Metabolic Reset & Gut Repair: The Longevity Approach That Works Transcript

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Podcast Introduction and Guest Background

Correct me. Do you know of any of the pharmaceuticals that are going to really make them better? And as a matter of fact, what you're leading me to is these, these pharmaceuticals cause more of the deficiencies.

Welcome to healthy choices with your host Ray Solano from Austin, Texas. Now here's your host, Ray Solano. Hi, this is Ray Solano, a pharmacist and owner of Prescription Dispensing Labs and here for another edition of Dr.

Talks podcast. And I have just an amazing guest today that I think everybody's going to really enjoy. The topic of today is going to be the two degrees of healing.

We're going to have our guest is Dr. Blaine Meir. He is a board certified in internal medicine and has extensive training in longevity medicine and has studied at A4M and got his fellowship and has had tremendous amount of ongoing training in this area of medicine.

You're really going to enjoy today's podcast as we really let people know, let them know that they have choices in their health care today and it really doesn't have to be a choice between mortgaging your house but really being able to make investments in your health so you really can enjoy it.

Our senior years, how to live without any chronic conditions. Dr. Blaine, welcome to Healthy Choices and tell us a little bit about this two degrees of medicine, two degrees of healing that you have, because it sounds really intriguing.

All right, thank you so much for having me on. It's a pleasure. And that's the great open question, right? Because I chose to sort of use that terminology because I'm a trained internal medicine doctor.

I've been in practice for 27 years in a small town.

Using Labs to Find Inflammation and Deficiencies

I take care of lots of Medicare patients, different insurance services. And I really have prided myself on that for years. I spent 20 years working in the hospital, ICU, and dealing with all kind of, you name it, I dealt with it.

And that was very fulfilling, but I also always was sort of knew that something was missing. I was always looking for ways to, how can I intervene here before I'm making rounds of the hospital?

How can I keep people out of this hospital setting? And I did the things that most people do, right? Develop programs, metabolic programs, weight loss programs, talk about lifestyle and intervention as much as I could.

But as you are well aware, and as your audience is well aware, when you go to the doctor in the insurance-based system, you're on a 10 to 15 minute time clock.

You get in the room by the time you say hello and catch up on the family and try to be a personable doctor with your patients, you have very little time sometimes to get down and dirty with what they're doing in their life and how they can change things.

And so that's always been really frustrating. And I've always been the guy running late at the end of the day because I've spent more time with my patients because I do like to talk.

and shut me up whenever you feel like we need to go to the next question. It sounds like you care. That's the most important thing. Especially in the state of Mississippi, there's such a need for people to be able to get information,

to be education in their health.

That sounds like that's what you're doing. You have no shortage of patients, right? that need your help and you could probably work 24 hours a day and still not even make a dent.

I've done that before. But, you know, some of what we try to do and maybe you can help us is some of the simple steps that people can do that are really going to change their life.

And, you know, we hear so many conflicting messages daily. We're bombarded with this and that. And if they take this pill or they just do this one thing, but maybe we can cut to the basics because you've got to make some small baby steps to get to make sure that they can get true longevity health.

Sure. Well, if I sort of address that by, when you come to the doctor, I would encourage everyone, you know, to go to their doctor and ask him, what are you checking today, doc?

What are we doing on my physical? Right. Because a lot of doctors, I love my, my conventional medicine, doctor colleagues, and I know how hard they work and I know how they get.

they get into a situation where they're just cranking out the same information and same labs all the time. But patients really need to ask for more. When I do my labs in my office, when people come in for their physicals, they're amazed at how much lab I do and their insurance pays for it.

And I'm looking for deeper issues. We know that, as you know, inflammation drives most disease, right? We use the term inflammation. I love the term inflammation because it really does explain that we need to attack inflammation to help prevent all diseases.

So there's ways to look with very cheap labs, look at where your inflammation is coming from. You know, things like uric acid and CRP and ferritin levels just right there can tell you a whole lot about what someone's doing with their inflammation.

And of course, nutrient, you know, you don't have to go and get these fancy micronutrient tests. I can do things like B12 and folate levels and zinc and magnesium.

And of course you get calcium and potassium, sodium electrolytes. You can, you can gain a lot of information doing that as well. So just starting with the basics and I sit down with my patients and say, look, I'm not asking you to do this because it's a Reddit and good housekeeping.

Okay. You have, you have a significant. nutrient deficiencies here. You have inflammatory changes here. So if you will go do this and get on a low inflammatory diet, which is the basic diet.

Ray, most people, I keep it simple for them. I have information on the Mediterranean diet sitting right in their room. They can't miss it. It hits them right in the face when they walk in.

I take it out for them and say, this is free. You're taking this and I want you to do one thing on this diet today.

Diet, Supplements, and Medication Tradeoffs

One thing. and you start thinking about it. So we just start there with the basics and then if I ask them to invest $50 or so a month on a core group of supplements, then they at least see why I'm telling them to do this.

I'm not just throwing something at them going, hey man, this is a good idea because it's a good idea, right? Hey, your labs are telling me if I optimize these particular tests that you can see your levels are low.

Of course, I do also explain to them that normal labs don't mean normal labs, right? Because, oh, well, my test looks normal, doc. Okay, let me explain that to you, right?

We do optimal here. Do you want to feel good? Let's get optimized, right? So let's talk about what optimization is. And then as we really push that, and I address that with them, and of course, that's what takes so much time to talk to them about.

I like to try to explain it to them. And then I explained to them again the next time I see them because they didn't remember, but we eventually get there.

Right. You know, that's your approach is exactly where we approach it as well. And I think I have a book here from. One of your, so it's so true, right?

Your, your blood doesn't lie. Uh, and the simple things that, uh, what you're talking about on simple labs, most people don't look at the trends and you sounds like that's exactly what you doesn't have to cost a lot.

They can make some simple changes in their diet. One of the things that I see when I go to the grocery store, I take too much time because I'm looking at trends and what people are looking, what their choices are.

And I believe strongly that if people prepare their food, they would save money because so much processed food is expensive. This is, you know, unfortunate.

You know, we've got kind of fat and happy and we forgot how to prepare meals. But now I think it's really a necessity. And if they can't afford it, that's even more the reason that they can't buy some of these processed foods.

So I think it's a start. I think it's exactly where you make one change into their habits. That's all they have to do. And I think one of the points you said, $50 worth of supplements Well, if there was a prescription medication, as we're a specialty compounding pharmacy, I don't have prescription medications that do the same thing to influence those labs the way some of these very specialized supplements.

I mean, correct me, do you know of any of the pharmaceuticals that are going to really make them better? And as a matter of fact, what you're leading me to is these pharmaceuticals cause more of the deficiencies.

So I tell everybody, look, I'm an internist. I write in my career, I've written more prescriptions than any doctor you know, I promise you. And I still will write prescriptions when they're necessary, but I want to be able to give you options.

And if I write this prescription for metformin or for a blood pressure medicine or for a statin, which I spend a lot of time deciding through lab work and discussions with my patients whether it's the right thing to do or not.

I also explained to them that we will be causing some nutrient deficiencies that we need to address. Right. It's exactly right. It's so simple. And then when we We look at people's insulin resistance and all of the things that are just bleeding off from that area if we just change their blood sugar levels.

This is why the GLP drugs are so effective.

GLP-1s, Peptides, and Metabolic Health

And that's a topic I'd like to ask you about. How do you feel about these injectables? What successes have you had in your practice with these GLP pharmaceuticals?

Because that seems like it's really changing so many habits for patients. Uh, no doubt. Well, of course, in my field, I've been using GLP ones for 15 years or so.

I was using the GLP ones in the beginning that you had to take two shots a day, right? At that time, those were not showing this weight loss craze. So, but I had trouble getting people to take those and I could, if they would, their metabolic syndrome would get better and I could prevent them from going to diabetes.

No, of course. I will just tell you, right? I am a big fan of GOP ones. Okay. But you know, you have to put a lot of asterisks behind that, right? Because it's just unfortunate that it's gotten to the point where it's so crazy out there that people can get ahold of them.

way too easily and even providers will dish them out and not have a metabolic program associated with them. With my diabetics and with my non-diabetics, they are on a metabolic program with me.

I do use a compounding versions of VLP ones for my metabolic patients that are not diabetic. We make them come in every week to get their shot. I don't send anybody home with a vial.

We have a conversation with them about their diet and their activities of the week. I just got my brand new body composition scale. I'm so excited about it.

So they're, they're going to really be able to dig in with that. It's going to be a follow their trends even more, more aggressively. So, so yes, as you see, and I see every week there's new data coming out.

comparing GLP-1s with some benefit. It's usually some chronic disease benefit, anti-inflammatory benefit from the brain to the heart to the kidneys to the liver and fatty liver disease.

I mean, I'm with you. It's all about insulin sensitivity, but there are some other things going on. with that peptide, and it is a peptide. I'd only like to call it a drug.

I mean, I know it's coming from pharmaceuticals, but it's a peptide. And I've done Jim Laval's whole peptide certification too, by the way. That's right, that's right.

So I'm all in on peptides. And so unfortunately in 2023, when the FDA overnight decided to wrangle 17 of the big ones, we've struggled with that, but those are the future of medicine for sure.

And these GLP-1s are just showing us just the scratching the surface of I think of what we're going to be able to do with these. Well, and you know, we are visiting our political action group is visiting on Capitol Hill in two weeks.

And we're very, we're optimistic that there's going to be a change because you can't give out a million doses and have less side effects than other pharmaceuticals and just ignore it.

that can change the course of medicine. So we're optimistic that we're going to have some sort of reform. And then, you know, we're really excited because we found out the FDA is some renegades.

I still think it's some renegades have decided that thyroid glandular is going to be considered a biological and they're going to restrict its usage and cause an acceleration of cost, even if you're able to get it, that'll make it a ridiculous out of touch.

So we think that this insane area of medicine, somebody is going to have some common sense approach. So maybe the two of them will open up an awareness because it seems to, it probably will catch some eyes if they try to do this three years ago and it blew up.

So we'll see. But, you know, one thing you've noticed that the GLPs, these peptides have changed behavior of patients. You know, everything from the snack food industry has seen a change in behavior.

We've seen portion sizes in restaurants have to be able to be modified, but there is the biggest drop in alcohol usage in close to 50 years. So it's astounding that the sales of beer and wine and alcohol have changed because these medications change behavior.

asking for those, they don't have those same urges like they had before. So all in all, even if they didn't lose a bunch of weight, they changed some of their eating habits.

Sounds like we'll bend that curve for those tremendous weight gains that have been going on for 50 years. Well, yeah, you know, but if we can, we can reduce the amount of nothing against my bariatric surgeons, but that's high risk surgery, right?

And even if someone needed to have that surgery, if you could gain some, some health with the GLP one prior to surgery, I mean, this is so, there are so many benefits I see.

And I just, as long as we just stay within the guidelines and do the right thing for the patient. make sure they're getting their protein, adequate protein in.

Healthy protein. Well, of course, yes.

Gut Health, Food Sensitivities, and Healing

Healthy protein. Now that we're seeing these amount of protein, there is junk protein that we add protein that I don't know if it's going to be inflammatory or non-inflammatory, but at least people are understanding what protein is.

And there's not a lot of protein in French fries. Yeah. Maybe they'll come up with a high protein potato, right? And then all of a sudden people will get excited.

Just get that good, healthy, organic piece of meat next to that potato, please. Yeah, please, please. Well, tell me about your website. You've got a program you mentioned.

offline that people can go online and, and learn. Yeah. So my website is blainemiremd.com really simple. I've developed my wife and I've developed a, it really is a calling card for me.

I, I do, I do a lot of things, right. And through my career, I do, uh, you know, I'm matter of fact, I'm in my scrubs today because I have colonoscopies in next hour.

Okay. My patients are waiting on me for that, but they knew to come in late today, but that's probably sleep right now. Right. They're resting. But I was I've been a very preventive oriented guy.

So I do that. My wife and I have an aesthetic practice we've had for 20 years. We've done laser. We mainly are getting in the regenerative side of aesthetics, which is cool.

And so I have that information on the site, but I also have some other educational things about basically what's integrative medicine. What's longevity medicine?

What does it really mean? Vascular medicine, which is really, really important for it to be part of. And as you know, longevity medicine isn't just some really cool esoteric thought.

It's taking the most important pillars, structural pillars of our health and digging deeper. and looking deeper down to genetics, down to micronutrients and gut health.

Of course, I'm a big gut health guy and I can tell you my whole story of why I really am so passionate about this is like most of, most doctors and, and, and professionals that get into this space, something happened to them personally that really drove the point home and drove that passion.

And that was, that happened to me through gut health and hormonal health. And so I, I'm my first poster boy when it comes to that. And I'd be happy to share that with you and your audience if that would be something collected.

Well, you know, it all starts in the gut. And it sounds like you've got some firsthand experiences with that. You know, we've got some, you know, some interesting peptides or azotide KPV that have changed the course of healing the GI, the gut that we have never seen before.

what we have been able to get modulate that zonulin, those tight junctions, the mucosal layer. And so people can eat or be able to live life with everybody else normal.

And unfortunately, you can have nutraceutical or pharmaceutical is not working, just don't continue it and start and take double the amount, switch it around.

You know, many times we're finding that The solution, many longevity integrative medicine practitioners say, well, you just have to exclude these items from your diet.

Well, you probably do for the items that people have a tolerance to, but we see people, maybe you do as well. that they restrict you from everything. And so the stress level becomes enormous and then they're end up being depressed and we have another problem on our hands, but, you know, fix the problem.

I'll say my big, the big programs that I'm developing online and my membership model that I do here, the very first test I do, and I tell all my patients that sign up for me on this, on this program is the first test you're getting is a gut sensitivity test.

And the reason I do that's, that's a food sensitivity test, a hundred and 130 some 130 so foods, but coordinated with that is the gut marker evaluation.

And of course, you know, well, this is what you're talking about when you're talking about the peptide, where it's looking at markers that, that basically tell you if you're inflamed on your gut wall, right?

Zonulin occluded in LPS, Candida overgrowth. And that really then lets you know, Hey, you have this leaky gut syndrome scenario or not that's being driven potentially.

potentially buy a few foods. And sometimes I'll have 20 foods come back on this test, right? But I know, we know that it's not all 20 foods causing the problem.

It's usually one or two main groups. The rest of the poor foods are just innocent bystanders. They're sneaking through those little gaps in the wall of the gut and your immune system has nothing better to do.

So it's going to attack it and then develop antibodies as well. So the program is great because you don't have to quit everything. It sort of lets you know these are your big big issues to tackle.

And then that's when I jump into peptides with, especially for me, I had irritable bowel syndrome diagnosed at age 10. And I spent my entire life seeing doctors taking charcoal and acidophilus.

My mother was the head of the game in the natural field. I don't know if it helped. I'm embarrassed to say this, but I'll share it because in high school I was a pretty good athlete and And if I had a game the day I had to have a note from the doctor that basically told my high school teachers that I didn't have to ask to go to the bathroom.

Okay. You know, it was, I went into college, med school training, talked to, you know, got had all the lab tests you could have done. And you know what I was diagnosed with?

a sensitive stomach, irritable bowel syndrome, right? And I spent my whole career and you know, you know what conventional doctors do for irritable bowel syndrome.

They treat the symptoms, you, diarrhea, constipation, bloating. Here's some old drugs here that'll help. Used to be, used to be Paragorac, remember? Paragorac.

Right. That's pretty good stuff. It was short-lived, it didn't fix anything. When I was sitting in an A4M GI module doing my fellowship and they were presenting this concept, I thought they were all looking at me.

I was like, wait a minute, this can't be the case. I ran down that hall so fast to the vendor and had my blood drawn.

Oh, I could have been a sprinter.

And within two weeks, I found out that I was gluten sensitive in the delayed hypersensitivity reactions in my immune system. I tested negative for celiac twice, right?

Three weeks later, I was the guy I always hated. I was the guy that I was like the perfect gut guy. Three weeks. Well, it took. But I knew, I knew the foods.

I got immediate loaner protocol. I did throw in BPC and KPV at the time. It was, this was six years ago. So it wasn't, it wasn't quite as known yet, but I was, I was amazed.

I'm not throwing conventional medicine away, but I was really angry at conventional medicine for a minute because I'm like, and I would tell colleagues about it and like, well, there's not enough literature out there.

There's not enough documentation. I said, well, buddy. I'm enough documentation for me and my patients. And since then, that's just been a big, big move for me.

As you know, you treat the gut sometimes, you get rid of Hashimoto's thyroiditis, you get rid of, I have a sweet 70 something year old lady who got rid of her psoriasis.

She had had plaques on her skin for 50 years straight, never without a plaque. And I talked her into testing. And within a month of putting on a protocol, she called me, I'll see her back in six weeks, right?

Within a month, she called, I'll say, oh no, here we go. She's going to be complaining about something or she can't tolerate something. She called me just to say, thank you.

You know, I can't believe it. I haven't had a plaque in three weeks. I've never gone 50 years without a plaque. I'm like, you know, this is amazing that sometimes, not all the time, tell your audience, not all the time, but sometimes that gut inflammation, which we know that's the major driver of auto-immunity inflammation in our body is from our gut.

Sometimes that is a big part of the answer for a lot of these issues. And I think that we finally realized that area underutilized or under not really understood area of medicine was the most important area of medicine.

So once you go to that's it, that's, you know, always we're looking for the thing that converts people, the thing that change that turns their heads that they, they give you that phone call, like you said, and say, thank you.

That's an area that you start on because that's the entry into all the other chronic conditions so that when you start there, then you get people believing, oh, you know, I feel better.

This is worth it. This is worth the sacrifices in some people's mind. Uh, always say, just give me a month. Give me four weeks. That's right. That's right.

Make the decisions. Give me four weeks. Yeah. I like your approach.

Programs, Telemedicine, and Closing Remarks

Well, as we, uh, as we're wrapping up here, I just want to make sure we get your website information out and your contact information because you, you definitely giving a fresh approach, uh, and a sensible common sense area of medicine.

So, uh, you, you, you see patients for telemedicine is I understand as well. Well, so I'm developing some programs that I can do if they're not in my area.

These are, you know, cash-based programs and certainly so that if people are willing to sort of invest in their

health, this is the direction I'm going in.

I do a membership in my practice as well, mainly for my traditional practice locally, like I mentioned in the beginning. I'm mainly becoming oversight and educator for my nurse practitioners that I'm here to try to teach them some of these same values that I've learned in practice.

And so if someone's interested in checking me out, they can go to blamemeermd.com. If they're interested in reaching out to me, we're in a development phase still on the programs online.

So I don't know for sure whether or not what we can offer or not, but I'd be certainly happy to talk to them. Well, it seems like you're committed to helping patients like we are as well.

We're always want to put you on as our referral list. We have people that are always looking for practitioners that care and definitely you do as well.

check out our website, pdlabsrx.com, pdlabsrx.com. I did. And, you know, just to, if we can help you with your patients, we ship all across the country and we're following the leading edge of unique pharmaceuticals and we're really excited if the government allows us to work with physicians and practice medicine and get, there's such a huge treasure trove of new pharmaceuticals that probably have the least amount of side effects that I've ever seen for ever for, for patients.

So we're, we think this could be a new era of medicine, but all we can do is keep on hoping one day is sooner or later, consumers and patients are going to take control.

We'll see how this works. I love it. I love the concept and appreciate you and what your team's doing to push that agenda. That's so important for us, practitioners like me that want that space to keep growing as well.

Great. Well, we're going to have you back on the show again. Hopefully there's going to be a lot of changes in the next three to six months for me and I'd love to come back and talk to you.

Maybe I'll have a podcast by then and you come talk to me about that. That's exactly right. Well, you're listening to Healthy Choices podcast by Dr. Talks.

And we've had just a great interview today on giving people the next chapter in longevity medicine. So check us out for our next edition of Dr. Talks Healthy Choices.

And our website is pdlabsrx.com for recordings of this podcast and contact information. Thanks again. Take care. All right. Great show. Thanks again. Man, thank you so much, Ray.

I appreciate that. All right. And look forward. It will be exhibiting at A4M in Las Vegas. OK, I'll be there. And we're going to have some unique skin care items.

I think you'll be really good. Yeah, I wonder. I'm definitely going to reach out to you guys. I mean, I've used out of what, who I've mainly used for, for some, uh, some peptides and stuff is formicayo.

Cause I think I've met, and I met them in, uh, a four M and Chris Fisherman and their, their group comes to work with them as well. So Jim does work with everybody though.

Right. He does. He just, you know, we're, we spread it around. We, uh, There's definitely capacity issues of who can do what at what time. So we've got some interesting things that we're working on.

We'll share with you. Okay. I'm gonna reach out to you. Stay in touch, man. It was such a pleasure. I appreciate you giving me the time. Well, Blaine, take care of those colonoscopy patients.

Yeah, I'm heading over there right now. All right. Take care. Take care. Bye. Bye. Thank you for listening to Healthy

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