Introduction and Doctor Spitzu2019s Background

Welcome. Welcome back to Reversing Heart Disease. Naturally Summit. We have an absolutely great first time interview. I'm so excited. We missed him last year.

But we had to get the best for this year. Doctor Aaron Spitz and Doctor Aaron Spitz is the author of a wonderful book I have in my office, and I felt badly I didn't bring it to this interview, so I took a picture up and let me do that for a second.

It's such a great thing. can everybody see there? What's the name of the book? The Aaron Spitz penis book? Penis book? Oh, no. I'm going to clear right there. It's a eggplant.

Dan, if you notice the lapel of this handsome man and a moment we'll appreciate, if you had to have some kind of a symbol that is not a bad symbol for a urologist.

Hey, I'm sorry, I already spilled the beans. This is a urologist in Southern California, author of that great book, which I've read. It's amazing book and encourage everybody to read it.

He's a leading authority on the topic. We're going to talk about male sexual health, the connections to heart disease. He also is an expert on for fertility.

When the doctor show was, recording and filming in studio 29 at Paramount, Doctor Spitz was a regular there with Travis Stork and the rest. And many of you know him because in the great documentary in 2019, The Game Changers, Doctor Spitz played a prominent role, playing himself as a leading urologist, talking about the relationship between, diet and erectile function and three volunteer athletes.

It was an amazing part of the movie. Thank you for being here, Doctor Spitz. Thank you. Joe. It's, a real treat. And it's actually an honor to be invited onto your program, because I know how high quality the work you do is.

So, you know, I, I feel legitimated, being invited to share information with your with your audience. Thank you. Kind of you. Or you feel excited to. And for anybody.

Let me just throw this out there. Anybody listening? Watching from Southern California. You are, a busy urologist, but people can see you, right? Yes, yes, I have a practice in, South Orange County, California.

And, we are a large urology group. Practice taking care of all aspects of urology. But I also specialize in male sexual function and male fertility. Okay, important topics and, there's even a report in the news this week about cell phone use in male fertility.

Erectile Dysfunction as a Heart Health Warning

And, the relationship is not a good one, so get that phone out of your pocket, guys. But we'll have to talk about that on a different summit in more detail.

So why do you think I invited you on a reversing heart disease summit? And I'm setting up a question. But you're taking histories from men all the time having erectile, issues.

What's the connection that you as a urologist are aware of with your specialty? And my specialty overlapping? Yes. Well, you know, now that I've been in practice over 20 years, I've really had a chance to dig into human physiology.

And I've come to the conclusion that the purpose of the heart is to pump blood to the penis. And so I imagine that is

like, hey, wait, wait, everybody, just a minute.

Everybody write that down, please. That may be the sentence of the entire summit. The purpose of the heart is to provide blood flow to the penis. Oh my God.

Yeah. I mean, it's a it's a happy accident that it also provides blood flow to other parts, too. But that's principally the most important function, the heart, at least in my world.

Amazing. So, that explains that connection. And, where it goes, the health of the heart goes. The health of the penis, I think, would be a reasonable, conclusion.

Right? Yeah. No, indeed. Of course I'm being a little facetious. But it does turn out that the penis is a really excellent indicator of heart health. And that's because the penis is a structure that's just principally comprised of blood vessels.

Little tiny blood vessels, like a tiny, sponge like matrix, fill up the chambers of the penis that give us an erection. And the health of all of those blood vessels mirrors exactly the health of the bigger blood vessels in our body, and especially the blood vessels that feed blood to our heart and keep our heart pumping strong so long before the coronary arteries, the arteries that feed blood to our heart, start to clog up and get diseased.

Those little tiny blood vessels in the penis show the signs of disease and that penis, therefore, is like a canary in the coal mine. When we start to see problems with the penis, it's not too late to save our hearts.

And it's also not too late to turn things around for the penis itself. But several years before a heart attack or stroke, a man will notice a weakening of the erections.

So, erectile dysfunction. You called it a canary in the coal mine, and there's going to be people that are wondering. What the heck is that analogy? Can you just break that down a bit?

Yeah. Many, many, many, many years ago, before we had, all the advanced technological sensors that we have now, coal miners, would bring canaries with them to sense toxic fumes down in the mines.

And the canary was much more sensitive to the fumes than the humans were. And so if they saw that canary drop dead in the cage, well, it was too late for the canary, but it wasn't too late for the miners.

They could get out of there and be safe. So when we see our penis drop dead, it's still not too late for our heart and our brain. We can back out of whatever bad habits or bad, foods we've been eating that, led to that, canary in the coal mine, dropping over and and start to, get healthy and and restore.

You can't bring the canary back in the cage, but you can bring your penis back. So, you know, that's that's the difference. Now, a lot of people are listening, saying, this is the most time I've heard the word penis in five minutes of my life.

Just get used to it. It's okay. Where do doctors talk with each other? So many people are listening and are females and, females? No males. So please don't ignore this topic.

You might be married to one, you might be friends with them. You might be working with them. Yeah. You know, you might hear this conversation and, you know, it's been decades of this relationship, but this early warning detector system, no hard symptoms, no clue the heart disease.

But the penis isn't working. And, you know, the visit to the urologist is important, but not all urologist are keyed in like Doctor Spitz. I wish they are aware that it's not just a prescription for a medication or a blood test for your testosterone.

It's a thought about your heart.

How Erections Work and Why They Decline

Just tell us a little bit you mentioned about, you know, blood flow being the key to healthy erections, which all of us are listening to this because at one point, somebody had a healthy erection and led to a pregnancy.

So, you know, it's all just normal, normal life. Yes. There's a little bit more about, you know, arteries, healthy arteries and, male sexual health. I mean, just any comments?

Yeah, absolutely. So an erection is basically a hydraulic event. So there are these two chambers that are in the shaft of the penis, like my two fingers side by side and inside the chambers.

Is this sponge like matrix of tiny blood vessels. And there are arteries that pump blood into the penis. And of course, those arteries eventually are branches from your aorta, off your heart.

And as the blood fills those spongy spaces, they expand with blood. And as they expand with blood, they stretch out the lining of that chamber, and they make the lining wider, and they make their lining longer.

And that's what an erection is. It's those two chambers getting longer and getting wider because they're being filled up with blood. And the reason that that spongy space can expand is it fills with blood, is because the cells that line all of those spaces are tiny little muscle cells that can stretch out nice and wide as we age and as our body gets, deteriorated from poor lifestyle choices, poor dietary choices and age itself or perhaps other medications, disease states, what have you, those little muscles that can stretch, get fibrotic and they can't stretch anymore.

And so even though the artery is pumping blood into those two chambers, the blood can only fill it up so much. And it's only a partial expansion. It's only a partial lengthening.

And that's what erectile dysfunction is. So if we can keep those tiny little spongy blood vessel spaces nice and stretchy, which means keeping them healthy, keeping them youthful, we can preserve our erections longer, but those changes in those spaces can happen as early as in our 30s.

We may not notice it yet, but then by our 40s, about half the men are starting to notice some weakening in their erection. By their 60s, 60%, 70, 70%, 80, 80%.

And that's because those spongy spaces are now fibrotic and won't expand anymore. Not only do they have to expand to fill up the chamber, the void that goes in will drain right back out.

If they don't expand so much that they squeeze off the veins that are returning the blood out of the penis, and so some men can get a partial erection and then lose it right away because it wasn't enough not only to fill the chambers, but to pinch off the return of the blood back out of the penis.

Because when the penis fills up, that blood actually gets trapped in there temporarily. It's not just pumping, pumping, pumping, you know, like like like a big blood vessel.

It fills and it traps. So the artery to the penis, it too can get disease. It can get clogged up with atherosclerosis, just like the arteries to your heart and the arteries to your brain.

But well, before that happens, just those little tiny blood vessels themselves. Becoming fibrotic is the most common reason that we have trouble with erections as an incredible explanation.

And, I hope everybody, you know, gets it that the plumbing, the hydraulics. I keep thinking of the woody Allen movie, everything you want to know about sex and that great scene where he was dressed up as a sperm.

How many of you missed that movie? Please go back and watch it. There's got to be at least 35 years ago. Two quick questions as we kind of wrap up our first segment of this interview.

And those are the one from a urologic perspective, a 45 year old man walks in your office and says, my family, doc, that I should talk to you. I'm having erectile dysfunction for the past year.

Just forget the cardiology implications that can vary. What are you going to recommend in your starting workup of that situation? Well, the foundation of treatment is going to be, letting him know that this is something that he can improve with.

Natural means, diet, exercise and habits. One of the keys to healthy, blood vessels, those little spongy blood vessels being nice and stretchy is that they have plenty of nitric oxide.

Nitric oxide? Is this, very important molecule that gets released, and it lasts for a few moments, and it actually triggers the relaxation and the stretching of the blood vessel, and it allows for an erection to happen.

Nitric oxide is what is harnessed by Viagra and Cialis. These pills, the reason they give erections is because they allow nitric oxide to last longer and work better.

But you can naturally increase the nitric oxide in the penis with dietary choices. So vegetables and fruits give you much more nitric oxide than animal products do, particularly the green leafy vegetables and when you're a young man, 20s up to mid 30s, you make all the nitric oxide you need.

You don't actually have to supplement it, but you start hitting your mid 30s. Your cells stop making enough nitric oxide, and you really do need to supplement it with what you're eating.

And so one thing for this guy is, hey, what kind of diet you have? Let's move you into more of a plant based diet.

Lifestyle, Sleep, and Medical Causes of ED

Secondly, exercise when you're exercising and your muscles are contracting, it will release molecules that help protect nitric oxide in your blood stream and even boost nitric oxide just the shearing force of blood pumping through your arteries faster causes a release of nitric oxide into those blood vessels, and also to into the penis tissues.

So get off the couch, make sure you're doing regular, vigorous exercise. Are you drinking a lot? Are you smoking? Are you doing a lot of marijuana? A lot of people in California are doing a lot of marijuana because it's legal, and constant chronic use of marijuana, smoking cigarets, drinking excessively, all these things kill your erection.

They damage the nerves and damage the blood vessels. So let's limit that, because a typical 45 year old may be not realizing that the amount of recreational substance you using he's doing is really actually all that harmful for him.

Because in his 20s, in his 30s, frankly, he was pretty bulletproof. But now it's starting to catch up to him. Now, once we've addressed all that and we've taken a look at his medication list, maybe by now he's had some high blood pressure, and he's on an antihypertensive like a beta blocker or a hydrochlorothiazide that's going to hurt his erections, too.

Maybe he can get shifted to a different antihypertensive, or maybe with the same diet and exercise and lifestyle recommendations, he can get rid of his high blood pressure and get off those medications.

Also is a sugar under good control. Diabetics have nerve damage and blood vessel damage of the tiny little nerves and tiny little blood vessels like the kind that are in the penis.

Is your sugar under tight control? And if not, let's get it under tight control. That'll help your erections, too. And sleep. Are you getting enough sleep at night?

Because testosterone is a key, molecule for penis health. If a man's testosterone levels too low, those little blood

vessels, they also get fibrotic, and they don't stretch real well.

And the only time a man is making testosterone is when he's in REM sleep. Deep sleep when he's dreaming. And if guy's not getting enough sleep at night, he's not getting enough REM sleep at night.

His testosterone level might be lower than normal. Or if he's got sleep apnea, which is constantly at a subconscious level, waking him up. He may not be consciously awake, but he can't get into that deep REM sleep if he's got sleep apnea.

Left untreated, that's depriving him of making normal levels of testosterone. And not only that, the stress of the sleep apnea is making his body release a bunch of adrenaline to cope with that.

With that suffocation that's happening through the night, and that adrenaline causes those little spongy spaces in the penis to constrict, just as the muscles can relax from nitric oxide, the adrenaline constricts them down and keeps the blood from flowing in.

So these are all the sort of the natural approaches, the non-pharmaceutical approaches. But even so, men often still need in the short term anyway, and sometimes in the long term pharmaceutical intervention.

And that's where pills come in, like Viagra, cialis, levitra. You know them by the generic name sildenafil tadalafil vardenafil. And they all work in a very similar way.

And what they do is they let the nitric oxide that is getting into the system, even though it's less than it used to be, last much longer. And activate those muscles much longer to stretch and open up than it normally would. That's how it works.

And so I may well provide that man with a prescription for one of these pills. Oh, that was absolutely one of the best, you know, concise explanations.

And I learned I did not know about the REM sleep. I mean, people can wear an aura ring if they want to attract that and work on it. People, you know, get information from their, updated Apple Watch and REM sleep or just, you know, don't go to bed at four in the morning and find some better sleep hygiene.

That's and the sleep apnea component. It's very easy now to do a home sleep apnea test. So talk to your provider if you have concerns. And low testosterone.

So we've been speaking with the author of the Penis bug doctor Aaron Spitz from So Cal. And I think it's been a wonderful, you know, description about the canary in the coal mine and why and a reversing heart disease summit.

We also want to reverse erectile dysfunction. Because of this tight, tight connection, We're going to go a little bit longer with Doctor Spitz here, who's been very generous with his time and his knowledge.

The author of the penis book, a practicing urologist in Southern California and the star of the Game Changers movie. I'm sure you all watched it, but watch it again and you say, yeah, he was a he was great in that natural eye.

There is a Game Changers two coming up, isn't there? Yes, that's what I've heard. I don't know a lot of details about it, but I'm pretty excited for it.

Okay, but they haven't signed a contract with you yet. No. Okay. Well, but but but I'll tell you something interesting. The scene that we did in the movie for people who haven't seen it was we took three college athletes.

We gave them, meat burritos for dinner, pork, chicken and beef. And then we put a device on their penis to measure how many erections and how hard those erections were while they were asleep, because men get erections spontaneously while they're asleep, they can't control it.

It's just a normal natural function. Then we take those same three guys and we gave them vegan burritos, and we recorded that same, with that same device, their erections that night.

And we compared if there was going to be any difference. I mean, these guys were normal. They had normal erections. But could one meal affect the erections, different from another meal, you know, plant based versus, versus animal based.

And lo and behold, what we saw on these three guys was like, 3 to 5 times increase. And, the number of erections they had that night. But that's just three guys.

And and, Joel, you and I know that that's not real by science. That's not a true clinical trial. So what I'm excited to tell you is that there is now a true clinical trial underway in my mind at his hospital, with Doctor Robert Feld as the lead investigator.

And, we're looking at many, young, healthy medical students. And we're doing the exact or just about the exact same experiment to see with robust science.

Does this difference really play out? I suspect it will, but we'll see what the data really shows.

Plant-Based Diets and the Game Changers Study

And it's very exciting that we've been able to actually go from, you know, a very flashy movie scene to now really taking it, to scientific scrutiny. So I'm excited to see how that plays out.

Yeah, that is very exciting. And, although there's been a lot of growth, vegetarianism and veganism, if we can, prove this point, well catch him, below the waist if we can't catch him, above the waist in terms of, healthy prevention messaging.

Great. Well, the last few minutes here, since you're such a wealth and knowledge, there's been in the news cycle constantly a gentleman that I did interview for the summit, Brian Johnson and, a multimillionaire tech executive who has been focusing on reversing his age and uses a plant based diet, but, sort of humorous.

His last name is Johnson, and he spends a lot of time talking about his Johnson, as is commonly described and, trying to anti-aging his sexual health as much as he's trying to and age his entire health.

And he's achieving great, reversal of, whatever measures of age. I believe he wore the same device that you used in the movie. He has a financial capacity to buy it, and I think he did, buy the same device.

And he's been using, in addition to a plant based diet and exercise and optimal body fat and lean muscle mass. He's been going through a procedure that's officially called low intensity shockwave therapy.

Also commercially, sometimes known as gains wave therapy. You have experience with it. Why don't you give us a urologist perspective that, maybe the diet and the exercise and the REM sleep and the reversal of sleep apnea.

I didn't do it all. And some guy wants, you know, a mechanical solution. So where does that fit in? Yeah. No, it definitely has a role. I actually do perform low intensity shockwave therapy for my patients as well, because it does work.

Now, it's important to know that this therapy, like any therapy, works on many, but it doesn't work on all. So as with anything, always be aware of claims that, you know, this will, you know, make you 18 again no matter what.

That's not true. And that's not true for Viagra. That's not true for any remedy, but for well selected patients, it truly does improve erections. And the way it works is that there are these low intensity sonic impulses, shock waves, we call them, that hit the penis about 1500 to 2000 of these impulses are delivered over the course of a treatment session, which might last about 20 minutes.

And what these impulses are doing is fake injuring the penis. What I mean by that is it doesn't actually injure the penis at all, but the tissues inside the penis respond as if they were injured with a healing mechanism.

So growth factors are released, stem cells are mobilized, and the blood vessels of the penis are rejuvenated and even some new blood vessels grow as well.

When our body is injured, we have a healing response to grow new blood vessels, to grow new tissue, and this low intensity shock wave is tricking the penis into having that same kind of a healing response.

Shockwave Therapy and Treatment Options

And so all those little spongy spaces of those, those muscle cells in there that are starting to get fibrotic from age, they get rejuvenated and the fibrosis goes away and they get more stretchy again, and new cells grow as well.

And so the penis then can fill with blood and expand and widen and lengthen better. After the shockwave therapy. However, it won't work on everybody. It'll work best on men who have mild to moderate disease of their penis, mild to moderate degrees of this fibrosis.

If it's real severe, it's not sufficient to reverse it enough to where you can have natural erections. It may downgrade how much medicine you need, but if you want to get to natural erections and off pills, it's best in in that mild to moderate category.

If a person is in the younger age range. What I mean by that 40s to maybe mid 60s, it's going to work better in that population than a guy in his 80s.

So it's important to have realistic expectations. And it is important for me as a urologist to select my patients appropriately, too. But if you look at all comers, for lack of a better word, it works in about 65% of men.

So that means it doesn't work in about 45% of men. Also, it causes no harm. That's the nice thing, is that even if it doesn't work, if it doesn't get the desired outcome, it's not going to hurt the man.

And when it works, it can last for a few years. But you know, we don't stop aging. And those changes keep happening. And so eventually the beneficial effect of it may wear down, but it can be done again.

And you can get booster therapy. One of the tricks with this for the patient is knowing which practice to go get their care from. It's not covered by insurance and it's quite pricey, but not all low intensity shock wave therapies are the same.

There are devices that are touted as providing low intensity shockwave, but they don't actually provide the true low intensity shock wave energy. And so those growth factors in those stem cells are not being mobilized.

They still make impulses and they look like the machine and they sound like the machine, but they're not the machine. And so it's important to be careful where you select to have your therapy.

Our practice has a best in class device. And typically you're going to find best in class devices in urologist practices. But when you venture outside of urology and to naturopaths and chiropractors and as tacticians, more often than not, those machines are not the real ones.

Why don't they get the real ones? Because the real ones cost about three times as much. Also, they may not have the sophistication and the medical understanding to know that they're not using the real ones.

They may have all the best intentions unwittingly purchasing, you know, a device. It's not really going to be very effective. So it is it's an important thing to understand and to choose wisely if you're going to select this therapy.

All right. Real wisdom from the expert, the author of the penis book, the star of the doctor show. Although I missed

that show, I know it's, it's, Yeah, for a couple of years, but it was a great one when it was on a run.

I had the pleasure of being on a number of times and, yes, of course, the Game Changers movie.

Closing Thoughts on ED and Cardiac Evaluation

So, Doctor Smith, thank you for taking your time and recording this, you know, really relevant information and, you know, I think the message is guys and women that are in relations with guys, erectile dysfunction is a heart event.

It's a heart warning. And go see your, knowledgeable urologist. But also, be sure you follow up with your primary care doc, or arrange an appointment with a preventive cardiologist and get the full cardiac workup.

Don't miss the clue. Right? Absolutely. I rely heavily on my cardiology partners when I'm managing my men with erectile dysfunction. I want to know that that's been covered.

I'm not a cardiologist. I understand the relationship, and I want to know that my patients are in good hands from a heart standpoint. Good. Okay. At that, comment, I think we'll leave it there and say goodbye to Doctor Spitz and wish you a wonderful day.

Thank you.