Introduction and Guest Background

Health is so logical, like if you sleep enough, your health will be better than if you don't sleep enough. That's logical. If you eat healthy foods, your health will be better.

If you and just fill in the blank, it's pretty logical, right? If you're inflamed, your body could be damaged more. So if you find a provider and you're just like, man, what they're saying seems crazy.

not because of the training you had from your other providers, but just basic thoughts. If you go to an MD, like I just read an article yesterday that said they're dropping exercise and diet as their number one recommendation for heart health, and they're switching to DLP one, I'm like, This is not logical.

You already have GLP-1 inside your body and we should be teaching people how to be healthy without a pharmaceutical drug requirement. This is not logical anymore.

If your provider subscribes to things like that, that's probably not the right person. This is Doctor Talks. Real talk from real doctors on the issues that matter to you most.

Hey, how's it going here? It's Dr. Ivan Rusilka with the Lifestyle Medicine podcast sponsored by Access Medical. Remember, if your doctor's not doing diagnostics, he's not a doctor.

Today, we've got a super kick-ass guest. His name is Jayvon Moore. He's a doctor of chiropractic medicine located in Kansas City, and he's got one hell of a backstory.

25, collegiate athlete. He went from being amazing on the field and everything to basically bedridden. And he went through the typical traditional medicine aspect of band-aids on hemorrhages, only to find out down the road that he actually had something called Lyme disease, which I'm super excited to talk with him about because we're actually catching a lot of that down here in Miami.

Since that, he was able to actually fix himself. And now he specializes in chronic diseases, especially with some really unique ones. He does a lot with pediatric neuropsychiatric syndromes.

autism, parasitic infections, environmental toxicities, and even Lyme disease itself. His clinic is called the Redefining Wellness Center, and it's really neat.

They see people virtually. So check him out. He's got a lot of really cool stuff, and I'm super excited to talk to him today. Dr. Moore, thanks for stopping by.

Yeah, thanks for having me, man. I'm excited to talk Lyme disease. That's a huge piece of my history. So helping people to understand, especially down in Miami, where it's not even supposed to exist.

You're saying you're seeing it, which I know that's true, but we can talk way more about that today to help people.

Athlete Turned Patient: Lyme Disease Story

Well, first and foremost, I'm super curious. Tell me about your story. Where did you get it? How common is it? Tell me how you figure out you had it. I would say first and foremost, that's probably the most important thing.

Well, I mean, like you were talking about, I was an athlete. I was a college shot putter. I threw discus. I threw hammer. I was an All-American several different times.

So I thought I was in the top of the world. I graduate. I go to chiropractic school. I'm losing weight because as a shot putter, I was a big boy. I was 250 pounds.

I was dropping weight. I'm only 5'10", just as like a frame of reference. I was a big boy. Spark plug, man. I dropped 60 pounds over the summer going into school because I didn't want to carry that weight with me.

And I was like, I was in the best shape of my life. I looked good. I felt good. I thought, all right, hey, I'm going to get a degree. I'm a Midwest boy.

So I was like, I'm going to meet the woman I want to marry. I'm going to do all these things and start a family. All of a sudden, fatigue, body pain, and erectile dysfunction kicked in.

I'm 23, 24, 25 years old. I'm going, this is not right. And being in school, I'm going to functional medicine conferences. I'm doing what's called a DABC, which is kind of a extra education for functional medicine.

There's MDs in there, there's PAs, MPs, and they're teaching us about all kinds of lab work. So that's where I actually, one of the first times I started hearing about companies like Access.

And when I was in a conference one time, I was talking to some doctors and somebody said, have you heard of Lyme disease? I said, no, I don't know what that is.

And it took me down this rabbit hole of trying to get help because no one really knew how to help this in 2013, 2012. It wasn't like we had Instagram and all of these other places where you can start looking it up and figuring out who's good at it.

But I'd already been through the, here's a little blue pill, take some L-Arginine from the more functional natural people. Cause they're like that vasodilates is going to help you with erectile dysfunction.

I went to, and I already lost weight. I already looked good. I was already eating clean, but nothing was working. So for me, it was, it was a game changer in just my mindset about health.

It's like, sometimes you got to really dig deep to figure these things out. And it's, it's not just exercise, diet, nutrition. Sometimes it's way, way more.

So for me, I found a guy in Wisconsin was able to help me. And fortunately that was more than a decade ago and I haven't had a relapse. I still feel good.

All those symptoms are gone now, but that's my mission in this world is helping people to find solutions for those really difficult situations. Yeah, I think that should be every health care practitioner.

I don't care if you're somebody who mops the floor in a hospital or you're either head attending. I mean, as a health care professional, I think our main goal is to get to the actual root of the problem.

And like we talked about earlier, you have band-aids on hemorrhages. And that's what kind of traditional medicine seems to be anymore, pharmacopoeia of just continually making patients sicker and sicker but not dying.

And I'm sorry to hear you went through that. So how did you eventually diagnose yourself with the Lyme? So I mean, I was in this conference the first time I heard about it.

And I literally asked, do you know more? And the guy was like, no, not really. I just heard of the thing. I heard it's kind of the one that's missed all the time.

So that's literally my introduction, which is what so many people run into today, right? Like they're running into IBS, which is you have a stomach issue and nobody knows why.

Or fibromyalgia, you hurt and nobody knows why. So after going up to Dr. Linsley in Wisconsin, he did a number of things. He did muscle tests, some alternative type testing, acupuncture, meridians.

He said, yeah, I think there might be some sort of infection that's holding you back. From there, I went and got some testing on labs. So I got basic blood panels.

I did not run the standard Western blot because in his belief, it wasn't going to be accurate enough through the CDC. There were some more accurate things out there.

Looking at AST, looking at inflammatory panels, which is C-reactive protein, looking almost cysteine, trying to understand that my body was inflamed. I had a history of being in the woods all the time.

I showed different signs of symptoms like pain in my hands, different muscles that were starting to break down. He started getting together that clinical diagnosis for me because in 2013, we didn't have all the different more expert labs that we're running today that are more specific to Lyme.

We also didn't know all the mutations. I mean, now there are dozens of mutations of Borrelia. It's not just simply Borrelia bidorfia. And going through all that with him, he was able to do a clinical diagnosis.

And the biggest thing for me, he gave me his treatment protocol for Lyme and I got better. I love that. That's fantastic. That's really good, actually.

And again, see, that's, I always like to say that's a forward thinking physician.

How Lyme Was Diagnosed and Treated

That's pure medicine. You know, it's not just sitting there opening up the whole, you know, big pharma playbook and just being like, well, A plus B, let's go, you know, like you said, erectile dysfunction, blue pill, you know, body pains, anti-inflammatories, yada, yada, yada.

So, you know, it's nice to see. And I think, you know, I'm curious to actually get your thoughts on this. Do you see that there's more of that going on in this, in like in this new, You know, make America healthy again and people are actually taking, you know, health into their own hands.

Or do you think we're still stuck and, you know, we'll trust what the doctor says and the doctor inevitably learns from bias research. Oh, man. What was the study I just saw?

Something like through the last four or five years, we all know what happened. Health trust, healthcare provider trust dropped from 70 some percent to like 40. Yep.

So that doesn't mean that they trust functional medicine more. They just are open to somebody helping them. Something different. I, four or five years ago, finally decided, okay, I'm going to get on the social media stuff.

I was never a fan of it. Now I have a decent following on social media. So I'm getting a lot of people and they don't personally know me. They weren't referred personally to me and it's opening their minds up because they're following.

They're following the stuff that I post, the stuff that, that the maha movement posts. They're seeing that data is being released that is actually the real stuff, right?

Like it's, it's showing that we don't know nearly as much as we thought we knew about meds, vaccines, et cetera. We just don't know. We have no idea. So they're going, wait a minute.

So all the stuff I've been told, all the stuff that was published in this journal or that journal was bought and paid for. Oh, okay. So maybe there is something out there.

I just want results now. That's where so many people are really coming down the pipe to me too. It's like, can you give me results or not? Yes, they want me to present them with labs.

So I'm running tons of labs. I run whole blood work panel, urine panel, little hair panels. And we're combining all this data together to give us results.

We can do it before, we can do it after, we can show physiological changes. An example I love to show people, I had this woman come to me. Uh, two or three years ago, and she had been to 20 physicians over a 20, 30 year span.

She'd been diagnosed, fibro-algae, chronic fatigue, all of these things. She literally told me, I don't want you to fix me. I just want you to make sure that I see my kids graduate.

And I was like, that's awful. That's not what I want to do for you. But she just didn't want to spend the money, the time, the effort, get there, get her hope up to, to do more.

And that was so sad to me, but I said, you know what? I'll do that for you. I'll basically put band-aids on things more naturally because that's the way she wanted to do it to help her move along.

But I go, just so you know, I'm still going to ask you here and there if you're willing to let me do more. She went home. She came back. She's like, you know what?

Because you listen to me. I'll try it for three months. I'll give you three months to try something. Well, what did we do? We ran a thyroid panel. We ran a C-reactive protein homocysteine.

We did a CBC and a CMP. So red, white blood cell, kidney lever, those things. She gave me three months. She felt no different. She's like, you know, I'm done.

I don't feel a difference. I'm like, can I rerun a panel? Just, just the panel that we already ran. It changed for the first time in her life. It changed.

And she said, all right, fine. I'll give you three more months. I'm like, am I negotiating to help you? Like. But I respect her. She was fun. She was nice about it, but she was just like, I'll give you three more months, three more months went by, no symptom relief, ran the blood work again, improvement again.

And then nine months in improvement. She's still one of the labs. She made me run her labs every three months. I'll tell you this for three years to prove that she was improving, even when her symptoms had been started improving.

But this is the power of labs. This is why I talk to doctors. I trained doctors in my clinics. Because the power of labs allow you to have more than the subjective.

They give you an analytical output. They allow you to see change in a different way than am I less fatigued? Am I less, you know, physically in pain? And for me, they are an amazing ability to convince someone to keep going because they can see data on a piece of paper.

Using Labs to Track Chronic Illness

And how I put that together with Lyme disease for me is with Lyme, you may have had this 20 years. You may have had this for six months, but it is a chronic complex condition that's never alone.

It may not be moving fast. So you may not feel the difference, but there may be data points that are changing that allow you to know that you're progressing.

For sure. And I think that that's probably the most important thing I currently right now offer. I guess they're toting it

from access is the most inclusive blood test on earth right now.

It's 700 and some markers. It's really, really unique. And it's funny. The amount again, I throw enough shit against the wall. Something's going to stick, right?

Exactly. But I always sit there and tell people, you know, everybody wants to come here. I started out in Miami beach as the doctor that gave you, you know, a better looks, you know, better sex, better energy, a lot of kind of stuff.

And, you know, that's, that's great to help to provide somebody. But I think the real power is when those people bring in their children, they bring in their parents with chronic conditions like you're talking about.

And now it's funny, I have probably one of the most sexy offices in the sexiest city in the world. And it's mostly filled up with cancer patients and people with autoimmune disorder and neurodegeneration.

And it's just kind of unique to see that flip because again, I'm curious to see your thoughts on it. You know, given somebody a six pack and a rock hard erection, That's great.

You're giving them a lifestyle aspect. And I actually titled my entire business back before lifestyle medicine was a thing, lifestyle medicine. But to sit there and see somebody like you're saying, who basically has come to you as your last resort, and all of a sudden you give them not only more life, but quality of life.

You say lifestyle medicine, it's so interesting to the biohacker community, the longevity community, the chronic illness community, the guy drinking freaking caffeine, taking their energy shots.

All of our goals are to feel better or to be as optimal as possible from the bottom up. You may have somebody come in and this is a thing that really hit me a few years ago as this longevity thing has been kicking off.

And I was like, that's just not my niche. But I'm like, is it, is it really not my niche or is it just that the people I'm working with are just at the beginning of the journey and the guys hitting the biohacking conferences, you know, they're, they're kind of at the peak of technology.

It's all. whatever keyword you want to use. It's mitochondrial health, it's telomere health and length, it's getting the body to its most optimal state from wherever you are.

So for Lyme disease people coming into my clinic, you know, can I use just simply giving some milk thistle and some NAC and that's as much as their body can handle.

Whereas maybe you're down there and you're working on some NFL guy and it's off season. You're like, you know what? You just had to go through all this traveling.

You were in airports. You were in hotels. I'm going to chelate and get mold and metal coming out of you because your body can handle that. You can handle the intensity.

Whereas maybe the person I'm working with can't handle that intensity. Our end goal is the same. Increased optimal performance. And when you run a 700 marker lab, you're going to see a damn change in there somewhere.

I do some similar stuff. It's like, I run all this stuff at the beginning. This is my physiological testing is what I call it. It's to give me an idea of where else I need to go.

I mean, it's hundreds of markers also. and then from there I'm like oh I need to go run mold testing oh I gotta run a mold test on your house now or I run a metal test and it's like what's in your water supply I know Miami for instance you know talking to you I see so many people that are living above and beyond what I can even imagine in these nice beautiful condos out on the beach you know money isn't even a concern but They're drinking radioactive water.

Miami's water has radium in it. And I'm like, you've got to get that out of there. Like you can't be drinking that every day. That's suppressing your system.

They pull that out and they're like, Oh, I feel so much better. And it's such a simple change. The biggest thing I do when it comes to the lab test, and I tell everybody, you know, I want to know more about you than God does, you know, because I'm treating you.

He's not. And the whole concept is the stuff that we find just hidden things, whether it's hidden pathogens like Lyme. I mean, we've diagnosed Lyme in this office three times this week alone.

Crazy. And again, the reasoning being is I'd like you to kind of hit on, you know, a lot of people listening are probably like, maybe I got Lyme. Um, you know, it's because all these people have, uh, houses up in the Hamptons.

So they're, they're up in, you know, the, the whole Northeast aspect. I, I currently, I mean, I, I grew up in Northwestern Pennsylvania, like, you know, Lyme disease central, uh, hunting and fishing and all that kind of stuff.

Thankfully I've never had an issue nor have I tested positive for it. Um, I probably got a bunch of tick bites in Africa on all the crazy trips I've done.

Um, but, uh, you know, if you could just kind of hit a little bit more, cause I think Lyme disease is, is, is really looked over. Where would you expect to find it?

What are some of the initial symptoms? Obviously, you know, the, what you can expect if you find a tick and kind of you know, how, how the initial treatment might go.

You know, the funny thing is Lyme disease is said by, let's call it the CDC. Maybe that'll change over the next few years. Um, it's, it's the Northeast.

It's Wisconsin, it's New York, it's Pennsylvania. If you're not in that area, you can't have it. And I'm like, do ticks, do they obey state orders? Like, I mean, common sense ain't common anymore, you know?

No, they hop on a bird, that bird migrates to Miami and you get it in Miami, right? Whatever. So you can get it anywhere. There's some controversial ways that we could talk about getting it that are not yet fully proven, but I definitely have seen people where I'm like, that seems like it's viable.

Could you get it from eating an egg where the organism is in there and you're eating a sunny side up egg? Could you get it from meat that's not cooked fully if it's infected in that animal?

your raw meat, like maybe, I can't prove that, but maybe. You can't disprove it too, you know? You can't disprove it either.

Lyme Disease Symptoms, Co-Infections, and Testing

I have absolutely seen it come through family lineage, meaning grandma had it, they gave it to mom, they gave it to daughter, they gave it to granddaughter.

So it passes down. Passes down. And then, you know, is it sexually transmitted? Like, I can't disprove it, but there's some cases around, maybe so. Potentially, yeah.

You can get it both from a tick bite and also from those other ways. And then the other piece is, can you get it from other vectors, other insects that can bite you?

And that may also have some sort of numbing agent. Could you get it from a spider, a mite, a flea? Because these organisms are not immune to a spirochete bacteria.

For sure. there's some evidence to show that other vectors can bring it in so don't think that you have to get a bullseye rash which is a red rash at about 40% of the time you get if you get Lyme disease but it's only 40% so that is not diagnostic it's a hint but it does not mean you have to have that to be diagnostic Um, you can get anywhere in the world, to be frank.

Uh, there is some spirochete bacteria that are not necessarily Borrelia. At least they have not been identified as Borrelia, but Dorphia in Brazil that people are coming into us and they look really similar under a microscope.

The symptoms are almost identical. So I think honestly, you can get this anywhere in the world. I've had people in Europe. I've had numerous people in Europe test positive that have never been in the United States.

I've got California's testing positive that have never been to the Northeast. You can get anywhere. You can get it from the different vectors like I mentioned.

And let's just jump into like symptoms. Lyme is called the great mimicker. Why is it called the great mimicker? It's because one, Lyme is not alone. When a tick bites you, it can give you Borrelia bedorfial, which is Lyme disease.

It can give you Babesia or Lyckia and a number of anything, any other of the co-infections that come along with it. Different parasites can be inside that tick.

So when it bites you, it spits. And when it spits, it can spit in 12 different infections. Now studies, you want to talk studies, they say it has to be embedded for at least 12 hours, sometimes 24 hours to do this.

That tick is going to bite and spit rapidly. If you have a poor immune system because you're living in mold, you're drinking radioactive water, you've had too much stress in your life, you don't eat well, all kinds of stuff.

You're going to pick this stuff up so much easier. I think it's more your immune defenses than anything. Just like Doc here is saying, he's been hunting.

He lived in Pennsylvania. He never got it. I now don't care if I go outside and get bit by a tick, to be frank. Because I know my immune system strong enough to defend itself.

Exactly. Opportunistic, yeah. So is Lyme opportunistic? Absolutely. So what should you be worried about if you don't have Lyme? Keeping yourself strong enough not to get it.

If you do have it, okay, now what co-infections and complications are going to keep you from getting better? That's the key. So what is Lyme? Great mimicker.

It has been shown in autopsies to be in 25% of brains that are autopsied for people with MS. It's been correlated often with rheumatoid arthritis and different studies.

So if you have an autoimmune condition, can Lyme be perpetuating this? It's possible. Get the tests. Make sure that's not it. There's a doctor out in Florida that I've sent to a few times for ALS.

She says she has not seen an ALS case. at all positive for ALS without Lyme positive. No shit, that's an interesting one there. Wow, okay. Now that's one doc that's correlative, not causational as far as big enough studies.

It warrants further investigation though, I think. Absolutely, so if you have these autoimmune, especially neurological ones, go run your Lyme testing to double check it and make sure you're getting good Lyme testing from somebody that knows how to look at the tests, knows what tests to run, and knows what the compounding factors are.

I mean, I once had, and I'm not going to name it because I want them coming after me, but one of those big box medical clinics that, uh, factories, the factories, but they're really popular and they do a lot of business and they're really known.

They sent me 2000 pages of labs and documents from one of those places. And I sat with a patient in my room for the first hour I knew them and I just flipped pages.

And we just talked because they didn't send it to me before they brought me the packet. And I was looking through it and they're like, I go, you have no immune system.

You have no IgG. You have no IgE. And then your IgG panel for Lyme was negative. Of course it was negative. You don't even have any IgG. Yeah, exactly.

Wow. And they're like, What? They were diagnosed with B6 toxicity. I took a drop of blood and put it under a microscope and it was covered in bacteria.

Jesus. That's terrifying. I mean, imagine how many people in this country, let alone, I mean, this country's privileged. Imagine this world, I mean, who have just nonsensical things.

One of the biggest things we find, I test for Lyme, I test for Candida, I test for chronic EBV and CMV. That's kind of my basic pathogens that we kind of look for.

The amount of chronic reactivated EBV that I'm finding is bananas. let alone CMV. And now we're finding people with neonatal cirrhosis who their armies from Cornell are building like, oh no, this is a genetic issue.

I'm like, well, let's see, or CMV correlates with MCTD, which then correlates directly with neonatal cirrhosis. It's not genetics. It's that you were simply at a CMV infection that they've never in their entire life and million point $2 a year or whatever they're spending on it have ever been tested for.

And that's why I think lab testing for at least me. And that's why I kind of gave access their own little thing there. I said, if your doctor's not diagnostically testing, he's not a doctor.

He's just a robot, you know, regurgitating nonsense. I think personally, because precision medicine is directly based off of patients' intakes, labs, and their goals.

I mean, let's just build on what you just said. Wasn't diabetes thought to be genetic when it was 1% of the United States in 1950, and now it's 33% of the United States?

Insane. Is it? It's not genetic. Absolutely, it's not genetic. And that's where labs come in. What do all these people with diabetes have in common? Inflammation?

Exactly. For sure, acidic blood and acidic blood breeds everything. I mean, it just it sets up proteases. It sets up a toxic environment. That's where you get cancer, inflammation, all kinds of senescent cells, zombie cells being created, like, you know, candy.

So it's a situation where as I think, you know, it's kind of sad to sit there and see, like, especially all these big box pharmacies. uh you know medical clinics that go through and do this they'll sit there and kill you in costs with lab tests and then no no doctors know how to read it if there's even a doctor there which is the scary thing and then you know you can sit there and i'm guessing half of it you know half the physicians now are just using chat gbt or perplexity or whatever to to read all their shit and when you go through and it's always fun i always like to try and do this because i'm actually in the middle of building a an actual medical AI that centers around diagnostics, that basically if you ask ChatGBT, and I think you'll find this unique, that if you tell ChatGBT based off the research that it learns from that there's the usury fees by the FDA, which basically 48% of the FDA's income comes from big pharma usury fees, which is like Al Capone paying the Chicago Police Department, Second is the revolving door policy at HHS, where 34% of people rotate every year from high-paid jobs for the government directly into big pharma at gigantic salaries.

And the third, and I think the most scariest thing, is that the third leading cause of death in the United States is medical error. Medical air kills more people than diabetes in this country.

I mean, like, it's terrifying to think that there's so many people out there with something as simple as lime, heavy metals, anything like that, that somebody such as yourself, who you put it's common sense medicine, which I find fascinating.

Precision Medicine, AI, and Medical Trust

It's not very, it's hard to find physicians such as yourself. So that's why I was excited to talk to you about all this. Because I find people like you and me are dying breed right now I've always relying on AI and you know Just sitting there and like if I have a million followers and I have this person on my podcast all of a sudden boom I'm the next big deal, you know, I mean like and unfortunately people equate that out to it They don't see the precision medicine that you're doing Well, you know, when you use chat GPT, like you said, and I just wanted to, I don't know if you, I want to just throw this in there to add on to what you're saying.

This is a good lead in. If you use chat GPT, which I'll use chat GPT, you have to realize that half the research is bought and paid for like you said.

And Chad GPT sources from that data. Exactly. And it's going to give you an answer that was bought and paid for, even though Chad GPT doesn't know that.

So now you have to go, okay, can I have a Chad GPT of… clinical science or clinical case studies from people who are actually helping this condition, then ChatGBT becomes helpful, which would be awesome.

Yeah, that's exactly what we're doing. So it's a nonlinear AI. So basically its focus is sitting there looking three steps down the line. It looks at who pays for the study.

It looks at where the study is, which again, NIH and PubMed are probably the scariest places to draw research from anymore, as pathetic as that is. And then it basically compiles that against all the different databases for all the naturalistic things.

Because again, the reason I termed my practice lifestyle medicine way back in the day is because I think the three or four most important things in all medicine should be hydration, nutrition, sleep, and stress reduction, all of which a patient can do for free at their house.

And I think that's probably the most important thing. And then you see things like grounding yourself and sound this and all this kind of stuff. I just think they're being promoted by people that either are a little eccentric, as you would say, and don't really give it the verification that it needs, or it's being drowned out in the media as nonsensical and non-credential.

And this is where I tend to argue people. And again, I think it was Forbes that an article on me, it was entitled, the most hated doctor among doctors, which I wear as a badge of honor.

was the fact that, you know, when you give patients that power to kind of question a physician, you see a physician turn into an adversary very quickly.

So there's parts of ChatGDP I love, but there's parts of, again, AI, I should say, but there's parts that just terrify the shit out of me. So it's just kind of unique.

You see a lot of people coming in and questioning what you're doing. They're like, well, ChatGDP said this and blah, blah, blah, blah, or you just, you even got that in Kansas City, because I get it in Miami quite frequently.

Oh yeah, I get people to come in, they'll throw information at me and I'm just like, okay, where'd you get your information from? And how's that working for you?

Exactly. I mean, I was doing that. I was doing that before. Well, my GP said, I'm like, that's great. Why are you here if your GP has already solved the problem?

Exactly. I get Gary Brekka, Joe Rogan, all these, I'm just like, okay, well then go for it. I mean, go have them be your doctor and sell you, you know, cranberry juice and all that kinds of weird shit that they produce.

Or whatever Facebook page, this, that. And I'm like, look, I'm happy for you to bring information. We can have a discussion on it. The problem comes back to.

Is it working? Are you getting results? Because that's what everyone really cares about. They don't care about where their information comes from. They don't care if it's Western or holistic or this or that in the long run.

They care about results. And that's what we have to provide people. And we're using lab testing to show one side to the other. And when you're dealing with Lyme disease people, they have not gotten results.

Since Lyme disease became popular in nineties, overarchingly, there's a group here in Kansas city. That's the Lyme disease group. And I go there and I talk with them and I've helped numerous people through there, but it's just like the speakers that they bring in and I'm listening to some of them.

Cause I've gone and listened to some of the experts they brought in and I'm going. This data is from when and what demographic I'm like, you're just saying do more doxy again, like two more years of IVs and now you're going to get it after the first year.

I'm like, no. More doxy is not going to solve the problem for years and years and years and years. What's missing? Exactly. What did Einstein say? Repeating the same thing over and over and expecting a different response is insanity.

You know what I mean? And that's kind of where I see traditional medicine is. And don't get me wrong, my brother is a urologic reconstructive surgeon for UPMC.

One of the hardest, they fly him all over the world for stuff. And me and him, when I first came out with what I was doing, because I just went right into this.

I'd won a competition and said, fuck it, I'm going into this industry head first. Um, and it was funny, we would butt heads at every Christmas, every Thanksgiving.

It was just like, this shit's nonsense. I was like, well, your shit's nonsense. Finally, he's starting to come around now because whether it's Obamacare, which crippled him or the COVID, which, I mean, my, unfortunately, unfortunately COVID I saw in Miami, at least I'm curious to see where it was in Kansas city.

My business basically tripled with people coming in and understanding, well, you know, where we're watching this go on and oh, okay, my health isn't free.

Oh, holy shit. You know what I mean? So did you, did you see a similar spike in Kansas city for COVID for you? Oh my gosh, my business since COVID hit has like six X in busyness because all of a sudden people are like, wait a minute.

Everything I knew to be true. I need to rethink this. Yeah, exactly. And they realized that, oh, who are the people that are okay for the most part? Those people doing all the crazy stuff.

The ice baths and, you know, taking the supplements and doing all the red lights and all that. They're like, oh, wait a minute. those guys didn't get sick exactly what happened i mean i'm on my 18th booster shot which has only been used in humans once entire history but i don't know why why i don't feel better um but no that's funny so i'm also curious why did you name your place to the redefining wellness center i love the name well i named it in 2019 redefining wellness center wellness was a cool word back perfect timing not gonna lie i'll say the wellness part has been like overused and overused but redefining was because For me, it's, it's even my own business redefines itself every year.

Like I didn't use to use peptides. I didn't use to use meds. Now I've got providers in my clinic that are our medical providers and we're using meds and peptides and different other interventions alongside of natural, because I'm going to redefine what our practices are.

when we see better practices happening. You evolve. That's the most important part. Medicine has been stuck in the bronze age for I don't know how long.

And I think true medicine should be redefined every year. And every time I have to go through and do a medical recredentialing for my Florida license, it's just like, okay, let's learn about AIDS again.

Let's learn about substance abuse and heroin. It's just like, You guys do this every single two years. I mean, nothing changes in that field. You know what I mean?

Like, teach me something new.

Redefining Wellness and Finding a Niche

And I think that's where, you know, one of the biggest things I think that I like AI about for certain areas is that it's providing more of a vast informational aspect, as long as it's credentialed, obviously.

to where I think physicians who are more specialized in kind of, so I do a lot of consulting and bringing people from traditional medicine into the actual wellness world.

It's one of the businesses I do and teaching them how to make the labs in their office and how to do IVs or different peptides and all that kind of stuff.

And it's just kind of weird to see, it's almost like reconditioning somebody who's been brainwashed. It's like, well, I need cholesterol medication. Why?

Well, because I have atherosclerosis. What causes atherosclerosis? cholesterol no it doesn't high sugar acidic blood causes the actual rip cholesterol is doing its job you know i mean like and then so you sit there and start to see people like oh that kind of makes sense you know treat the treat the issue not the uh don't mask the symptom you know so it's kind of unique to see that you know there's there's more budding physicians and health care practitioners and everything that are kind of Coming over to the dark side, if you will, of wellness, regenerative function, whatever you want to call this industry anymore.

And it's super cool to see what you're doing, especially in Kansas City. Is there a big market in Kansas City or are you getting more virtual? Definitely not a big market in Kansas City.

Yeah. I was curious. I would love to, uh, it's, it's on my horizon. I got a building downtown and a dream of mine is to open a health social place, just have all sorts of tech and just be like, everybody come here.

We'll pay a membership and then we can all just use it and enjoy each other. Cause right now there's not any sort of community around that here. But, uh, Yeah, I mean, it's incredible what you're saying.

And I just think of what we do, what you do. It's critical thinking medicine versus what everybody is trained in is a standard of care, a standard process that never changes or changes once every 40 years.

It's critical thinking. It's allowing and encouraging your providers to actually think outside the box that they're in every single day. I love that. I always like to ask this in closing since I know we're getting close to our time here.

Question was, if you had, it's a two-part question. First one is if you could give any information as an obviously successful businessman and in the field that you're in, which is functional medicine, which I think is true medicine, if you could give any advice to a physician looking to get into it, what would that advice be?

Oh, I've never been asked that question. Exactly. One, identify your niche or your niche, however you want to say that identify what it is that you're trying to do.

Because when you're, when you're trying to learn this industry, you're so excited. We're doing everything all the time. We're lime and mold and parasites, but okay.

Also biohacking and women's health and hormones. And you're like, but when you take care of the body, you have affect everything. Yes, for sure. But growing a social media presence like I've done, it taught me one thing.

You've got to have something that you are the expert in, even though you know several other things. Build that niche. Make sure you target that thing.

until you have so much business from that, so much experience in that and you're known for that and people are referring to you for that, but then you can add in, you know, another topic or something like that.

That's been really important for me because trust me, I get excited. I'm like, Ooh, I like peptides. I like biohacking. I like hyperbaric changer, but all of that isn't my niche.

It's stuff we use. But it's not what I'm posting about every day. I like that. So that's good. So for physicians, find your niche or niche, whatever, however they pronounce it.

I just say, find what you do best and go with it. And so that's good. So second question would be as so there are both people watching us are both healthcare practitioners, as well as people who are aspiring to actually have care in this industry.

If you could give any suggestions, tips or just, you know, kind of information to somebody that is a non-health care practitioner but is wanting to actually transition into more of a wellness-based care because they're interested about it, what would your information be to them about picking the right place to go and the right person to see?

Health is logical. I love that. Health is logical. And people, when I say that out loud, I even told my team like, can we just start calling my practice like logical medicine?

You better trademark that, man. And they're like, that might not attract the right crowd. Most of our clients are female, just the way it works. Okay, fair enough.

And they're like, that might not be like their verbage that you would say to attract them in. But health is so logical. Like if you sleep enough, your health will be better than if you don't sleep enough.

That's an important thing. That's logical. If you eat healthy foods, your health will be better.

Logical Health Advice and Closing Thoughts

If you and just fill in the blank, it's pretty logical, right? If you're inflamed, your body could be damaged more. So if you find a provider and you're just like, man, what they're saying seems crazy.

not because of the training you had from your other providers, but just basic thoughts. If you go to an MD, like I just read an article yesterday, it said the, what is it?

The Board of Cardiology or the Heart Foundation, one of those foundations said they're dropping exercise and diet as their number one recommendation for heart health.

And they're switching to GLP-1. Exactly. This is not logical. Not at all. You already have GLP-1 inside your body and we should be teaching people how to be healthy without a pharmaceutical drug requirement.

This is not logical anymore. If your provider subscribes to things like that, that's probably not the right person. No,

you couldn't be more right, man.

I think it's the best thing. Make logical decisions for people who are logical in the industry they promote. I always sit there and say, your health care practitioner should be your hero.

People are coming to me and you in their time of need, so you can't really take weight loss advice from a fat doctor. I mean, you can't take cardiac advice from somebody who smells like cigarettes.

So it's a situation where I think the accountability physicians really start to need to have to not only present the part that they play, but also the actual knowledge.

Like I said, I see a lot of physicians who don't really know what atherosclerosis is, and they're cardiologists. I mean, they just go through and do the playbook.

So I think the whole logical aspect was a super good tip to give everybody. So kudos to that one for that. And again, man, thank you so much for stopping by, dude.

Really, really enjoyed talking with you. I think what you're doing is great. Again, it's Dr. Moore, Redefining Wellness Center. I'm kind of jealous I didn't steal that name first.

But thank you so much, man. I really appreciate it. And again, you keep doing what you're doing. It's definitely a rare thing in this world. Thanks, man.

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