Mr. USA Meets Modern Medicine: Rewriting the Wellness Playbook Transcript

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Podcast Introduction and Guest Teaser

Walking was the most important thing. People understand if you want to burn fat, oxidative phosphorylation is low intensity. You want to go out there and run high intensity and Berry blah, blah, blah, blah blah.

You really I'm burning fat. You're burning sugar, which can help with your BMR down the line. But if you want to just get started, I'll walk for 45 minutes.

You know, if you're off of your pace on the treadmill easiest. I mean, I do all my work, my emails, I watched, I don't know how many TV shows I watch because it's very low intensity, yet it's hard for me to actually put fat on.

It's just common sense. The way you do it. You combine the right nutrition, the right hydration and the right medicines, peptides, whatever else you might be on for what your goals are.

You know, staying healthy is one. I hope you one of the easiest things you can do. Being unhealthy is one of the funnest things you can do. Hum. Right. You know, it's it's a balance between both, Hey, everybody.

Thanks for joining us again on the MD Unscripted Podcast. I'm your host, Doctor Clint Carter, and I am thrilled to introduce you to a South Beach superstar, doctor, Ivan Russo, co the founder of lifestyle medicine in Miami Beach.

But more interesting than that, he started as a two time Mister USA international fitness model, turned into a doctor that fuzes science and lifestyle to redefine what it means to be healthy in the modern world.

I can't imagine where this is going to go. I can't wait, Doctor Russell. We'll have you introduce yourself a little more detail than that, but my teaser question for you is what if your doctor could help you reboot your entire life and not just prescribe a pill for your symptoms?

You know, go imagine. So hey, thanks for joining us. Heck yeah man, thank you. And again, if my doctor could do that, he'd be my new best friend, that's for sure.

You know, and unfortunately, no, I think every doctor's mission should be that.

From Fitness Model to Lifestyle Medicine

And, you know, you see, time and time again that, you know, the, the, the, the Hippocratic oath is always, you know, you know, do no harm to your patient.

But, you know, it's kind of scary that the third leading cause of death in the United States is doctors. So it's a situation, a whereas I think this whole new wellness revolution, if you want to call it anti-aging, functional, integrative, I know there's so many different words you could use for it now, but yeah, basically I call it common sense medicine too, where we're basically trying to sit there and put the ideology in that and in the in the philosophy of treating one's emotionality, mentality and physicality back at the forefront of medicine and not bending a need a big pharma or insurance companies or just the overall, you know, juggernaut that is traditional medicine.

I mean, I love obviously, I love what you're doing. And, you know, my listeners understand that we're doing a direct primary care type business model.

And what that does, it allows us to take care of people the right way. And so what you're doing is super interesting. I can't wait to dig into it. But start at the beginning.

How did you go from Mister USA to founding Lifestyle Medicine? Well, it's funny, I actually never want to do anything with medicine. You know, my father was a chiropractor.

My mother had her master's in psychology. And then of course, my brother had to go and get accepted to medical school at a high school. So that kind of put a lot of pressure on me.

I was happy playing hockey. I was accepted to play professional hockey when I was 16. But, you know, as as older brothers do, I know the, the, the younger one, which was me had to kind of always try to one up, you know.

So I actually also got accepted in medical school. At high school, I truncated all of my, my undergrad in two years, went directly to medical school. But luckily enough, I got to do the whole do you want hockey there?

I started bodybuilding, did very well with that. That turned into kind of, you know, the international modeling, which was kind of interesting to say the least.

Yeah, I and surprisingly, the first year of my medical school, I was actually accepted to run for the Mister USA Pennsylvania title. I went to Boston and lo and behold, I actually went to Mr.

USA, which was kind of fun. I didn't expect to win it. You know, me and my me and my mom went up there. I think I got a little too drunk before the show.

Yeah, maybe I was a little loose for it. And then everything just kind of took off from there. I actually had to take a year off of medical school. I went to com, which is now, I guess, instead of the largest medical school in the country.

As an osteopathic school. And then from there, everything went crazy. I did the Oscars fashion weeks, I mean, you name it, I got the same way grades people didn't.

But the entire time for my my medical school had told me that I have to pass the complex part three as a first year if I wanted to get back into medical school.

So I'm doing fashion week and study in nephrology and coming out, doing walk and coming back and all this other kind of crazy bullshit. Yeah, I was great though, you know, it's a very good thing.

And I think the entire Mr. USA thing and the modeling, the bodybuilding really gave me an appreciation for not only what the human body can do, but also where medicine, I think needs to go, because you'd be there with people of this crazy affluence, you know, celebrities, button pushers, as I call them, the guys.

You can sit there and change, you know, EIA, you know, economic trends with, you know, with, with just shifting around money. But they all had the same issues.

They were they were too fat to get into their Ferraris. You know, they'd spend all day on your table and had a head or whatever it could be. So I kind of put my hat on.

I was like, maybe I can fix this as a physician. So granted, I was 24 at the time came out of that. You know, I, I ran through medical school. I thankfully one that, you know, one of the top honors which was the Dean's award.

Oh biotic article, you know, to sit there and, you know, I had to graduate with my class on the reboot take to, take that award home. That's right. And then that just kind of came out.

I got accepted to PMA, which is physical medicine for rehabilitation. There was an MBA program here in Miami. I started my rotate internship, and I just said, you know, to hell with it.

I don't really like the traditional medicine thing. I knew what I exactly what I wanted, so I backed out of it. Luckily enough, the the program directors named Doctor Sherman was gracious enough to write me a very nice letter.

And I sit there and say, don't, don't blacklist this kid. You know, I like what he's doing. Then I came to Miami and I just I didn't know anybody. I set up shop and next thing I know, what I was the Christian Troy out of Miami Beach from Nip Tuck.

You know what I mean? My my my main goal to begin with. As exciting as your beginning was, you couldn't possibly have gone in traditional medicine. I just couldn't have compared know that.

I know that for sure, man. So early on, you know, you go to South Beach and, you know, when was that 2015, 2012.

Precision Medicine and Diagnostic Testing

So I got to South Beach, 2010. I was theoretically still not I didn't have my license yet, but the the place was called the Miami Institute. It was out of the Four Seasons.

It was kind of at very high end fat or a high end surgery suite. And they kind of brought me on early, and then I kind of grew into that. Then just when it international took over the Delano and then opened up lifestyle did well.

So back in those days, doing, you know, outside the box stuff probably was under a lot of scrutiny. What was the doctor I got was snake oil or not? It was a front cover, the Miami Times, and there was a good article or not, but it turned out to work out very well for me in the snake oil, for sure.

Yeah. This darn snake oil just keeps working. I don't mind working for everybody. I know what's going on, man. how is what you do it? Lifestyle is it functional? Integrative?

What are you doing exactly? The super good question. And I still have trouble figuring it out. I'm not gonna lie. I say it's it's basically common sense medicine.

My biggest thing is it is diagnostic testing. I actually also have a podcast called Lifestyle Medicine. Oh, sidebar. Sponsored by Access Medical Labs, which is which is the lab company I use, and it's a situation where I is, I think precision medicine, which I think is the most correct term.

I guess I could call what this is, it's all about diagnostics. And, you know, you can sit there and I tell everybody, you know what, what's what. You have peptides and hormones and IVs and hyperbaric.

These are all pieces of a puzzle. And the picture of the puzzle is actually the actual the the diagnostic testing because you can't really I mean, it's it's not a one size fits all.

I think the biggest pitfall of traditional medicine is that it's one size diabetes is diabetes. No it's not. No, I mean heart disease. No, it no, it's not you know, I mean like it's specific for each person.

So with with how I operate node, I, I don't see anybody unless they have a very in-depth blood testing panel. I do blood and urine and then from that, I mean, medicine gets so much easier because you actually have the picture of the puzzle you're trying to put back together instead of being like, well, maybe it's diet, maybe it's hormone, you don't know it and test it.

It's it's just great to sit there and see how actually easy my job is, because of the amount of labs I'm able to actually see. And then patients come here and again, you know, I, I'm not a cheap physician, but you know, it's where I'm at.

And it's also, you know, I, I give myself to my patients, you know, and like I, I think I think you can agree I think every position should be the hero to the rational patients.

You should live the lifestyle. You should look the part. You know, I always tend to tease all the interviews I do. You can't take weight loss advice from a fat doctor.

That's true, you know? I mean, I could true, it's true. And I think, you know, you need to go. I mean, I, I think healthcare practitioners like, especially with with what you're doing with my M. D.

Celek I think it's fascinating. You know, you're putting the power back into the actual patients, which. Yeah. Great. You know, it's not it's not an insurance company. It's not a big pharma.

It's not a no. The whole system, if you will, you know, you're empowers. You're in a position to make the the best correct decision they can make in the patient's best interest.

The patients need to be empowered as well. They're being told at from their other physicians that everything's fine on their labs and that you I guess you just you're getting old.

Deal with it. You know? You know, it's like that doesn't leave them with any options in here. You're able to say, no, look, this is wrong. This is wrong.

We can work on this. And all we have to do is, you know, let's start going in this direction. So I love having, like you said, deep dive diagnostics to show your patient with direction.

They need to go back. Yeah I know again. Again it's it's a it's the most important part of my business. Everybody and everybody will sit there and be like, why am I spending all this money on diagnostics?

I'm like, because this is where you start. It's the starting a lot, you know? I mean, like, if you want to jump the peptides and all the stuff, that's great.

You're going to spend even more money on that. But it might not work. It might be pissing in the wind, you know, I mean, like everyone's zones, stem cells and this, that and the other.

I saw it on Joe Rogan site. Yeah. But I mean, like, you know, you have spent it. That stuff is if your body's not maximized to it, then you're going to be getting 10% of what you paid for.

So you know, getting that foundational aspect of your cell, the URL, your senescent cell clearances and things like that to build your foundation on, I think is the most important thing.

And you can't do without diagnostics as well as a trained eye to sit there and look outside the box, which is I think, you know, that's why I love it. Yeah.

How can people like you? You don't look linearly. You look, you know, pragmatically and well, you know, God forbid we have to run the labs again to see what's working. Right.

You know. Oh, share a little better. Let's let's run them again. You know, again, I would say, though, that first one is your report card. Every lab after that's my report card as long as you follow it.

So I, you know, I make sure I follow everybody on Instagram. So they come and say I didn't lose any weight like you just spent $10,000 on a bottle of live.

I mean, like, I know why you didn't lose away on bolster the bowl glitter. You know what I mean? Like, so you know, I always thought they say labs are great.

A great measure of how not only you're doing as a patient, but how your doctor is actually prescribing the medication you're given. Oh, I love it. Yeah. That's great.

I don't like having a report card for me as a doctor, though. I don't know that that that's too much pressure, man. It is. I'm not going to lie, you know, but yes, I sit there.

Make sure you can. You can figure why things are going on. And it's funny. I'll sit there and see the two biggest

demons I have to slay when it comes to the industry is not side effects.

It's nothing like that because everything in this industry is, as I'm sure you know, is very low risk, high yield, it's hydration, it's stress, it's sleep and it's nutrition.

You know, the amount of people who come in who under hydrate and actually not overeat, but underage on these programs. It's actually, you know, I'm starting your metabolism.

I'm starting everything back. You have to eat like a 20 year old, you know, you want better hair, skin and nails That doesn't just come out of nowhere.

You want you muscles, you want better. But, you know, mentality that's just not something that's just conjured up. You know, I had a good will and good bike race.

It's a lot of protein to feed that stuff. Yeah those and people don't get that. I say you you have to increase your water by 50% and increase your food by at least 25% to really make these programs work.

And again, that's, that's on you. I can lead a horse to water. I can't milk it. You know, I, I can tell you what to do. You don't want to do it. It's just like shit, you know?

Where do I go with this one. Oh that's great.

Stress, Emotional Health, and Patient Context

Well, okay, so that leads to, you know, I've seen on your website and what you're doing, talking about mental, emotional, physical, like the environment that the patient creates in and around themselves.

Tell me about how that comes into playing into transforming your your patient's health. No, I guess stress reduction is is one of the most important things.

So I'm gonna bring it back to diagnostic testing for a second. Diagnostic testing. All I all I'm doing is actually looking for any types of stress or inflammation in the body.

That's it. Yeah. I mean, whether it's low this or high, this is going to be a result of inflammation of stress. But a lot of things that people don't do is they don't take really good in-depth intake forms, you know, and ask the right questions.

How is your sexual health, you know, hard, that is, to ask a 50, 60 year old woman, you know, I mean, like, but that's the root of what's going on. Her husband's not having sex with anymore.

She's the she's anxious. She's always going to be in a state of inflammation or or depression or all these other different things. Same thing with a man.

How are you waking up with, with or with erections anymore? It's a hard conversation to have with a CEO of a very big company. But that gives me such, such an idea of of what might be causing the stress in their system.

So taking these big things on mentality and more most importantly, emotionality, which I group spirituality I group lifestyle, I group who your friends are everything into that aspect.

And it's probably I mean, everything is equally as important as the other, but I think a lot of physicians overlook that, that whole emotionality aspect of it, when that's just as important as your physicality.

Now, you could just throw some Lexapro at it. They'll be fine. Right? Yeah. As the dagli, how do you feel going in emotionally, mentally, spiritually?

It can't disconnect that from their physical health. it's one and the same I love it so so you do some labs. You do a lot of labs. You you start working with them on their stress and inflammation.

What tools do you have? What do you what do you use in their in South Beach these days to start intervening? You know I suspect it's it's, you know, more fun and exciting than we have in Northeast Texas.

Why and what is and again like so I, I go I0I don't know maybe I go to Texas super house but I'm not going to lie. Oh hold on here. But no, it's funny because like I would say, I'm a student of life.

I'm consistently learning. I'm I'm kind of a nerd in that way. And it's fun because I've been using things like not methylene blue, I mean, all these different things that you're just now hearing about since 2010, you know, I mean, and it's funny because before I would, before I was even a licensed physician, I was, I was, I was getting into this kind of stuff.

So it's all about learning the basics, you know, learning how iron works in the system, how it transports oxygen was probably one of the most important things I've ever learned.

And now you'll see every physician throwing methylene blue at patients, not even knowing how it works. Then thing with actual NAD, nobody really even knows what it does.

They just. I saw this podcaster talking about NAD saw prescribe it. No go back and learn the basics of it. You know, I mean like so that's what I've done my entire career and that's why I've been using I mean, I was actually the first position to write the protocol for IGF one, 2 or 3, which was the first peptide to actually hit the market back in 2014.

So this whole craze of peptides that just came out, we were actually the forefathers of it way back in the day. I wrote the protocol and what you should do for healing this, that and the other and it was there and see how everything now just kind of pops up from it.

All these people coming out being like, I'm the godfather of this. I'm like, man, good Lord, you know, you have a million followers, but you're an idiot.

it's someone's doing nad man. They, you know, hopefully they understand how it works. I pulled up the bio that, you know, I have. Funny, it was somehow a stash in my office when we moved.

Have that old biochemistry poster that my roommate and I had all marked up and stoned and there's nad. it's everywhere. And I was like, well, no doubt.

Yeah, I wouldn't mind having more of that myself. And you know, in a little bit after Covid I had a transverse myelitis, you know, demyelination of my spinal cord.

I couldn't figure out what it was. Finally we found it, got it to go away. And then a couple years later, it comes back again. Like, oh once bitten, that's, that's that's, you know, an accident twice.

That's a problem.

Peptides, NAD, and Foundational Health

And so both times we did nad neuro infusions and I'm doing a bunch of other junk, of course, but but but yeah, it's like, you know, what else do I need to be doing to give my body what it needs to not do that anymore? No.

For sure. And again, that's where I get it. Starts with starts with with with actual diagnostic testing to understand and then it builds up from that.

I find a lot of the mercury toxicity grenadiers urine sushi. But I've is everywhere now. You know I mean like I got more sushi in Texas than we do in Florida.

We got plenty. Yeah. Exactly. Right. And then again, of course, the whole, you know, I would call it amalgam fillings, you know, where the mercury is put into it.

So the amount of just mercury one one metal mercury toxicity is probably, I'd say, the silent epidemic in this country that nobody really understands.

Then you have arsenic, you have lead, you have hidden pathogens like KB, EBV and Zeta ly, all these different things that once you start on packaging what, what that person is, you find all these small little micro fractured stresses that just turn into this gigantic turn into Parkinson's at 50, 30, a cancer.

And it's it's all these things like we're getting cancer and autism, all these weird diseases. And I was like, well, where is it coming from? The vaccines, maybe.

But I mean, there's so much more going on, you know, I mean, like, there's so much more we could look at, right? Oh, yeah. Vaccines get a pretty bad rap.

Not obviously for the most recent ones, but the point being is that there's so much crap in our diet. You know, those in our bodies, it's. We're walking around under attack at all times.

So vaccines aren't even on my list of things that are causing this. No, no. However, out here, here's the worst. I mean, the food is just disgusting. The food is there.

And you know one thing not to get political, but I am hoping that the new regime starts cutting out what they're allowed to put in our food. Yeah, I hope they start moving their asses.

They've had about 6 or 7 months now. Let's let's see some movement. It's been a lot of talk. We know action right. And without however the you know then you just talk to your patient.

Be like does it look like food. Was it food before they put it in that package? Then don't eat it. You know. How many ingredients are there? You know, I look at a ketchup package from here versus France.

It's mind blowing, you know? Yes. It's crazy who I, in most of them are, you know, biochemical names. You know, you know, your organic chemistry. You're like, oh, yeah, I'm having like, say roast mallard wherever it's, you know.

Yeah. Insane. It just insane stuff. Well, okay, so you know, with everything that you're doing with with the way that, you know, you've been doing it for a while, changing lives.

Tell me, where do you think the future's going here with, with kind of what you're doing. And then the people that are following your in your footsteps and, and walking alongside you in this outside the box, we'll call it common sense medicine movement of yours.

There we go. Well, I think there's a short term and an actual long term. I think the short term, you know, there's always a buzzword every year. You know, it was nad that it was methylene blue.

I think the biggest one coming up now, I do a lot of lectures for and conferences for like a forum and things like that. I think senescent cell clearance is going to be the big new buzz.

Yeah. Like word coming up here. Because again, getting rid of of organic waste is something that nobody pays attention to. The auric inflammation zombie cells, all that kind of stuff.

I think you're going to see a huge push for that. We do an amazing program here with that. It's really, really unique. It's a one month dump. You do it four times a year and you just feel fantastic.

I mean, whether it's call bags, rain or dance or whatever it could be, but I think the obvious long term play is going to be a I. I'm actually in the process right now. I partner with two really unique people.

We're we're developing a really unique eye that I haven't seen out yet that's going to kind of bridge the gap between doctor patient and doctor fulfillment.

Which I think gets pitfall. You know, I think, you know, there's if you can kill a patient with, with all this beautiful information, but if they aren't going anywhere with it, it's just masturbation, you know, I mean, like, and then you have the physician who sits there and gets his information, then they got to go through and have their staff pocket this pharmacy, talk to that whatever could be.

So we're kind of developing something almost like a Jarvis from Iron Man or everything's, you know, all in one click. Boom. You're ready to go. We're we're incorporating the wearables.

That's something that's super, super important I think either. Yeah. Or whether, you know, you're, you're in a urinate a toilet, all of a sudden, you know, you know all your, your all your vitamins or you're gonna do it over the wearable aspects and it's like, hey, maybe you should try some meat today.

Or something like that. So I'm super excited about that. In the actual long run, I do caution everybody because there's so many eyes out there now and all the practices you have to understand.

And I you know, I think we've talked about this a little, you know, in a previous podcast, but, you know, you have to understand that the AI learns from traditional medicine.

And I, Ncbi, PubMed, all those different things that traditional doctors hold is their Bible or their Koran or whatever widget you're with. Yeah. And the problem with that is, you know, there there's there's three big things that I always try to caution people.

Number one is that the third leading cause of death in United States is manpower, is a medical error.

Future of Longevity Medicine and AI

Number two is the revolving door policy of the HHS is where the I think it's 40% of the high paying executives then transition into big pharma jobs. So they're kind of after each other's back.

And the and the last one I think is the most diabolical is that 48% of the FDA, FDA's salaries paid for by user fees, by Big pharma. That's like how that's like Al Capone paying that shit by the Chicago Police Department.

So don't don't don't get after me. Yeah, but it's scary to see that the largest fine in the history of humanity was paid for by, by by a big pharma company.

And then we give them a contract for vaccines in the next year. You know, I mean, they've openly admitted to sitting there screwing over millions of Americans, pay $1.2 billion fine, which is a slap on the wrist.

And then they get a one for $149 billion contract. Yeah, there's the situation where as I is learning from that. So all these linear ChatGPT is this that another it's way too linear.

So you know, your your patients bring this in. It's it's like yeah, I get it. There's some great information here. But when it comes to it you still need precision, the eyes on it.

And I think the long play is eventually have a knee. The AI that's actually, I guess common sense smart. Not just books. Yeah that that has and from you know the problem with AI is it has a limited knowledge base.

It it it know, it knows what you gave it to know. And so finding the right knowledge base and, and platform from which for it to do its job, that's really where we need to be.

An end user always needs to be a human in the loop. Because of course, how often does I just tell your patient that they're dying of cancer? Like almost every time on a statin get on blood price like cock off the Staten train, you

know, I mean like, yeah, you know.

Yeah. Well, I could do I could take a statin and just stay on the couch or otherwise I'd have to go work out, and I have to stop eating what I want to eat and convene it.

I don't know if you've seen the movie Wall-E. We're all turned into the those. Yeah. If humanity and Wall-E, I mean, very quickly here. Yeah, yeah, that was that was a little too close to home.

Wait for that. Oh, well, you know how for fun, how do you stay grounded living in Miami Beach and running this high performance clinic of yours? And you know, you know, rubbing elbows with the rich and famous and and changing lives just makes you feel good.

How do you stay grounded over there? Oh, it's a it's quite a process. And again, as you can see by the, the bipolar nature of my office here, I always try to take a rather, you know, in-depth, unique trip quarterly.

So, you know, take, take two weeks off. And again, I know not every you can do that. But if I didn't do that, you know, all work and no play makes Jack a very dull boy.

Yeah, it makes Ivan a very, very dull boy. So I'm always trying to, you know, consistently do things I haven't done before. When I was 22, I started a top ten list of three different categories skill, milestone, and adventure.

And every year I have to check one of those off each time. This year I got the check off I had on there high five a gorilla and I actually what was it three weeks ago?

I got my ass grabbed by one in Uganda. Oh no, I got a scary I'm not going to lie, I'm a silverback. Grabbed you by your pants when he's charged, and, But tell you what, it's a hell of a story.

You know what I mean? Like so. Yeah. So, so so it's things like that always getting, you know, consistently, you know, trying to improve myself. I taught myself the piano last year.

What else are work on the violin? You know, there's a lot of unique things that I do here. Exercise wise. I'm going to, you know, start boxing. The master's class, just keeping yourself different and dynamic.

You know, my father gave me some of the best advice before he passed away. It was always be the most interesting person at the table. And that's what I always try to be. No matter what.

Well, that's a high calling that takes a lot of work. So, you know, you have to be very, very A. D. D., bipolar and BPD all at the same time. That doesn't help.

But if you just think you're the most interesting person at the table where you're not, then you're just the most annoying guy at the table and the most annoying for the day.

At least you, you know. And hey, listen to give the gorilla a little. You were probably dressed a little skimpy. You had probably had the dumbest T-shirt. I'm okay.

I there was a pro, that's what. what's your favorite biohacker daily habit? Whatever you want to call it that. You know, you advise your patients to to go to.

I think sleep health the most important. You know, I'm 41. You know, I've slept, you know, 13.5 years of my life. If you equate out, you know, eight hours a day.

And I think nobody gives everybody think sleep is to shut your eyes and go to sleep. Sleep is more complicated than almost your cardiovascular system.

With how your brain turns on, turns off, how REM sleep you repackage your mind. During Delta sleep, you release

things like growth hormone to rebuild your body, you know, and the sleep cycles, how many you have a night.

I mean, it's a very intricate process. And you know, what you do before bed is extremely important. And don't get me wrong, it's not like I'm a perfect sleeper.

I do have cup ties and stuff that help me with it. But you know, three three nights of solid sleep is better than any medication on earth. Any medication, three nights of solid sleep.

You'll you'll fix anything. So I always try to at least get, you know, 3 or 4 good night's sleep. If I'm not out being crazy and doing things I shouldn't be doing, you know, I'm still 41, you know?

I mean, I might be old for some people, but I, I, you know, I, I pretty much act like I'm, you know, 12 still. Oh. So I think sleep is one of the most important ones and also, you know, just diet, diet, exercise, it helps you burn off a lot of that pent up aggression, that pent up and stress system.

So whether you do it weight training, yoga, whatever it could be. I mean, I'm more of a boxer slash weight guy just from, you know, growing up the way I did.

But get out, get active and go have some fun.

Sleep, Exercise, and Daily Biohacks

Well, and you know, I have so many people with, you know, depression and anxiety and, you know, there's so much going on in the, the inflammation, all the other things too.

But they don't exercise like, oh no, no, no, no steps at step one, two and three is go for a walk. Do some. See this thing in the world. Let's go. You're going to feel so much better.

Sure. We're we. Yeah. We it's not. Get the cart before the horse here and then you know all of the the data that's coming out about longevity. It's like we knew muscle mass and strength was important, but we had no idea which vertical, you know.

And again, like I said, right now I'm about 215 pounds and my my resting metabolic rate is 3200 calories. So I need to wake up and you consume that. Not just that not lose weight, you know.

And that's how important that is. And again, like if you if you if you met me, man, my, my mind works about a million miles a minute. My mouth two miles a minute.

I mean like so situation where I got to kind of balance that out. But exercise you know what I was doing the whole Mr. USA thing, the professional body or the bodybuilding, all that kind of stuff.

Yeah. Walking was the most important thing. People understand if you want to burn fat, oxidative phosphorylation is low intensity. You want to go out there and run high intensity and Berry blah, blah, blah, blah blah.

You really I'm burning fat. You're burning sugar, which can help with your BMR down the line. But if you want to just get started, I'll walk for 45 minutes.

You know, if you're off of your pace on the treadmill easiest. I mean, I do all my work, my emails, I watched, I don't know how many TV shows I watch because it's very low intensity, yet it's hard for me to actually put fat on.

It's just common sense. The way you do it. You combine the right nutrition, the right hydration and the right medicines, peptides, whatever else you might be on for what your goals are.

You know, staying healthy is one. I hope you one of the easiest things you can do. Being unhealthy is one of the funnest things you can do. Hum. Right.

You know, it's it's a balance between both, well, you know, and it's a great way to you go in that walk in your and you're burning the fat and you're doing these things for your body and you're releasing these chemicals, but you're also going to walk with your wife in the habit and get to decompress your day and work through some thing.

It's so therapeutic. You're we were not meant to be sitting still and staring at screen you. No, it that's not how are we were created. It's it's never going to be how you feel your best.

And yet at the end of the day, I'm tired and my wife and I look at each other like, are we going to go on a walk today? I don't know, it's like, if we don't, we'll wish we had, you know, and even if we're in Texas, in Miami and it's stupid hot, you know, still worth it.

Go. We'll do it. You know? I mean, get out there. Sunshine is amazing. Everybody thinks the sun is the devil, you know? I mean, like, oh, yeah. No, not at all.

I mean, like, Superman needed the sun. That's how he got his power. I mean, like, come on, you know, that's that's how good it is. Nuclear, man. It's good for us.

Right? Exactly. I mean, man, why would they lie to us? Yeah. No way. No, Superman's for real. Let's let's don't don't start there. I heard the movie was good. Hadn't seen it.

I haven't either, yet. I got yours, I heard it's good. I, I, I was a Henry Cavill fan, so. I mean, this had to be tough. I was he looked a little cheesy for me, but but everybody said he's he's really great.

I'm like, okay, well, whatever. I should trust you. Hey, Ivan, thank you so much. What you're doing is so inspiring. I love the stuff you've got going on.

I may reach out and get more information about the lab panels you're drawing and going through that. How? What's the best way for people to follow you?

Get in contact, ask questions to get to know more about lifestyle medicine. Yeah. So sure. Instagram. It's lifestyle medicine. And doctor Ivan Roscoe doc obviously was a little bit bipolar.

So have some fun with that. You want to know I'm a doctor, but of course, Access Medical Labs are the one who I basically host my the the podcast that I have if I'm on.

And also if you're a physician looking for labs. I, I've gone through in my 15 years so many they're phenomenal. So you can follow them on everything. And then, you know, what about my podcast?

It's called Lifestyle Medicine which will be on Spotify and YouTube. So there's a lot of ways to find me. If you Google me, I apologize in advance, but it should be kind of funny.

There's all kinds of fun stuff on there. I might be, you know, kind of half naked, but, you know, hey, it is what it is.

Closing Remarks and Contact Information

You know, use what you got. Yeah. You know, at least at least you established that you have a hard time putting on fat. That helps a little bit there going to be my podcast.

And by the way, kudos to you as well. Your your whole business model I love it I think I think that's kind of the future when it comes to medicine. So I really appreciate what you're doing.

I think it's it's it's a gold star when it comes to the direction health is going right now. Well I appreciate it. It means a lot coming from you, man.

And I think the more that we can learn from each other on on getting closer to the energy. Right. Let's do it. Yeah.

My man. All right, well, thank you so much for being on.

I'd love it. It's a it's a treat. We are to connect again soon. But thanks a lot. Rock and roll, my man. Thank you. Bye bye.