only to lose weight, but you know what? My patient also has high cholesterol. The glucose are high. So I want to make sure that we are assuming this also in the in the list of, you know, priorities on the probiotic is create that the probiotic is created then sent to the patient.

And then you can actually few months later you can check again the gut flora and see how how there is a change. And I have been and I need to say, because I didn't I started medicine 20 years ago with this.

So at some point I was naive and I will say like baby, like, oh really? This will work. But it has been positively press, right? To see that this really works.

And my patients have been losing weight and in for other cases like abdominal discomfort, sometimes more disorder, etc. it has a value to. Yeah. So powerful right.

Because like you said in the beginning, there's a lot of probiotics on the market. And the problem is the gut microbiome is really, really complex. There's millions, millions of strains, right?

I mean, there's like lots and lots. And so, to know which one makes sense for any individual is a guessing game, right? I will I will often I do not do the advanced testing that you do at this point.

And I'll often tell people like it's a guessing game, right? Like let's try this one and see if it works. And we're kind of trying and seeing how people feel.

And then of course, just optimizing their nutrition and making sure they're setting up their environment for a healthy gut microbiome. But so to be able to actually do this testing and custom make a probiotic that works for people is pretty powerful stuff is is is not only, powerful because give you the information that you want, but really long term really reduces the cost drive.

Sometimes people feel that, oh, I have to pay this out-of-pocket, which is the reality here, right? The insurance will not pay for these things. But number one, the cost not necessarily are as high as some people imagine.

And number two, is that how much money are you investing in your appointment with different doctors and the colonoscopy? The I don't know, the probiotics, the different probiotics that you try and they don't help you.

And now I'm changing. I love the yogurts on my diet and I am miserable. I'm making days that deals because I don't feel good. Right. I performance I work is are horrible.

I have a fight with my husband and not being able to play with my kids, right. Because I have this discomfort versus invest in our health investing and getting information, clear information that will guide us.

I will say 100% secure right now, nothing in life is 100% secure. But at least we'll reduce a lot of that. What if, maybe. Yes. It's like you have better quality of information to take educated, evidence based decisions.

So that was a great example. What other other, things that you are utilizing for precision medicine. Oh, right. That means again when you go to the regular doctor.

Right. That that healthy, that regular doctor, if we can call it like that, that traditional doctor, before you, you will get your vitamin B12, for like maybe or their by your primary.

And it's not that he doesn't want to do it, it's just that insurance normally does A B and vitamin D right now he's kind of like oh my gosh, you need to fight for it.

Because there are, you know, different insurance, concept or as part of the, the annual sum etc.. But the reality is

that we need vitamins and we need micronutrients, right?

Iron ore, calcium, magnesium, manganese. And as part of, our way to produce the hormones never or most neurotransmitters, if you want to call it like that, that keep us functioning, for creating serotonin, for creating energy in our body, for creating anything in our body.

We are not plants. We can not produce our own food, internal food. We the band of nutrients that come from outside if we are not being able to absorb them because we have, again, inflammation in our God because we are picky.

That's like me, right? I am vegetarian, I will not be able to absorb seven six. I am not even consuming that right. Or you have any a specific medical condition, Crohn's disease, that affects your gut or you are taking some medications.

This is something that is even over the counter, right? That may affect the absorption of what you are eating, but will happen is that you will be missing important pieces to create the elements that you need to function and your higher what that shelf.

We will not have necessarily a disease. We will not get this size sick, but we will know that we are not. Okay. You will not be able to pinpoint what is missing if you are not being able to test it.

So right now, I have the ability to test not only the complete list of vitamins, but macronutrients, amino acids, to create the supplement with those replacements.

What is very cool is that if you go a little more in deep, you start using this technology of DNA testing. There are some conditions. One example is a mutation in a gym that allows you to observe, for example, B12, for lay, but doesn't allow you to use it.

So you have it normal, but you don't activate it when you can have depression, anxiety, insomnia, neuropathic pain, which is a thing of seizure or border sensation, for example, in your feet.

Anemia, fatigue, among other people is trying to doctors are trying to treat all these problems, but you have something that requires only to receive the appropriate vitamin in a situation that is already access.

Right. Those things, right now are available for us. We can find those things, we can help people without overusing the healthcare system. Right. And having, again, admissions or testing or test things that are not needed because we are just using Band-Aids to cover symptoms instead of really fixing the root cause of the problem.

Right? Yeah. Taking the time to go just a little deeper, maybe investing a little more time, a little more money, but finding the solution that's more likely to solve the problem as opposed to just guessing.

Or you mentioned before, you know, like you could just go buy the whole thing of multivitamin, right? Which is a popular strategy. And I'm sure someone listening is wondering, okay, well, but like, why not just take the whole multivitamin then, right?

Why Multivitamins Can Be Harmful

If I could be deficient in one thing, is there any harm or like, why not just take a bunch of all of them just to be on the safe side? That's a that's a beautiful question.

And I have that conversation once, here at home, with my husband. Right. Who is curious how his notification and the realities of in there you could thrive.

But that love seems that they can by that means has not harm. And that is not true. Taking vitamins may harm you. From something as simple as using too much vitamin C could be a little erosive for you, for your stomach.

Ankles extra. That's right. You said you don't need because you don't need that vitamin C extra. Right? So something a little more complex with vitamins that are not eliminated with the urine.

But actually if they in our fat areas in the body. Right. And that could cause a lot of problems. And one of those is actually vitamin D that is again over the counter.

We have access to a lot of vitamins that could cause very negative side effects. So having low or having too much of certain, you know, nutrients even they are not trans.

Right. And look like, okay, it's good to have nutrients in your body. We cannot overdo it either is is not good. And even if we brought the we know in medicine, right.

That is great to use broth is important for your muscles, right for your strength, for your body in general. Too much for all things, especially the wrong individual.

Call cause problems in the kidney. Certain, micronutrients of calcium or others may cause, the stones in your kidney if you are the wrong individual. So it's a little more complex, than what?

You know, the pharmaceuticals will make it look right. Even vitamins could be dangerous for your health if you abuse them. And if you use them in a non appropriate way.

Yeah, I think it's a good point. Right. Like. And that's why knowing which specific vitamins you may need to supplement makes more sense than taking just a bunch of all of them and guessing what you might need.

And again, some of them do have like known side effects, but we also don't know if taking a bunch of extra B12, for example, when you don't need it. We don't we don't know if that could cause some harms down the line.

And they're starting to be more stuff saying like taking super doses of these vitamins that we don't need. Like it could have some consequences. It could cut. Yes.

And let's face it, today we know things that we didn't know 20 years ago. Today, we had these continual FDA medications that were super well approved, fun, well know, and that many of us prescribe in the past up today.

You will know better to use that they are not even in the market. So things that were okay, more than okay, FDA approved. Have it remove because we found later that they may have side effects, that they may be very bad for your health.

So again, for things that are not FDA approved, I am even more careful because nobody really is testing those. And nobody is doing the false reset, study when they are in the market.

Our body is a very complex machine. Right. And we need to respect our body. We are a very sophisticated machine. We we have an electric system in our heart.

Our brain has also some type of electricity step that is different than the heart, right? That goes through all our rest of our body. We work with changes in pressure of how much sodium you have here, so you have less here. So let's move water there.

So obviously, an engineer might enjoy tremendously looking into the different mechanisms of our sophisticated machine. You will not go on messed up with your car if you don't want to.

I don't touch my car. I will be a pair of just touching my car. Forget the computer. So what if someone will come and play with this important, sophisticated machine that keeps us alive?

You know, that that allows us to work, to do love and joy.

Mental Health, Burnout, and Weight Loss

We need to be a little respect ful. We are sophisticated. I like I like your perspective there. We started off talking a little bit about, both the physical and emotional side of things.

Let's get back to that a little bit. So tell me how you address both the mental and emotional components of weight loss and obesity treatment in your care?

So stop there. All my patients, receive testing for depression, anxiety and emotional distress. I'm testing for burnout. Now I am incorporating that paternal or maternal, burden, with, Because if you do, you are not burnout that work?

Probably. Or burnout if you have a few kids at home. And resilience and well-being. I do this to identify the characteristic of my patients beyond their weight and their cholesterol.

And, you know, glucose levels. It's not the same to try to do diet and exercise when you are very resilient individuals that maybe single, that is, you know, has a specific type of job that is the best of both ever.

But, the same to an individual that has 3 or 4 kids at home and maybe one of them has a disability, doesn't have the best salary and, and needs to have a second job is totally stress emotionally exhausted that burnout.

Right. Or depressed? Go up to the gym five times per week. Please do not eat nothing that you love, right? No chocolate? No. Come this little big. No.

But, only lettuce out of the those, you will not get the same results, right? Because the emotional aspect and the social aspect will create a difference on how much you can follow through this love.

How feasible are those plans for you if you are very depressed or you are seriously burnout? I need to start working on your mood and your levels of energy before I even try to send you to a gym.

Because what will happen is that I am setting you to failure, and failure means that you will feel frustrated, and instead of being open to keep trying, I am really creating more and more fear of failing again.

So I am just market 19. I am you know. I am isolating you of the opportunity of of improving so we can not. And I gave this as an example. I didn't want to bring the theory behind that, but this is the best way to describe what is possible and what is not possible in, in, in real life.

Right. That's what happening in real life. In real life, you are not only obese, you are an obese person that also has a life that also has the bills to pay, that may be crying every night because you love someone that you love.

Okay, so the we care about your diet or the we care about your mood. Do I help you with your mood? So now you have the will to really go to the gym to really reduce your your pieces of chocolate cake that they are to keep going in investing time and effort in money?

Why not right in your physical health? I think it also shows the empathy, right? Because you you care about that individual. You don't care about his weight or her weight.

You care about how that person feels, and you care about that human that is in front of you. Yes, I it sounds like we do a lot of things similar there.

I always like to start off with what I call underlying causes right before we figure out how to treat weight, we have to figure out those underlying causes.

And I think that's getting missed a lot with the popularity of new medications, which I'm totally behind and utilize. But I want to know what I'm treating for.

Sometimes what I'll say when I'm teaching other doctors is if someone comes in and they have ankle pain, I'm not just going to tell them to take Advil, right?

I'm going to get a history about their ankle. What happened to it? How long is it hurt? Did they injure it? Where does it hurt? What have they tried? Like, I'm going to get a whole thing.

I might get an X-ray. I might do an exam. I'm probably going to do an exam. Right? I'm gonna figure out what is causing the ankle pain before I figure out what to do for it.

Right. If the problem is that they're, you know, wearing bad shoes, like, that's a very different problem than they fell and broke their ankle. Right. And so I think same thing with weight.

Like, what are the struggles? What is the story. And if it's really depression or anxiety or stress, we can't put a Band-Aid on that. We can't just give them medication.

It might help, but you're still going to have the depression, anxiety, stress. And if we didn't give you any tools to deal with that, the medicine's not going to do as well as if we actually helped with the underlying causes.

And there there are reasons for why things are being done so wrong. Number one reason is Doctor. So a typical doctor in a clinic, right. Is seeing patients every 15 minutes.

I, I can testify that at least, you know, in my modality of care, 15 minutes are not enough to have a conversation with someone that has been dealing with a chronic condition as obesity that has been discriminated, that has been maybe bullied, that has been, restricted to doing things because that's part of the situation. Right?

This is not just way, this is not just your size. Is this is a there is a social emotional component that comes with the problem of like so 15 minutes appointments are absolutely inappropriate.

Then you have the other side. That is the business side. Right now everybody absolutely everybody wants to be an obesity specialist.

Treating Root Causes and Patient Advocacy

And I am not talking about, these but I know right now in the group also, they, they will have gynecologist prescribing GLP ones, and then you have, you know, all their other healthcare professionals blame to also, that diagnose and prescribe things for, for these.

And now you have these clinics that you just kind of do are so long and not many questions are oh GLP one for you connoisseur with your thyroid, but who cares, right?

Get the TV up. You want to pay me? The truth is that we are creating false aspect ratios because, as you were mentioning, not only that, we are, using a bad day, but, as soon as you stop the medication, you will regain the weight.

Something that also happens with bariatric surgery. And I am sure with your years in practice, you know, obesity, you saw more than once someone that went through severe big ones.

Bariatric surgery. One year later, they weigh as much or more than before. And you ask, but, I mean, you body was mutilated with the idea that this will give you help, and now you are mutilated and you don't have the health you are at the same way because because nobody invested and I mean nobody.

The patient, nobody, the doctors or the team, uneducated is patient and creating the appropriate, mindset. Right. And providing the appropriate the resources, the feasible resources, because I can give you the best resources if you don't have the money, if you don't have the time, if you don't have the mindset, if it's, you know, if it possible, doesn't matter how fancy my treatment is, right?

I could be super fancy on my list. You could not pay for it. You can go to the gym. You cannot. Okay, we will fail. And that's our for the physicians because we are failing our patients.

Yeah, yeah, it all has to come together, right? Which is why I was so excited to talk about this holistic approach, this comprehensive approach. Because, you can't, solve complex problems like this in 15 minutes, right?

Like we really magic need to approach. And we've talked a lot in this summit about nutrition. Sleep, stress. We have to figure out how all of that comes together for someone.

And surgery is great and medications are great. I'm like one of the biggest champions for, for weight loss medications, but they work better when you have someone who can put it all together and make sure that that is the right choice for you, right?

That precision medicine, does this medication make sense for this person? Will it help this person? As opposed to just assuming, like, every, every, what is it?

Every hole is, you know. Right. Like, not everything's not the same. And I love the fact that you're using precision medicine. Other context. Right. Because I explain precision medicine in a more sophisticated manner where someone will create a, pill.

Right? Or a capsule with your what you need. But precision medicine could be as simple, right, as this GLP one fits. You do this GLP one? No, these are mostly, obviously the basic helps you.

It will help you. You don't have to pay $1,000 per pound because the cheap one will do that. Same for you based on your characteristics. Exactly. Let's see. Short medecine go right.

We don't need to go. Very sophisticated. It's just to pick the right medication for the right person is already precision medicine. Well, I think we could talk for a long time about all these concepts, but, if.

Is there anything we missed? Anything important you want to make sure you share? I would like to share something that I believe is important. Patients need to be empowered.

They need to advocate for themselves. They need to understand their rights. This is not doctors or any other health professionals telling you what to do.

You need to create a relationship of trust, respect, and team really to be part of the thing with your healthcare professional. Do not. Do not underestimate the value of how prepared is your healthcare professional and how educated that person is.

What type of quality of services they can give you? I, I have been in front of many patients are probably you two that say I pay my insurance. Because I pay my insurance.

I have the right to go to my primary, or my primary should be prescribing me the right medication, and I should get better. And I agree 300% on that. I mean, I pay my insurance to see I want the same.

The healthcare system today in the United States is not working like that, sadly. And it's not doctor's fault. It's not that the doctor doesn't want to see you for more than 50 minutes.

It's not that the doctor doesn't want to prescribe medication or doesn't want to give you the medication. We have other people above us. They keep important decisions about what medication you deserve or not.

That's probably your insurance and how much time you need to be with your doctor. And that's probably the manager of the clinic or the CEO of that hospital.

So at some point you will have to ask yourself, do I deserve better? Do I need the better? What will happen if I

invest in my health? How much these will bring me back?

Not only quality of life, but how many other things I will be able to create even in a in a work environment, to myself, to my family. If I get better, if I don't die younger, if I am not disabled, younger because sadly, obesity is a condition that may cause disability and may cause mortality at earlier age.

So think about you advocate for yourself and do what is right. This is not if the children should pay or not. The question is, what do you deserve to receive?

Why do you need to receive? Powerful, powerful way to wrap up their right, like personal responsibility and like advocate for yourself. And I might sum it up with like the greatest wealth is health, right?

Like, what is it all for if you can't feel well and enjoy it? Absolutely. Well, thank you so much, doctor Z. If people want to connect with you, learn more, find your books, all these things, how do they find you?

So my website is w w w virtual wellbeing and.com. They can find me in LinkedIn of doctor C. My phone, my phone. Let me give my, my the phone of the clinic, which I don't remember by myself.

Like you can say seven, 865854512. Oh. Thank you so much. For.