Introduction to Chef-Doctor Robert Graham

Well, here we are. Welcome back everybody. I'm Doctor Drew Ramsey, your co-host for the Depression and Anxiety Solutions Summit. And we have a wonderful guest.

You can imagine one of my favorite combos. He's a chef. He's a doctor. Doctor Robert Graham. He has been a good friend. And he's one of the champions of one of the leaders of the food is Medicine movement.

You can imagine being a physician and chef based in New York City. He's just got to interact with so many of us and inspire everyone when he meets or just how awesome food is.

Medicine, not just food is medicine, cooking is medicine. So chef and doctor Robert Graham, welcome to the Solutions Summit. How are you doing man. Real.

It is always great to see you. And it's been too long. The pandemic sort of broke us apart, but we got to get back together and share a meal together.

I can't I can't wait to cook with you again. You and I have spoken together at a number of different conferences in the wellness world, and it's just a treat to have you back.

And I wanted to have you back in my life a little bit and, and definitely have you in the summit because of how much you know about making food as medicine and how to deliver that in kitchens and in your patients kitchens.

And because you really, you know, know food like a chef and know food is medicine like a doctor, I wanted to get right into it. And thinking about cooking to beat depression and anxiety.

Can you just share? What does that mean to you? Well, listen, I think there's no doubt that, we often hear of this epidemic, that epidemic, you know, dual epidemics, tri epidemic.

And, you know, mental health is one of these things that I'm so happy to be on this platform with you because you have shed an important light on the impact or the connecting the importance of mental health.

And what you put into your body. I know you've had guests talk to me about sleep and exercise, but I think food is one of these things that is so vital.

Our practice really starts with this food first approach, and I think we have ownership. We take agency by what we put into our bodies. We do it three times a day, 365 days a year.

Right. And multiply that time, how many, how many years you've been alive. That's a little bit of math right there. So think about how many meals you put into your body and how many of them are memorable.

How many of them have truly nourished your body? But again, as we've seen over the past sort of five years, particularly during Covid, one of the things the silver linings of who we really are that people get back into the kitchen and something became almost a survival technique.

And I think people are now sort of trying to take more agency into their health care by at least being aware of the importance of nutrition and well-being.

I can't go one more. One more thing I want to mention is that, you know, growing up and where we were training, smoking, was that sort of the number one cause of death and disability, what our food is known for causing disability, death and disability, not only us, but worldwide.

Food First and Fresh Medicine

And and I think people are sort of taking that, that role and, or that ancient technique of getting back into the kitchen so that you can actually care for thyself and your family.

Yep, yep. Now, when we get into your clinic and you say there's a food first approach, maybe just if everybody, listening can just imagine, you know, we, flown to New York together.

We've got an appointment with Doctor Robert Graham because we know we've got to get our food, his medicine program, up to speed, to take better care of our mood, take better care of our anxiety.

Can you tell us a little bit about, like, what you'd have us assessing that you have us thinking about and then get into some of the initial maybe steps that you see people taking that help.

Listen, it's nothing new. And we talk about in medicine, evidence based medicine. Right. Everyone throw that sort of term out. Now, evidence based medicine really was born out of Harvard Medical School the 1980s.

But there's so much wisdom that has happened prior to the 1980s that we in integrative medicine, honor and I think the ancient traditional belief systems of, of IU Veda, of traditional Chinese medicine, of, of well as and donors and all these caregivers in our societies, we sort of put them on to the side.

And I think it's time that we bring that back into our treatment modalities. From an evidence base point of view, all diseases, every single diseases, from hypertension to diabetes to depression, there should be. And we're taught this, but we don't execute and we don't prescribe it.

Is that the first six weeks of a diagnosis, we should be optimizing our patients therapeutic lifestyle changes, including their nutrition. But we don't do it because we're not taught right.

And so our practice, which is an acronym, it's fresh medicine and a chance for food, relaxation, exercise, sleep and happiness. And that's how we approach our patients.

So our assessment, our history and physical are very sort of conventional. But we really take a deep dive into the role of nutrition in your well-being.

So what we do here is not take not alone. But through my training as a chef, we design a meal plan with the help of a dietitian and health coaching to help you get back into the kitchen and take agency on your own.

Healthier on health by showing you teaching you how to eat right, but also very importantly, teaching you how to cook. And I think that's sort of the cooking, this medicine point of view that I really would like to share with fresh medicine.

Break that down for us, Robert. Fresh food, relaxation, exercise, sleep and happiness. We call them the five ingredients into your into your recipe of health.

And unfortunately, we typically don't prescribe that in conventional medical models. Not at all. We maybe ask asked about it. There's a door handle. I think we're seeing more of it.

You know, there's more curiosity. There's, and I think also we have to acknowledge a lot of our colleagues in medicine are really in a sickness care system where people come to them very ill, right at the really having often fallen, fallen to, or suffering or struggling with illnesses that are at the, let's say, end stage of what lifestyle, can do or the sort of modern lifestyle can do.

And so there isn't a lot of focus sometimes on things like sleep hygiene because, you know, there are fires to put out around blood glucose or blood lipids or struggles with compliance or alcohol.

You know, all that said, we have to do a better job. I'm curious just in the food part, because I really want you to help us and everybody listening just like of Greater Kitchen, and everybody, these conversations can do that for you if you let them.

I, I spoke with a number of folks for the summit, and I have to tell you, in all honesty, things have shifted in my life. I've got miso in my refrigerator now, I'm not getting up in and really honoring the morning and the bright light in a different way in the early mornings.

I'm thinking about my creativity after this wonderful, set of conversations and my spirituality differently in a way really related to my mental health.

And so, Doctor Graham, doctor Everett Graham, take us into the kitchen. Help us, help us understand some of the wisdom you have of, again, like assessing the food part.

All those other parts are super important and kind of what we should have more of, especially like as a chef, like, what are we getting wrong? Like, my knives to those, like I have already cooked, I need to buy some more stuff. Like what?

What do you see? So I think, you know, great question. And so we have this sort of thing called the kitchen makeover, and it's not necessarily sort of raiding the pantry and throwing everything out.

Right. The idea there is sort of the crowd in the good stuff.

Kitchen Makeover and Bean Basics

And so that when you're hungry and your, defenses are low, you reach for the stuff that is in your house and in our house. Right. It's fruits and nuts, snacks.

That's sort of what we go after. How much? How often? I really don't think that's not important. Because, again, the things that are killing us are the standard American diet, the process, the things that come in a box and can and you know, those sort of things, all the things that sort of lead to more disputes.

So in our house, beans, berries, greens, nuts and of course, broccoli. Let me say that again. Beans, berries, nuts, greens and broccoli. My name is Robert with the culinary school.

My nickname was called broccoli. Right. So there's always broccoli and everything. Robert how'd you get nixed in broccoli? Robert what a great nickname.

I like, they call me like drew dog. I mean, like, like and broccoli Rob. That's amazing. How did you get this nickname? So. Yeah. And so my the whole funny part is like doctor.

Right. Many of doctor I've chef. But I love the term broccoli rob and then you know the science behind broccoli is amazing right. In not only in mental health but also cancer mortality.

It's it's one of those amazing things. And I love particular I particularly like the bitterness of things. And broccoli Rob tends to be a little bitter and just going from a culinary perspective, the better foods are probably the healthiest ones out there.

So the bitter greens, the dark, leafy bitter greens are the are offer the most sort of neuro cardiac protection in for our bodies means we have to incorporate more beans into our lives and that.

Amen brother I love I mean, yes, it's so. And the beans have been vilified. Why should we get more beans in our diet? Well, I think, you know, a lot of the work that has been done from an epidemiological standpoint, the more beans and greens that we eat, the longer we live.

A lot of the science that Blue Zones people and Dan Buettner share really says that I a half a cup to a cup of being today. And you can get so creative with them and beans come in all shapes and sizes and really it's the cheapest way to get protein into your body.

We often talk about healthy eating. The expensive beans are the cheapest thing you can possibly got. Especially if you get, like, you know, dried beans, dried lentils.

Yeah. I mean, it's just, like, super economical, incredibly nutrient dense, so much fiber. So much fiber. And then, you know, we're talking about why don't people eating up beans?

I think part of it is that the reverse side of the prep side, it's not a. Yeah, exactly. That's what it is. And there's a whole preparation to it right there.

The whole how to prep them, bean to reduce the amount of gas that we produce. Tell us a secret. This could be the most valuable thing you're learning in the summit if this changes your life with beans, I just, Boy. Wow.

That would be huge. How do we prep beans? Better. Well, let me go back to why. Why we farm. I think that's an important conversation. Right? Okay. Why?

Why we farm is based upon the fermentation process that's happening in your gut. Right. And so when you ferment something or if you buy anything from it, you mentioned miso, sauerkraut, anything that's sort of fermented or pickles.

There's that pop when you first open up that can. That's the internal fermentation process. That's the they call it burp, the can of burp or fart the can.

Right. And so that's what's happening. And so if we can actually reverse or modify our gut microbiome, the bacteria that's now going to be in there because you're eating more beans and you hear this a lot.

The more beans we eat the less fart we have. And again your body is shifting. The microbiome is shifting. The gut health is shifting so that the fermentation process isn't as significant or severe.

Thus less farting. I remember when I first got into this food as medicine world and, and started eating more beans, I was live, I was in New York City in a had the the neighbors this couple and they committed they had gone on this high being like beans every day diet.

And I said, how was it? He said, you know, for the first week, there's definitely a lot of gas in this, but it's amazing. You know, my body's really adjusted as is.

I love having so much more plant based protein in my diet. I don't have nearly as much gas in this. And it really it it's Yeah, it's one of those ways that our body's amazing at adapting.

So you can batch cook. That's the thing to just from a kitchen point of view, just batch cook. You know if you can make in one cup make three cups, you make a ton of beans.

You can actually use them in different sort of, meals throughout the week. And if someone is sort of interested in this sort of shifting to more of beans or plant based protein, start with the lighter ones.

The dial of the legumes or lentils, they won't have that sort of gaseous ness if you want to call it red beans. Black beans and chickpeas tend to be the.

The shell is the hardest thing, so you soak them overnight. Traditionally. But. Anything in there, you know, some people. So one of the things I do it and it's my sort of secret here, is I throw in kombu, kombu is sort of, they call them the queen of the seaweed.

So you get the salinity that we need in beans, but it also gets the minerals. Talking about mental health here. You know, you it has tons of iodine, kinds of tons of minerals that we need magnesium.

You can find that. And so what I typically do, I throw my like boiling pot of beans or I put it in a crock pot or an Insta pot and then I'll show it and I'll throw a sheet, probably three by three sheet of kombu.

You can find kombu when we throw it in there. Make sure you sort of, fish it out once the beans are done. Don't want to really sort of, eat it. Some people do.

But it's sort of my sort of secret sauce to my beans. Yeah. I've heard that kombu before. It decreases some of the gas in this and in a way to help with the beans.

And so it sounds like one starting with some beans or legumes, things like lentils, that are maybe a little easier to digest, a little less gassy, soaking Europeans overnight and adding kombu, when you're cooking them are all kind of methods that can decrease the gas, you know, so more beans in our diet.

And also I like to recommend canned beans because I was I was one of these people that felt like, oh, the only way to do it is to soak it and make it, and that would be great.

But then as I get busier, it's become a real common move in our house to open a can of beans. Particularly, I like white beans with pesto. Rinse them off, drop them in, you know, a pot, heat them up, drop in a tablespoon of pesto and boom, we got the secret.

You know, kind of incredible. Beans and greens, mix. And, you know, that's you can do that in under five minutes. And so really great recommendation. You know I think I think you know, we often focus on, you know, diet and you know, this diet, that diet, I'm vegan or keto or paleo, whatever it is, I think we, I think the first thing I like to share with the audience is that we just need to cook more.

Right? Again, it just it studies have shown this is sort of my cooking is medicine. Scientific backing is, is that societies that cook more live longer.

They, they, they've succumbed to less cardiovascular diabetes, heart disease. Regardless of what it is you cook, the more you cook, the less sort of diseases you will have.

Cooking More Plants and Better Greens

And that sort of bears out internationally, the US and Britain and UK, who cook less than, say, sort of Italians or Spaniards have higher rates of cardiac disease, mental health issues than communities that or societies or countries that cook more.

And so getting back into the kitchen and it's just not every single meal. It's at least five meals a week. Yeah. Kind of number two in terms of meals a week, US families or folks are kind of making for themselves.

And compared to some of the healthier kind of more, you know, cultures, it preserves cooking still. Yeah. So actually there's a bunch of studies and I wish I can share with some of the citations with you, but it seems to be anywhere between 5 to 7 meals cooked at home confers that decreased risk of disease and or dying.

And by the way, that's the other thing. The more you cook at home, the less you die. If that's not sort of a motivation for you to start cooking, I think that's a, and that's sort of what I believe in.

The other thing I also believe is like cooking, eating out and sort of increase as well. And as a chef. And this is where the doctor chef comes in. Most chefs, most restaurants are not really they're built for your health and well-being.

Right. They want to, Feel like things I've never tried before and specialty cocktails I've never even thought of

before. And then some, you know? Amazing. Amazing choices.

But the whole economic principle is for you to come back or more. Right. And how do you do that from a culinary perspective? Traditionally increased fat, sugar and salt.

Right. And so you're going to go out and eat more sugar fat and salt which equals more calories. And so if you, you know, go eat out less, cook more at home.

And I think that's sort of, what I love to share. And what should you cook more fruits and vegetables. Right. More beans. And if you're going to eat me and I often argue, in fact, that, quality meats, I think one of the principles that we have a fresh is that eat more, plant, eat less meat.

But if you're going to eat meat, which typically. Some people think there's a way, that there's a lot of argument about the meat where, you know, I think a lot of us feel, something like, you know, a wild salmon or like, can of anchovies or sardines, you know, that that there's a lot of agreement about, let's say, the nutrient density of those.

That's if you're going for a whole food source of, omega three fats or even calcium. Iodine might deserve lots of these in those small fish. But, you know, that's not what's getting debated.

It's like a burger and bacon and like, okay, you know, there's I don't think anybody thinks those are health foods necessarily. I want to hear, just, but when I head back, there's just a, a great point that you made that slipped in my mind.

Now, because I'm in to my first and second cup of coffee. So we'll get we'll get back to it. I want to hear some of your secrets for helping us eat more plants and eat more greens. So just a little bit about beans.

But yeah, we all know the leafy greens. Dark leafy greens are particularly good for us. Why? And how do we get more of those into our diet? So I think, you know, if I think the goal is just to get more in it, by all means necessary.

And so when we think about greens, we typically think about a salad. Salads are great, right? But they're hard to make. I particularly love it. It is my love language to make a salad for my family.

And going just just with the theme today is for me, cooking is also meditation. It's a mindfulness technique for me. My salads are notoriously known as the seven night cup salads.

And so what I typically do there is the reason why your salads don't look or taste as good as maybe the restaurant. One is that it's intentional. The sort of the texture, the bite, the chew of different knife cuts right from half moons to circles to batons to dicing to all these things have a sensory in our mouth.

And that's part of the reason why the salad, when you eat out, is so much better than worse, partly because there's so many different sort of knife cuts in it.

So I encourage you guys to mindfully cut your vegetables in different light cuts in different knife skills. So tell us a little bit more about that. Other than everybody, Doctor Robert Graham and I are going to have to host some sort of wild culinary free cooking with Doctor Graham Retreat, where I just get to like a sample of these amazing live language salads he's making.

And I and then, you know, hang out. That sounds amazing. Tell us a little bit more. I'll series around some of these shapes, but these are like little squares, little circles that to uplevel our dark, leafy greens consumption.

Think about different charts. Chopping things really finely, chopping some things in circles. Having long little string like, is this kind of the idea?

Yeah, exactly, exactly. And I think part of that, you know, from a, from a cooking point of view just brings me sort of mindfully cooking, you know, cutting these things in different shapes and sizes.

I love this, everybody. I love this, and I want you to do this right. Seriously, spend more time with your cutting board and your chef's knife. Yeah, because this is not, as you said, there's not kind of the recommendation that people get often from physicians, right?

Like, I want you to chop more vegetables, like set a timer for 15 minutes. And the other thing, the other thing really important in terms of the reason why that's good from a culinary point of view, is that when you cook things right and cook things, cook at different times based upon how large they are.

And so be mindful in your knife cut. When you're cutting a potato, make sure that sort of the potato cuts are similar. The carrots are similar because we've all had our onions particularly, we've all had that sort of tiny little piece of onion and that big long chunk of onion.

And so that's that's a sort of telltale sign of the mindfulness that goes into cooking. But I want to sort of answer the question you asked me, and I glance over it.

The kitchen doesn't have to be complicated, right? You need a good knife. Number one. I love my cutting board. I love mixing bowls, and I go. Back to cutting board. Do I need to?

You know, I got I had a wood cutting boards and then I got worried about, you know, all the bacteria. So I got some, some of those culinary like plastic boards.

And then I got all worried about the microplastics. And so I started cutting on the counter. I got in trouble with my wife. You to help me, what am I what?

What's a good cutting board? Yeah. So I think oh, they're they're all true. Right. And so I think you have one really good cutting board in my, in so in our home what we decided to do.

Right. We keep a vegan vegetarian home. We don't bring any sort of animal proteins into our into our, into our home. We choose to go out. If I choose to go out, I'm going to go out and maybe have some sort of animal protein, but cooked by someone who really does it every single day.

So that's what we choose to do at home. Nothing. And so the cross-contamination is real, but it's not something that I really think about too much. I think the amount if you cook a lot, I think you should invest in two cutting boards, one for meat, one not for me.

So that's that sort of thing. And the meat ones tend to need to be thicker and heavier. I think that's an important factor to consider. The other ones, I think a good wooden one for your fruits and vegetables should be should suffice.

The most important part is as a good knife is is key. Oh, as I say, the most important part of this is to get a separate cutting board for the onion so you don't get your wife and daughter upset because my kids are oh, they're like, did you cut this on the cutting board with the onions?

It's like, oh. And you got it. Did got do it. I do what we do is we solve it. We do a little lemon rub on it, and we make sure it's dry and we make sure it's dry.

The other thing about knives I want to mention is I don't put a nice knife in your dishwasher. Again, mindfully, carefully clean. It is part of the mindfulness that maybe it's a gift to myself thinking about the summit or, you know, anybody who's listening, who you know, for whatever reason, you just have like, you don't have like, a nice chef's knife, you don't have your knife.

Is this something that people should, you know, invest in is a, you know, it's a gift to the self, but it's really a way to access and kind of honor more chopping, more cutting.

Get a great chef's knife. Yeah, I think I think there is a wisdom that you never sort of give a knife. You buy a knife.

Yeah. You never gift a knife.

Kitchen Tools, Organization, and Food Waste

Sort of bad luck. Really. I didn't know that. Yeah. So the and so if, if you know a great chef don't give them a knife. But also don't expect someone to give you a knife, you should go out.

And this is like, my wife is telling me that, you know, in the Bible, they say one of the real responsibilities of a father is to teach children to swim.

And my kids are pretty good swimmers, but I think I'm all the way there. And and so, it sounds like a responsibility of each of us as eaters. But also, if you're on the solution summit, I think we're all seeing each of us as eaters.

We've got some particular concerns about nourishing our mental health that that really having your piece of equipment, your chef's knife, that's your responsibility to sort of step up and have that as a piece of kind of like your life equipment. It sounds like you're saying.

Just like some of that, there's that feel of, of your knife that really what we have to. My wife cooks a lot. She has her knife, I have my life. And, I like.

That like the that's really I feel like that's a little secret to marriage or a long term relationships that a lot of us, you know, haven't even thought about.

Right? Maybe one of the things is that if you both cook, you each need your own knife, and you can't buy it for each other, you should encourage your partner.

If they don't have their own knife or they're using yours too much, maybe a gift certificate is a good way. Like the great way to do it. I think that's that's sort of simple things.

I think, mixing balls are really important when you're cooking with greens. Those sort of silver ones that you see in many sort of commercial kitchens.

Mixing balls are great, right? Because you sort of can do things on the fly in one big bowl. And if it's a great also garbage can, as you're sort of cutting vegetables and peeling onions, peeling things, you know, throwing it that.

I think the other thing I want to mention, just from a culinary perspective, is that all the food scraps keep on, you know, those that that makes a beautiful veggie stock as well.

And so it's. It's such a, it's such a, I think something so often that we, you know, a lot of us have a hard time with I think is managing food waste.

Yeah. And that idea of, of having you know, when I think about making a stock that's like something fancy chefs like you do, you know, and the idea that I could make it myself and store it, they can I would, I would say shift a little bit, but along with a knife and some of the food recommendations and good cutting boards.

Are there some tips you give patients or help people around a like, food organization? Like somebody like myself, like I do a lot of home cooking, but I'd say that one of my challenges is like leftovers or portioning or I just there's way more food waste than I want.

Way too much like, oh, well, those look at those delicious lentils we made two weeks ago in the back of the fridge. Is there some way that you help patients kind of get a little bit more organized, as you say, kind of keeping it simple?

Yeah. I think for us, stews, soups and stews. Right. And so have your if you have excess, fruits and vegetables and you don't want to throw them out. What I typically recommend, it depends on what the question is.

You have excess carrots or things that you're going away like we're we're going away tomorrow and tonight there's going to be a soup we made tonight based upon what we have leftover in our, in our pantry or in our, we live in New York.

We have a pantry, our little, but. It's kind of like you're going to you're going to kind of clean out the fridge, a little mini clean out of anything that's going to rot and make a super stew before you go away. Exactly.

And then you can freeze it, and then you can freeze it when you get back home. Because one of the things I can't stand is that when I fly back home, it's too late.

Everything's closed. I can't ordering something. I don't want to cook anything. Just take it out of the freezer, put it and put it in a pot and heat it up.

And I have my soup that it's like you're. It's like goodbye and hello meals. And mean. It's there. It's there too. So you have a good guys. Have a great trip.

I'll see you when. Rebecca I'm here in the freezer. Then, that's such, such a nice bookends to your trip there to kind of, you know, kind of a start and a finish line.

Yeah. So that's sort of the thing. And the other, the other thing is, I. And if you have excess greens that's going back to greens and you know fruit, we have two I know what we have.

We have a mango, we have two plums and we have a lot. That's what we have in our refrigerator. We're probably tomorrow morning before our flight. We're going to put that in a blender and make a smoothie before we fly out.

And so you can actually repurpose things that you're going to throw out either by making a stew, baking them, or putting into a spin into a smoothie in the morning.

And I love that combo. You didn't. And nobody thought about a smoothie like or a regular plum, right? But I just love that. To get your chef's creativity that you look in there and you see a sweet, delicious fruit, you see some really nutrient dense greens with a little bitterness that's going to get your day started just right.

You know that kind of I love that kind of real fresh, green taste of health when I get them in the morning, like, I have like a regular with my eggs or drop a little kale in my smoothie.

You know, I go back to the European, right? They don't go to ruin maple and eggs and rocket. Right? Yeah. Right. Yeah, yeah. And, you complete and you complete the Nutritional psychiatry cookbook.

Added. I call it rocket pie. Right? There's, like a rule, all over the pizza. Such a great, great way to do pizza. You are a plant man. Plant doctor, chef who loves plants.

There is a lot of pushback that's happened in the media space around plants, sort of during the kale days or even New York Times articles about like, like, juicing kale, trouble ahead.

And maybe juicing isn't the best way to do kale, but, boy, there's been, you know, whether it's fears of oxalates or, fears of, you know, anti nutrients leaching the minerals out of your body.

And I don't mean to make fun of these because, I hear a lot of patients get influenced, get concerns that come in, and they and they're, they're, they're, they're scared of of eating plants, eating beans.

Can you help set us straight about that? Do we need to be scared about plants and all the toxins in plants? I'm not gonna say not all plants. You know, there's are poisonous plants out there, but everything that we're buying in a in our supermarket, it's probably safe.

Is safe. Okay. I don't need to worry about oxalates or things or. I think this is where I sort of think the the lectins.

Lectins? Oh. Well, a couple points.

We are what we eat, right? But really, we are what our bacteria in our gut eat. So that's one point, right? So if, if, if lectins or beans going back to that point don't feel good to you.

It's probably your body telling you something. The other point is, is if you have kidney stones or some sort of metabolic problem that is related to a metabolic pathway that increases your oxalates, right?

Food as Medicine Programs and Closing Remarks

Maybe that's not to me. Maybe kale's not the best thing for you, but and so this is where I think medicine doctors, you know, dietitians, they all have this role in really understanding what you're putting into your body.

The most recent book that I think gives a clear understanding of, of this sort of conversation is Chris Gardner out of Stanford. What he talks about instead of what?

Right. So people talk about smoothies and shakes being. So you ripping up the nutritional density. But instead of what I'd rather have, you have, you know, a shake in a smoothie in the morning instead of a bacon, egg and cheeseburger, you know, or bacon, egg and cheese on a roll. Right.

So instead of or. The thing that we see every morning is the bacon, egg and cheese on the roll, you know, everybody loves the bacon, egg and cheese or a New Yorker.

You know, you have that maybe not the bacon for you, but it it's where that's that's just what you get habituated to. Yeah. And, you know, I love the instead of I love the, the, we call that in the brain food clinical that simple swaps where we look at something that somebody ideally they want to modify.

I know I'm drinking too much soda. I know I'm drinking too much beer. I know I'm eating too much fast food, or I only do a snack on cookies. Okay. And that kind of gives us a really clear target or a clear, you know, idea of where the intervention is and think, well, what do we swap that when we replace it with what do we swap that out?

You know, a lot of people fantasize and like the kind of cold turkey idea I'm going to cut it out of my life, which is great. Some people do that, but a lot of people, need to replace it.

For me, when I stopped drinking alcohol, the kombucha was like, my wife is like, you're spending too much money on kombucha. Do you want to go back to beer?

It's like a little bit of a deal for the family and, you know. So, And then I have. I'm down a bit. I'm on my spindrift drifting coffee. Now, I've come off the Boucher.

But that replacement, that simple swap, is a really easy move. And and thinking about some of these, ideas you've had for a starter gram of more plants or more diversity of plants.

Some of the great, you know, clear recommendations, I hope is everyone's been listening, really thinking about how does this fit into my dietary plan?

How does this fit into my life? You know, how quickly can I go from the end of this talk to buy myself a fancy chef's knife so that I hope a lot of you are thinking we need to talk to doctor talk.

See if we can get a knife. Sponsor of the, summit here to make sure everybody gets a great deal on, a blade that, Robert Graham would recommend. In a pan.

I think a pan is important to you. Have a you have a quick record is we, a cast iron, a nonstick. What what what's a good pan in your mind? I have no, I'm not smart when I, when I what I love, I love the quality of a skin pan.

Okay. Scam pan. And I think you should have a nonstick. I think you have a stainless steel one. And, it doesn't have to be a lot of things, right? But you have to have good quality, a couple of good quality products.

And I think that's really an important. But a good knife in the pan. Good cutting board. Those are sort of the three things that I think every sort of kitchen should have.

The other thing I want to mention before we sort of, is that there's a whole movement of, of food is medicine. Right. You're hearing a lot of this buzz, particularly since the white House conference.

About a year and a half. I've been honored to be there. And one of the things that I think was happening in the movement is, is the movement of produce prescriptions and medically tailored meals.

There is a movement happen next, the internet nationally right now, some insurance companies, particularly Medicare Advantage companies and some Medicaid programs in different states, are offering you the opportunity to get meals prepared to you, sent to your house, paid for by your insurance.

And so I you know, I am the chief health officer for a medically tailored meal company called Performance Kitchen. So if you don't know what to eat or you don't have time, skill or money to cook, look into, our website, performance kitchen.com.

But also Fresh medicine has a link to it to identify if you qualify for free, medically tailored meals. If you have a chronic disease and mental health, depression and anxiety falls within that category.

So if you don't know how to cook, don't want to know the time to cook or get some someone to cook for you and get paid and they get paid by insurance, I think it's a win win.

Now someone hold on just one second, not someone. Doctor Robert Graham, chef doctor designed meals, medically tailored meals for you using Medicare advantage.

I mean that that is really cool. And anybody if, that is a pass, you end up facing some of this amazing food from Performance Kitchen. I'd love to hear about I would love you to tag v and Performance Kitchen and fresh medicine doctor Graham.

It would be so meaningful to me that to see that more nutrition go into people, both through all of the great cooking you can do for yourself. But also, you know, sometimes we're in situations where, people need more nutrition than for whatever reason, they can kind of prepare for themselves.

And that's where medically tailored meals really can be helpful. And it's been I've heard a lot of different examples of that. It's one of those things that, you know, we want folks cooking at home.

As Doctor Graham has really emphasized, that can look different ways for different people at different phases of their life. So thank you for that work and thank you for that mention.

We'll have links to to all of this in the show notes for this episode. Everyone, this is the Depression and Anxiety Solutions Summit. We're here to remind you that there are solutions.

There are so many solutions. It doesn't feel like that way sometimes when you're struggling with depression and anxiety. I'm not sure to Ramsey your co-host, I can't wait to see you in the next episode.

Most importantly though, I ask at the end of every one of these talks, it's most important that we do things with this. We all had something resonate with us that Doctor Graham said, and maybe it's that we need more as a cutting board.

Maybe we haven't bought berries for a long time. Maybe it's that we haven't done any mindful chopping, and we love that. We love that. Please take these lessons, take those moments, and turn them into actions in your life.

I look forward to working alongside with you in the rest of the summit and can't wait to see it in the next episode. Doctor Robert Graham, thank you so much for joining us and sharing your wisdom.

I can't wait to see you in the kitchen. Can't wait to see you in New York. Cook again with you everybody. Thanks so much for being with us. We'll see you soon.