The 100-Year Heart: How to Prevent Heart Disease Naturally with Dr. Jack Wolfson Transcript

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Introduction to Holistic Heart Health

This is Dr. Talks, real talk from real doctors on the issues that matter to you most. All right. Welcome back, everybody. We are talking to the one and only Dr.

Jack Wolfson. He is here today. Thank you for joining us. Thank you so much, Cash. It's a pleasure to be on. And again, just really excited to share holistic heart health information for Certainly the women and you know, all these women oftentimes take care of the men.

So kind of instilling that wisdom about heart health and wellness, you know, to help support the men in their lives would be, would be helpful. For sure.

And you know, your perspective is interesting and incredible. We're lucky to have it because you are a cardiologist. You've been doing this for so long and everything we're going to talk about is why you don't do your cardiology textbook work anymore.

You're not that, not that it's been thrown out the window, but you learn there's so much more to true health as opposed to reacting to cardiac issues.

And what you're saying is we should all have this goal of a hundred year old heart, like let's live for that length. And it's not just let's be vibrant at that age.

So what is the gap between here's conventional allopathic cardiology and that moment for you and what you learned and what we needed to change? Yeah, you know, it's after spending 10 years in the biggest group in the state of Arizona, just dealing with the sickest of the sick and just pharmaceuticals procedures.

And then you get your eyes open to what it really means to be healthy and well. And you think about the foods that we eat and the lifestyle that we have and the thought processes that, you know, that we should have.

And we think about all the advanced testing we can do, and all the evidence-based supplements, and there is plenty, plenty, plenty of evidence on all this, and then kind of we wrap it up with biohacking strategies to support heart health.

And I think when we do that, that's how we can get the 100-year heart. And I know you're a genetic specialist, and I think that when you overlay the healthy lifestyle on top of the genetics, we can really do some amazing things to make sure that We are really on path for 100 years and plus, but unfortunately the medical community, the best they can offer is late seventies, you know, for men, early eighties for women, as far as longevity.

And that's just, that's abysmal. I mean, I'm 52 years old and I've got young children. I would like to be a grandfather one day and have plenty of clarity and vitality and longevity, you know, with the grandkids.

And unfortunately the standard medical community does not offer that. Yeah, and you you walk your talk I just saw you in Arizona, a couple weeks ago coincidentally.

And, you know, you're, you're walking around in a 30 year old body. Right. And you're doing it and this is a challenge you go to most doctors and when you walk into the office and see who we're talking to is like that guy's going to teach me about health.

Well, thank you. And I, my body feels that age.

From Conventional Cardiology to Prevention

I don't know if my, if my hairline and my coloring, you know, reflects, you know, that as well. But, you know, listen, I didn't start on the path to health and wellness until I was 35. So for the first 35 years of my life, I ate the sad, right?

The standard American diet. And fortunately I was able to escape from that without. you know, serious health issues. And now I'm really on the path of prevention to prevent something bad from happening.

You know, my father would die of a Parkinson's like illness at the age of 63. That was very motivational to me. And of course, meeting my wife, who is a DC doctor of chiropractic, and then she instilled in me that I need to become a DC, not doctor of chiropractic, but doctor of cause.

And that's what's, you know, motivated me to move forward. But to your point, I mean, I left a group of 40 cardiologists and cardiovascular surgeons and two thirds of them were overweight and probably 20% of them would be considered obese.

So even if they knew the, the real health strategies, they, which they don't, yeah, they would not be very believable because they didn't follow any of those.

So, I mean, you know, listen, I mean, the cardiologists get not to smoke. I mean, so not too many smoking cardiologists these days, but after that, everything else that they do is totally unhealthy.

Maybe, maybe some of them give, you know, some effort to exercise. And even then it's going to be in a blue lit artificial lighting indoor gym with all the toxins, EMF, all the chemicals inside of there.

So yeah, you're not going to go to your cardiologist for health advice. That's for sure. Yeah. And I mean, you'll see it over and over again where, first of all, we're talking about the number one killer, right?

This is what takes more lives than anything. So why is it that the heart is the first to go when it's lifestyle choices are driving us there? Why are this, this is the big red flag.

Yeah. You know, it's a, the heart is, is a pretty important organ, right? As all the organs are really, but of course, if we don't have a heart and a heart function and the possibilities of all the different heart issues, whether it's a heart attack and just a heart failure, heart rhythm problems, such as atrial fibrillation, it's, it's a major burden on, on society and these violations or deviations from eat well, live well, think well, are ultimately what leads to all disease.

And again, back to your experience is that you take these violations of eat well, live well, think well, and you overlay it on someone's genetics. And of course, this family will have cancer and this family will have heart disease and this family will have Parkinson's and other movement disorders.

This family will have a lot of auto-immunity and some families, unfortunately these days have all of them. And I think the other thing too, is that, you know, as we look at society in general, people are getting sicker and sicker and sicker at younger and younger and younger.

And yeah, it's time for us to put a stop to it. So what, what are those threats? What's changed? Like we haven't changed. We're genetically the same. So people getting sicker, younger, what's causing all that?

Yeah. You know, our, our genetics are, are the same. It's. It's, you know, it's just all how the environment and the food influences our genetics and how our thoughts influence our genetics.

And again, you know, I've learned a lot of this from, you know, listening to, you know, you and people like yourselves, you know, that again, the, the things that are changing are just more toxicity.

There is just more environmental toxins that are available to us today than ever. There is more EMF. There is more air pollution. There is more. synthetic and artificial compounds, the technology, again, back to the EMF story, right?

The tech addictions that people have glued to tech during the day, glued to the tech at night. That during the day, I think is a reality. And I think that there's some amount of that, that it just comes with 21st century living.

Listen, you're on, you know, you're looking into your device right now. I'm looking into buying device right now. My cell phone, you know, is five feet away from me.

But really the tech at night, that's where it's got to stop. And unfortunately, a lot of people are They do have nocturnal jobs and, you know, they're night shift workers.

Maybe they drive a truck at night. Maybe they're a nurse working in the hospitals at night or security at night. And it's just extremely unhealthy. It's, you know, those people who are night shift workers have a much higher cardiac mortality than, than those who don't.

Why Heart Disease Starts Earlier Than We Think

So we living in the sickest time on planet. And then not to mention the stress and the fear and the anxiety that everybody is under these days, as we kind of come out of COVID and what the stress and the fear and the worry of all that was the anger.

and the depression and the social isolation that that led to. So a lot of different factors that have stacked up upon us. And ultimately, I think also, you know, people are just making the wrong food choices.

We've got drug issues that are out there. So so many different factors that are really against us and certainly even the younger generation. Yeah. So a lot of threats and we know that our context is not aligned to longitudinal health anymore.

And that's why chronic disease is so prevalent. So then it's like, okay, you've been doing this work and you stepped away from conventional cardiology, not that you don't use it, but there's other tools, including nutrition.

So you've done the work and research. So let's start there. What should nutrition look like if we're stepping away from the sad or the food compass or whatever?

What is it actually, what's correct? Yeah, that's a great question. And I think just like our ancestors did, our ancestors were hunter gatherers. First they hunt, then they gather.

And if I could say this is that there's a lot of debate in the food industry, of course, and all the different food gurus that are out there. And they would say, well, vegan, paleo, keto, carnivore, whatever it may be, the reality is that let's just eat organic food.

Let's just all agree to get the chemicals out of our food. So no matter what diet you're following, just make sure that it's organic. After that, I'm a huge wild seafood fan.

The wild salmon, sardines, anchovies, clams, oyster, trip, lobster, crab, big fan of all those. And then nose to tail, ethically raised pasture raised animals are going to be super important.

And I am a proponent of gluten free as well. There's no benefit to eating gluten. So there's no, there's no, there's no reason to eat. It can only cause us harm without any benefits.

So we choose to be gluten free and ultimately too. You know the the idea of fasting and intermittent fasting and extended duration fasting I love that concept, because the way that I visualize it is that as you get into some of these longer fasts 48 hour 72 hour fast.

That's when the body starts looking for fuel and once a lot of your fat storage is gone. Then the body starts looking for fuel because it's not coming in through your mouth and the body starts to break down coronary artery plaque.

It's not going to break down your brain. It's not going to break down your heart or your liver or organs that are necessary. It's going to start breaking down scar tissue.

That's not necessary. And that's all that coronary artery disease is. It's just scar tissue meant to heal an inflamed vessel. So as the body starts to break that down and extended fasting, that's when I start seeing, you know, we, and I've seen this, you know, plaque reversal, which, you know, which is a fantastic thing.

So I think that that pretty much highlights my food strategy for those coffee drinkers out there. I think coffee is great. As long as it's organic mold, micro toxin free, same thing with a, with tea, high quality water.

That's a good start. Yeah. Well, you just said there's incredible because I've never thought about it in that context. Cause we think about. So again, you pointed out genetics a couple times so we think about cardiac disease as this endothelium inflammatory problem.

Right. And like you said scar tissue then there's cholesterol email this build up. And then I think of fasting as I'm burning the fat on my belly. I'm using fat as fuel.

There's some fat removed from my liver, but I never quite went to, Hey, you're stripping it off of the arteries and you're stripping it off the endothelium and you're reversing time literally.

Nutrition, Fasting, and Plaque Reversal

So you've seen evidence of this. Yeah, I know. And I've definitely, you know, cause you know, one thing I'm not really into that to say the least is I'm not a fan of, you know, CT scanning, you know, coronary artery calcium scans.

I don't like radiation exposure. I don't find that test useful. But for some people who have had the testing done and then against my advice went to have the testing done again, we are seeing plaque reversal from people who follow the whole plan.

But in a lot of these people, the intermittent and extended duration fasting is part of that plan. And the idea really first came to me, Cash was when you would talk to people who were doing extended fasting and they would talk about how skin lesions would start to disappear and skin tags would clear up and even skin cancers would start to clear up when you're fasting as the body realizes that that material is no longer necessary for, you know, for what it's really just kind of storing, you know, junk in different places.

So. I think it is all simultaneous that even as we are fasting and we are utilizing fat for fuel, it's not the only fuel. I believe at that moment, when the body is starting to get rid of this excess storage tissue, scar tissue, and we'll see plaque reversal, and it's an exciting possibility.

And the good news is too, is that like these are actually, not only is it free, it's a money saving proposition. When you do extended fasting, you're actually saving a lot of money because you're not eating.

Eating is the biggest expense in my household, I'll tell you that much. Yeah, your money back in your pocket, also reversing disease, that's a whole other load of cash back in your pocket because you don't want to be paying hospital bills, you know.

So now, I've heard this, but obviously you would know this, it might have been a much deeper level than we would, that when it comes to a cardiac event, That women just fare so much worse that they're more likely to actually not even to get through it.

I think the number was 66% of women will die on their first cardiac event. They didn't even know they were sick. So what's, what's the gap there? What's the disparity between men and women?

Well, I think it's a couple, you know, a couple of reasons. You know, number one is that it's still coronary diseases thought to be a man's disease. So even amongst the cardiologists and the emergency room physicians.

When a woman comes in, they're just not thinking cardiac first. And that's a mistake. Now women can present with chest discomfort, shortness of breath, that can be the sign of a heart attack.

But sometimes we have to, we always have to pay attention because sometimes the symptoms may be, I just don't feel right. Or I just, I've been feeling fatigued and these kind of, these kinds of complaints or symptoms, the men often don't think of as being cardiac, but they truly are.

So that's certainly one factor. I think also is that, listen, women are totally different from men. And that's obvious. But let me say this, is that the women, I think, really have this sixth sense, this radar about them that really senses danger much better than men do.

And especially the premenopausal women, they sense that impending danger, which I think is something that we are genetically designed to have. To protect us, you know, during times of pregnancy, again, it's just that that pregnant woman that menstruating woman has that sense of danger and they know, you know, the environmental toxins and pollutants.

So that, you know, is definitely a factor in why women, I think, suffer from symptoms and maybe a different way. And then let me say this too, is that women are uniquely predisposed to cardiac stress events such as SCAD or spontaneous coronary artery dissection.

The number one cause of heart attacks in menstruating women. And that is unfortunate and that is highly stress related. And then number two, there's a condition called broken heart syndrome.

The official diagnosis is Takasubo cardiomyopathy. Takasubo is Japanese word, but the point being is that that form of cardiomyopathy, the woman, incurs a very stressful event.

She then suffers a heart attack, and it's not the classic thing, whether it's a blockage or any plaque that's visible. It likely is a coronary spasm from the stress, kind of a stress-induced autonomic abnormality, and then also stress-induced clotting abnormality that goes along with it.

I think that in combination is probably the most likely theory as to why they developed this. But Kash, it's getting more and more common. We're seeing a lot of it and stress is the instigating factor.

And that is obviously a big time problem. So when we think of the classic plaque buildup heart attack, that's one of many forms of things you need to be looking out for.

And if you're not considering all of them, so then it sounds like, you know, Cause I heard you say in the very beginning, you were talking about emotions and relationships.

So it sounds like that's why that could be really important. I was wondering why, why, where were you going with that? But now I get it. You know, it's your thoughts and your feelings can drive.

So how do you manage that? Cause somebody coming to you as a clinician, they're probably thinking, give me a pill, you know, and then you're saying, no, your relationships are screwed up.

Yeah. You know, it's people come to see me, they, they kind of know what I'm all about. So. You know, they're coming for a natural approach as opposed to the old me, which is a pure pharmaceutical approach.

And again, it's not because these men and women are not super intelligent doctors. I mean, they are, it's just, they're trained in one particular thing and they're just not trained in health and wellness.

Womenu2019s Heart Risks and Stress-Related Events

So when you well live, well think, well, all of those are equally as important. So the eat is as important as the think and the living and all the way around that whole thing.

So the whole concept, and I talk about this in my book. Chapter five is called One Nation Under Prozac in my book, The Paleo Cardiologist. Uh, you know, and it's not the women or men need Prozac for that matter.

It's really telling people, Hey, if you have anger, anxiety, stress, depression, you are at much higher risk of having a heart attack stroke and dying.

And the answer is not Prozac. The answer is finding you're happy. The answer is self-acceptance and gratitude. The answer is spirituality. The answer is community.

The answer is a sense of purpose and passion. The answer is to find security in your life. You have to be, it sounds, I mean, all these things do take work and do take effort, but the idea of being secure in your own home.

or secure in your job or secure in your relationship. So those are kind of the big five things that we look at under the concept of think well. And if you're not thinking well, you're in trouble.

And, and so many people just don't get that message. And it's just as important as the live well and the live well component are the things such as sleep and sunshine and avoiding the tech, uh, artificial technology and lights that we talk about, especially at nighttime.

Mold microtoxins from water damaged buildings is a big. thing that I've been lecturing on for several years now. the movement, everybody knows that exercise is good.

But again, you want to be active and outdoors as much as possible. Get under the care of a chiropractor, see a holistic dentist. Those are kind of some of my main tenets to wrap it up.

And like you said, I mean, so many people would just say, I don't want to do any of that, right? I'm not going to do any expensive testing and I'm not going to eat this food and I'm not going to bed after sundown and I'm not giving up my cell phone.

OK, well, don't do that. And you know, and they're like, well, and I'll just take a pill. Well, go ahead. You can you can take the pill. The problem is you're going to die.

You're going to die many, many, many years earlier than you should have. And you will not enjoy the clarity, the, the vibrancy, the vitality and the longevity.

It's a, it's a death sentence. And it's a, it's sad that, you know, people, well, it's not even that they choose that option. They're not even given the option of the stuff that you and I are talking about, Kash, and not even given the option of, Hey, let's really take a deep dive into your health.

They're not being told. And that's why, you know, you, me, Mindy, and everybody else, we're trying to shout from the rooftops, hey, we got this better way over here, and it is the only way to longevity.

It's almost like the, even just the process of being in the healthcare system forces you to think the wrong way that you were talking about, because one of the first questions you have is like family history, right?

And then you start to believe this is quote unquote, genetic, meaning it's going to happen. And it's an eight. And why should I bother working on something that's in my family history?

Because it's part of my genetics. I'm going to, I mean, how much truth is there to that? Yeah. I mean, and it's an easy out for the physicians, right?

So the physicians, you know, Hey doc, why did I have a heart attack? It's genetic. Okay. Really? So, so one third of the adult population has known coronary artery disease.

Does one third of the population have bad genetics? You know, it's, it's horrific. And again, that's why I love the

stuff of what you're doing. Cause again, it's like, you know, you take the genetic components and then you wrap on all these different things of what we can do to kind of biohack our genetics, which is really biohacking the genetics in the 21st century.

If we lived in ninth century, we wouldn't have to do that. We would just be living in a, in a, in a hunter gatherer, you know, very healthy world, you know, at that time.

So. You know, I think ultimately that as we, you know, try and get people out of that family history type thing, you have a family history because you live the same way as your parents and your grandparents.

If you want to be different from, if you want your health to be different from your parents or grandparents, you have to live a different lifestyle than what they did.

Yeah, I think the most extreme version of that that I've seen recently was this interview on 60 minutes where I don't know the person's name, but it was some health advisor for the Biden administration came on and said that obesity is 80% genetic and it has nothing to do with lifestyle and exercise.

Mindset, Relationships, and Emotional Health

And then about a week later, Ozempic came to market. So just to give people an idea of where you should get your information from, what you should believe.

And, you know, there's a little bit of a serendipity there and why that all came unraveled the way it did. But, you know, I can assure you that genetically it's not 80% true at all.

One thought in question for you, and this is just for me personally, so that the heart I know has a high density of mitochondria, right? So we're hearing in these biohacking circles, everybody's working on their mitochondria.

How much is there to be said for heart health longevity? If you specifically work on that, how much difference does it make? Well, I think that all the things that we talk about impact the mitochondria.

So when you eat the right foods, it supports the mitochondria. When you live the right lifestyle and avoiding the toxins. it supports the mitochondria.

When you think healthy thoughts, I believe that helps to support the mitochondria at the very least on a bio-energetic level. And then of course, tests don't guess and then use evidence-based supplements and then the biohacking strategies.

So the question is, does red light therapy or sauna or cold therapy or essential oils? I mean, do all these things kind of, you know, or, you know, methylene blue is very commonly discussed in you know, in different circles to all, you know, do all these things help to support mitochondrial health?

And they do. And again, I do believe there is a time and a place for pharmaceuticals and surgical procedures, but it's at the end of the line as opposed to right at the beginning.

So the mitochondria are absolutely critical. And I think that, you know, so many different things can support mitochondrial function. And they're all inside of, you know, how to eat, how to live and how to think.

Okay. Personal curiosity. Number two, since we have your time, I keep reading that, you know, three, four days a week of sauna reduces or reduces your chance of dying of heart disease, like 30%, 35%. So what's going on there?

Well, what's going on there is that the, the literature that comes out of Finland, is really the most effusive about the benefits of sauna. And that's where you can see dramatic reductions in heart attack, stroke, and people dying is when they have frequent sauna use.

And that is from the old style sweat box sauna. So there undoubtedly is benefits to the sweating and to the heating of the system, if you will. But then you add in the infrared component that a lot of these new companies are using.

And I think that's where you really upgrade the whole process where the infrared energy, that longer wavelength of light is getting into the mitochondria that we're talking about and is really improving mitochondrial health and function and cytochrome function.

So we're making more ATP, we're generating more cellular water, we're improving the electromagnetic fields from the mitochondria that are being generated.

So lots of different benefits from Sauna in that aspect. And I'm a big, big fan. Cold therapy. It's not that I'm not a fan of it. I really don't like doing it.

So I think that there is value to it. And I don't think anybody necessarily like loves getting in the cold tub. I'm a, I'm a 35 year in Chicago guy. I know you're a Toronto guy.

That's why I left Chicago. Cause I didn't like the cold. So I can't say that I, I dig on that, but there's, there's a lot of different things. There's something for everybody.

And it's really just an amazing time to. you know, to be around, to be able, you know, to do that. Beck, I just want to make that comment about the obesity too, and kind of go back to that, you know, for a second, as far as the genetic link to obesity.

And obviously, as you said, I mean, right afterwards, now they're going to release a new drug, you know, for weight loss. And, you know, ultimately it's, everything is driven by money.

Everything is, is the power of the pharmaceutical companies is just, I mean, it's, it's more than, I don't want to say it's more than the military complex, but it's right up there with the military complex, the pharma military, They are the biggest influencers and controllers of the world.

Add in banking on top of that. Now we've got maybe the triumvirate where that all goes. And if you think about people from a thousand years ago or five thousand years ago or I like to quote the movie or talk about the movie Castaway with the actor Tom Hanks.

So Tom Hanks, he's on the island, right? And he eats coconuts, fish and avocados. He's in the sun, you know, all day long. He goes to sleep on time. He wakes and he watches the sunrise.

There's no chemicals or pollutants or toxins at any high level in that area. You know, you live like that. You'll never be obese. You know, if you are on that island, there is no chance you will be obese.

There's 0.00% chance you will be obese. Obesity, yes, I mean, you could be genetically predisposed to obesity, but it's all, you know, what you put into your mouth.

Mitochondria, Sauna, and Biohacking

And then also, again, how you live your life. It's not just about food. When you get less sunshine, higher risk of obesity. You get poor sleep, higher risk of obesity.

More environmental chemicals and mold mycotoxins, higher risk of obesity. A lot of different factors that go into it. Yeah. And that sort of commercial influence you talk about as a Canadian, every time I fly into the U S which happens a lot, there's always this culture shock of turning the TV on and seeing the farmer commercials.

You know, the U S is one of two countries in the world that actually allows pharmaceuticals to be advertised direct to the public. And the other country, I think New Zealand, it was only because of some special need for this senior product that came out that they needed awareness around.

You know, we're talking about the number one advertiser, the number one buyer of advertiser in the country is pharma. Right. So, yeah. I mean, believe me, I guess I'd like to live in a world where, where there is a rule maker and it's me, right.

I get to make the rules. So since that is not the case, I don't make the rules. Then I think that, you know, you know, freedom, freedom to choose is, is the ultimate thing.

So I'm not going to dissuade pharmaceutical companies from, you know, from advertising on television. I think obviously that's a problem, but I don't think the solution is to ban pharma advertising because they'll find, I guess, some other ways, you know, to do it.

I think that, you know, the thing is, is that it's just, it's just, it's just the reimbursement for the pharmaceuticals. It's again, it goes back to the whole kind of this whole idea that pharmaceuticals I guess are the answer.

And if we just start from, from the bottom, from just educating, like you and I are right now, just reaching directly to the people and saying, Hey, that's not the answer.

That's how I think we'll tear it all down. And then when we stop giving them all the money, then they'll stop advertising. But that's one way I would look at it, because I think whenever we get into the, you know, rulemaker is making the decisions, then we may like that rule, but then we may not like the next rule, you know, where they banned natural health from social media, because they deem that as detrimental.

So. I don't know. I don't know. But I mean, but your point is well taken. Yeah. I mean, it's like every other commercial, either they're selling us some kind of processed garbage food or they're selling us something to, you know, to, you know, for our health problems.

And if you think about this television addiction, this media addiction, well, you know, then the next thing you know, you're up until two o'clock in the morning and you're watching TV and then you're watching TV and you get a commercial about take this pharmaceutical to help you sleep.

No, I'm not kidding. So one thing we didn't touch on, we talked about food and nutrition and the environment and energy. And so the other thing that people think about when it comes to maintaining heart health and preventing diseases or fitness or exercise.

And we see a lot of sort of, there's some conflicting, you know, talk about, you know, for example, Peter out there talks about you got to get your zone too and you got to do this many hours per day and you got to do it every day.

And then some people like don't over train. You're going to strain yourself. You're going to, So don't get into oxidative stress and create free radical activity.

So what is that balance? What do we actually seek? Well, I think that's great questions and that when we think about oxidative stress, it's oxidative stress by definition is an imbalance where we have more pro-oxidative things happening and not enough antioxidants that are happening.

And that difference is what's called oxidative stress. And what we want to do is if we are generating a lot of oxidative stress, like you said, in the form of free radicals, well, then we need a lot of antioxidants to combat that.

And that could be things such as vitamin C, vitamin E, omegas, glutathione, alpha-lipoic acid. It could be all those generating activities, but also the internal enzymes that do that, such as superoxide dismutase and catalase.

And those are critically important enzymes that are there to, you know, kind of nullify all that excess oxidation that's going on. So we want a good balance there.

And ideally we really crank up the levels of superoxide dismutases is how we're really going to do it. And as far as, you know, people kind of talking about, you know, the best You know, exercise and stuff like that.

I just kind of go along with really just try and do paleolithic activity. And that may be more, more lines of more along the lines of a typical CrossFit, you know, experience, you know, for example, our ancestors, what kind of exercise they do, they didn't go on to the treadmill for 45 minutes, you know, and they weren't running marathons.

So clearly that's not the answer. It was more of that burst activity, you know, running towards someone or running away from someone or something, right?

Picking up a boulder and throwing it over there as you're building shelter. You're, you're carrying water, you're carrying children. It was just a very physically active activity and lifestyle of what there was.

And they were always in motion. They were always moving. They were never really, you know, sitting to this kind of degree that most people sit, certainly not the posture, even that I'm sitting in right now.

Exercise, Longevity, and Everyday Movement

And you are as well, right? They were always up and they were always moving around. I think almost like the behavior was kind of like a dog, how like a dog, you know, would do it.

When a dog wants to chill, it's just laying there and just chilling. Otherwise it's up running around. And I think humans would be wise to follow with that.

As far as kind of like other things, it's time duration and, and heart zones. I don't know. I mean, I think it's. It's interesting for people who are truly into biohacking and, and doing various, you know, I'm going to, I'm going to tweak this particular thing and see what the impact over here is.

And maybe that's more of like for professional athletes, the rest of us need to understand. And we just got to get up and be moving around during the day.

You know, we just can't be sitting around. So, you know, going for a walk in the morning, a walk in the noontime, a walk in the evening, hiking is a phenomenal activity.

We're huge mountain bikers in our home. We love outdoor winter activities, you know, skiing and snowboarding. We love this additional summer activities, stand up paddle boarding, et cetera.

There's a more, there's so many articles that talk about gardening, just having a garden and how that decreases heart attacks and increases longevity.

So those simple strategies, I, you know, that's, that's how I would do it. Yeah. That makes sense. Cause when you say that, it makes me think like, when you think about longevity is with a hundred year old heart.

how many pro athletes do you see that are a hundred that are healthy? When you look at the centenarian, it's usually an Italian grandma, right? And you look at the blue zones and it's, it's more about their relationships and their everyday lifestyle.

They, they walked everywhere. They moved all the time. They were cooking. They were, if it was more, you know, it's from the minute they woke up to the minute they went to sleep, what do they do all day as opposed to this 30 or 60 minute activity that they added to their day?

Yeah, they weren't sitting in front of the TV. And I think also to your point, like the relationships, right? I mean, so the relationships, whether it's going to, you know, some kind of religious institution or having that spirituality, having that tight knit community that's so supportive of them and that they're an active contributing factor to it.

I think that that was absolutely critical. But, you know, I always just default to how our ancestors did it. You know, and I think what happened in certainly my experience of running, you know, marathons and trying long duration triathlons is I was guilty of this because I didn't know any better, right?

I would run a couple of miles and then have a power bar and then run a couple of miles and drink some Gatorade. And there was even a race I did where every five miles they had a Krispy Kreme donut, you know, stop.

So if you're generating all of this, what, you know, oxidative stress, because what happens is, is that your body, if is taking all of the food that you have consumed and the oxygen that you're breathing and it's going through the mitochondria and then it's generating a lot of waste products in that process.

It's just the fuel. Think about, again, if you have a nuclear reactor and it's just like this toxic nuclear waste that is here at the end of it. And if you don't do something in order to neutralize that, Then you're going to be in trouble, so I think if you are doing long duration activities and I get all the joy of that you just got to make sure that you're fueling yourself.

With some wonderful wonderful foods and then also getting that sunshine getting that sleep in that recovery. So I think that's a great strategy for that.

But you mentioned the athletes and whatnot, and they're not, they're not, you know, I certainly think it's better now than probably it was, you know, several years back, but, you know, clearly the longevity favors the people who, who eat well, live well, think well.

Yeah. I guess fitness, physical fitness and health are not necessarily a given. Like they're, they're two different things. You need to work on both of them.

And we saw this during COVID, like guys that were in top shape getting knocked out because they're metabolically unhealthy because they lived off of protein shakes and linoleic acid laced chicken, right?

And then they just weren't prepared for this viral load. Yeah. I think also, you know, one of, one of my favorite examples is the, uh, the actor from the, his name was Bob Harper from America's Biggest Loser.

It was a weight loss, uh, you know, show that was on and he was like the celebrity. you know, trainer, you know, who was on there, he had a massive heart attack and everyone looked at him and he's like, he looks like he's Ironman, right?

On the outside. But what's going on in the inside? And that's clearly where the problem was. And I don't know Bob Harper's specific case, but I could postulate that again, here's a guy who lives in New York.

He doesn't get a lot of sunshine. He's in the artificial light. He's on camera, presumably under stress. And I don't know any of the other factors in his life.

And maybe he ate, you know, pretty good food and he certainly seemed like he exercised, but You know, clearly that wasn't the answer for that guy because there were so many other things that were going wrong and someone like that's life.

And, you know, certainly if you're overweight, you are unhealthy, but just because you are of normal weight and aesthetically look good does not mean that you're healthy.

Finding a Holistic Cardiologist and Closing Thoughts

Yeah. Amazing. So I don't like this, your perspective. is so like refreshing and unique in this world, you know, going to, through cardiology, which unfortunately most people will at some point, given the American average, how hard is it to work with you or find someone that thinks like you and, you know, not be in that just wait and see type system?

Yeah, it's unfortunately, it is tough, you know, cash and you know, there's just not many people, you know, like us and, and the health related fields.

It's just the way that we're trained, the way that we are financially compensated, we are brainwashed into this sickness system. But there are some of us who are broken free and there's, you know, I could probably name, you know, 10 to 15 to 20 cardiologists who have a similar mindset to me.

Certainly not exactly the same. I think I run pretty extreme even amongst those circles as far as what my beliefs are for health and wellness. But, uh, you know, you can ask around, you can go on and Google, you know, search, you know, integrative cardiologist, holistic cardiologist, you know, near me and see what people come up with.

You know, I'm still in practice. I'm out in Arizona and I practice virtually as well. And I've got two naturopathic doctors, a chiropractor and a team of health coaches.

And I've got a lot of wonderful free information on my website. So, you know, I think that, uh, I think the truth will win. I think we are really. in the, in the beginnings of another health, you know, awakening.

But I think now more than ever, people are waking up to true health and wellness. And the, the website is natural health doctor, naturalheartdoctor.com.

Yes. I appreciate you and everything that you're doing, uh, you know, to educate the world and all the methodology that you guys are doing. And certainly, you know, Dr.

Mindy Pell's, you know, as far as, you know, fast, like a girl and being a fasting expert and She is a doctor of chiropractic. And that's what woke me up to the reality of health and wellness was the fact that I would meet a woman when I was 34 and she was 29 and she's a doctor of chiropractic.

And she said, this is the way that it is. And it made perfect sense. Amazing. Well, thank you so much. Eye-opening, really refreshing way to think about our hearts and our health.

And thank you again for your time. Thank you so much. Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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