S2 EP 32: The Warning Signs Men Ignore (and What to Do Next) with Dr. Richard Silva Transcript

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Introduction and Guest Welcome

Hey everybody, welcome to the E Pray Faith podcast with Dr. Tracy. That's me. And with me is my very special guest, Dr. Richard Silva. And I am so excited because I consider him one of the most brilliant mans in functional health. Uh he's a mentor of mine. He's a friend, and I'm just so honored to have him here. Our topic today is the little signs that men miss, the blood work they should be doing, and other testing. And Dr. Dr. Silva is going to tell us some easy steps to get going today. So, Dr. Silva, welcome. Thanks for being here.

Give us a little bit of background on who you are and what you do. Hi, Dr. Tracy. Thanks for inviting me. It's a pleasure to finally make it. We had to reschedule because of our traveling and everything. We had to reschedule a couple times, so I apologize for that. But, uh, yeah, anytime we can talk about getting healthy and what people can do to get healthy, I mean, doctor actually means teacher in Latin. It doesn't mean healer because healer is God. So, you know, um I believe that it's our job not only to talk about this stuff but sort of evangelize health and spread the word. Um you know I would say eat, pray, faith and teach because uh you know uh teaching is really important. So for example, a lot of people they men let's talk about men today because men are the most 85% of my patients are female only 15% of my patients are male and when I ask the guys what brings you in here today they say my wife right so it's really important to have a wife they kind of save your butt and get you to the doctor and make sure you get tested. So um a lot of the top 10 thou if you look at the top 10,000 diseases chronic diseases we're talking about right then the cause of all those diseases in 99% of the cases is inflammation.

Inflammation, Gut Health, and Hidden Signs in Men

So what we're talking about is inflammation. So, we're talking about heart disease, stroke, cancer, you know, any of the um connective tissue diseases, arthritis, you know, psoriasis, a lot of the derm stuff, uh which, you know, they're good at giving creams and stuff, they don't really treat the inside, although that's changing now. So, the gut, we have 30 feet of gut. So, most of the time, the problem is in the gut because your arms are not 30 feet long and your legs are not 30t long. So, think about it. If you have about 30 feet of intestine and your food is in there and all the absorption, everything takes place in the intestine, that's probably where the inflammation is. And unfortunately, there's 30,000 different foods that you can eat, which by the way, in America, 60% of us eat only three types of food out of 30,000. But there's 50,000 chemicals in the 30,000 foods, which is bizarre. It's almost double the amount of chemicals.

So if you drink water, if you're alive and you have skin exposed and you do things and you paint your house and you have chemicals and you treat things in your house, you're going to get toxic. You're going to get So what are the symptoms that people get that you should be looking for to see if this inflammation is taking part in your body because you will get disease from that.

So a lot of things that guys miss, number one, walking. So walking. If you lose your ability to walk, which is why we we care so much about amputations and things like that, and you're wheelchair bound, you definitely just decreased your lifespan. So, walking equals life. And if you look at all the blue zones, most of the blue zones, I would say 9.9 out of 10, the people in those blue zones, one thing they have in common, they walk a lot. So, walking is really important. For our listeners, for our listeners, what are blue zones? What does that mean? So blue zones are areas in the world where people live over a hundred years old. They have the most centinarians, right? So like sardinia, they eat a lot of goat cheese. So um you know, phytonutrients play a big role and nutrition plays a big role. Um and unfortunately, you know, the United States has one, used to have one in in San Francisco area, but that's it. A lot of them are, you know, in the mountains also. They're high up like Tibet because the air is thinner. So they have to do more uh stuff in in order to get oxygen.

They're kind of have less stress over there in the mountains and they eat more vegetables. They eat more local

food. Um but walking is probably the number one.

So, for example, if you wake up in the morning and your feet hurt, and this happens to a lot of my patients, and you cannot walk to the bathroom, you're kind of hobbling around and your legs are all tight and your hamstrings and your your calves are tight and you have plantar fasciitis, which is inflammation of the bottom of the feet or you have diabetes or pre-diabetes and your feet are burning, that's a sign. But a lot of people just kind of disregard it as something important. And if they have blood in their feet, they go to the doctor right away. But if their feet hurt, they're like, "Well, I'm just working a lot and or I'm just getting older, right?" Getting older. Yeah. And they go to the doctor and the doctor tells them that, "Oh, that's normal. You know, I can't play soccer anymore." So that it's not normal. So aging is not normal. Aging is a disease. Aging is not normal. Okay? So if you're aging rapidly, that's not normal. You know, you you of course everybody's going to age. I'm not saying that aging itself, but people that are aging rapidly, which means you have inflammation that is not normal. That is a disease in itself. And now we can measure things which we're going to talk about later um in terms of seeing how fast you're aging. So definitely walking would be one. The other one would be um uh very common is neurological like brain activity. You're forgetful. You leave your keys in your car. You lose things all the time. You misplace things. you forget people's names when you meet them. Now, any one of those by itself is probably not a problem. But if you have a lot of these issues going on, and remember Alzheimer's is a metabolic disease. It's inflammation. We call it now type three diabetes, right, in the brain. So, a lot of things that we learned from cancer and Alzheimer's in terms of genetic stuff, it's really a very small percentage. I would say 2 to 3%. 97% it's environmental and it's gut and it's we're poisoned basically with chemicals. So you have to do detox, you have to do elimination, um you have to do a lot of work to get rid of these chemicals in our bodies and there are lots of them plastics. They said the average American has one plastic spoon in their brain already. So we have the equivalent of one plastic spoon in our brain. So I think I have a spork. Yeah. And uh you know, plastic is made from petroleum. If you guys didn't know, it's a petroleum product. I just heard on the news uh yay for RFK Jr. Um he's removing by next year, you know, it makes sense.

He's giving them time to reformulate their products, but Craft and Hines, they're removing uh I forget how many. It's a lot of a lot of additives. All the additives they're removing are petroleum based. So imagine we have Vaseline in our food. We have petroleum products. People don't know this, but soap is I use goat milk soap. So, we can talk about that uh and and give you guys suggestions. You can buy it on Amazon. I'm not promoting any specific brand, but I use goat milk soap. I don't have that many wrinkles for a 56 year old doctor, but most soap, people don't realize this, is made of petroleum. And they have to put fragrance in the show in the soap to cover up the petroleum smell because the petroleum has a certain odor. So when you're bathing, which is supposed to be cleaning yourself, you're actually applying petroleum to your skin, you know, and Vaseline is petroleum based. So there's a lot of things that we consider healthy and normal which are not normal. So number one would be walking and number two would be brain dysfunction, mild slight dysfunction. Go ahead, Trace. I was gonna say you had mentioned and and I totally agree because I say that too that neurological issues are based in metabolic dysfunction. Can you just go into that a little bit? What does that mean? Sure. So in my opinion, this is my opinion. In my opinion, the gut is our actual brain. Okay? And the brain is our router or secondary computer. So why do I say that? Most of the neurotransmitters are made in your gut.

So like serotonin, right? Um your immune system is mainly in your gut, especially gut associated lymphatic tissue. And your gut regulates all your absorption properties of all your nutrients going to your brain. So most of the crap that we eat goes to our brain eventually, right? And that causes inflammation in the brain. Now, the brain is 60% fat and has about 30 25 to 30% of all the cholesterol in the body. So, number one, cholesterol is not bad for you. That's a myth. And number two, that's not what causes heart disease. And number two, fat is good for you. In fact, if you research this, I was shocked. I have a friend who's a uh really good functional medicine cardiologist, and he told me something that I almost fell off.

Brain Fog, Gut-Brain Connection, and Metabolic Dysfunction

every day in in our job, we we learn things that make me like almost fall off my chair. And he told me that the heart actually likes fat. So the heart actually fat is actually healthy for the heart because it's a fat is the only macronutrient that doesn't trigger insulin and insulin is one of the things like cortisol that causes inflammation, right? You have gluten, you have sugar, you have insulin. So insulin by itself when it's high, when you have insulin spikes, every

time your blood sugar goes above 140, you get mild brain damage. So think about that. That's crazy to hear about that. Every we know that seizures cause brain damage, but so does sugar.

So when you have that sugar spike, if you're monitoring your blood uh sugar on your arm on one of those machines, every time your blood sugar is over 140, you're having brain damage. pregnant women are having damage to to their, you know, they're going over 140. And that's very common. Most women fail their first test. It's 140, they they fail. I know this because I'm a primary care doctor and they always call me crying saying that she they're diabetic. I said, "Well, you're not necessarily diabetic, but you know, we have to address that." So, sugar, gluten, and insulin spikes are very, very bad. And the intestine, the the gut has all to do with that. your pancreas. Of course, we're also talking about the liver, the pancreas, and diabetes by itself means you have a clogged liver. Yeah. So, how do you lose weight? Let's talk about that. Everybody needs to lose weight in America. How do we lose weight? Where do you lose the weight? In your liver. Your liver makes you lose weight. If your liver is clogged and nonfunctioning, you are not going to lose weight. So if you have fatty liver, you have pre-diabetes, you have high triglycerides, which is what we use as our criteria for heart disease risk is high triglycerides, low HDL, or this other test that we're going to talk about in the future, which is called APOB. Um, these new tests that we use and inflammation markers, which we're going to get into. Um, that's how you monitor your liver. And it's very simple to clean the liver out. I mean, it's not hard to do. It's not like you have to do chemotherapy. We're talking about basic things like fish oil and, you know, ALA and CoQ10 and, you know, cutting uh processed foods and chemicals. Uh how do you know a food's processed? If it comes in a box, in a bag, it's processed.

Period. Yeah. I always say if it has a label, it's been processed in some way. I mean, you can put a potato in a bag, but it doesn't come in a bag, right?

It's not natural. Exactly. Grows from the ground. So walking the inability or if you have some sort of issue with that neurological memory etc. You could probably also go into things like migraines and anything like that, anything neurological symptoms of inflammation, right? So joint pain, migraines, you know, any kind of headaches, abdominal pain, gird, stomach pain, irregular bowel movements, they're all symptoms of the same thing that your gut is not working properly, right? And there's different things that can be happening. You can have overgrowth of bacteria. You can have parasites. You can have um gluten problems. You can have inflammation problems. You can have damage to your gut. Uh where we see the tissues actually damaged. Uh one interesting thing is like butter got its name from butyric acid which is the main ingredient in butter and that's one of the things that helps repair your gut.

Um uh we tell people not to not me but uh the modern uh medical people tell people not to eat meat and not to drink milk and not to you know eat butter and then we we get things like margarine which is you know loaded with uh it's a really bad oil. So all the seed oils are really bad for you. They cause cancer, they cause heart disease, they cause um diabetes, they cause obesity. Obesity and diabetes are linked. So, obesity is probably 80 to 90% pre-diabetes. And, you know, there are some genetic forms of obesity, but they're rare. Most people that are have obesity around the midsection, they have some sort of, you know, insulin resistance, which is another word for inflammation. And of course, stress has a lot to do with it. But like I had I was 14. I had allergies for years. I went to I didn't know I went to medical school. I I lived on Claritin and all that stuff. And then I realized it's the gut, stupid. I cleaned out my gut. I no longer have allergies. So allergies, so sinus problems, how many people suffer with that? That is not a disease. That's a symptom of toxicity. So like you said, so are migraines. So when you have these things, even though the medical community makes it a separate disease so they can give you a separate medicine to treat that, it's really all symptoms of the same disease. And the the core of the disease, the functional medicine, we get to the root cause of the problem is the gut. Yep. So third, so you're saying walking, neurological, and any type of gut issues. Are those your three? Th that could be that could be. And uh also um for males I think uh it's really important um see how your because it's kind of like a predictor of future problems. How are your erections? And I don't mean you have to have a rip roaring erection like you're 20 years old. Yes.

Yeah. But in the morning when you wake up, I always say the amigo should wake up before you, you know, it should be kind of waking up when you wake up, you know, and uh, you know, depending what you're doing during the day. It's normal to have, you know, like a partial erections during the day. Um, doesn't mean you're a pervert or anything. Women women have erections as well as men. Um, they're just smaller. They're less noticeable. But that's a really good indication of health. Why? Because when you don't have erections, that means you're already

having some inflammation in the small arteries, right? So in there's two kinds of damages to your body. There's small vessel disease and large vessel disease. So small vessel disease is like your nerves, your eyes, and your uh your erections. Large vessel disease would be like your heart, you know, your your large arteries in your legs and your kidneys, things like that.

Although nephropathy can be microvascular as well. Um, so if you're not having good erections and you're under 50, for example, right, you're under 55, then your hormones are probably screwed up. And unfortunately, I have to say this, Tracy, is that in our society today with all the plastics and all the chemicals, we're seeing 30 year olds with the blood work of 60 year olds. You know, wow. When I worked in the VA, I I was a doctor in the VA when I first started and we used to do World War I vets, believe it or not. We had World War I vets and World War II vets and they're at the end of, you know, in their 80s and they still had great testosterone and they still had erections. They still had sex once a week with their wives. I was shocked by that, you know. And then I started seeing like in Vietnam vets, they started having problems in their 50s, which is kind of like the norm now, right? Um it's pretty prevalent in 50-y olds. And then now I'm seeing 30 year olds with erectile dysfunction and 28 year olds and 25 year olds and they can't get people pregnant and their FSH and LH is all screwed up, which we can get into that later, the test and everything. But that's a real So I'm not worried about pregnancy. I always tell people in my office, I'm not a gynecologist, so I'm not really worried about pregnancy in my office. We don't really do that. But what I'm worried about is if you're not healthy enough to get somebody pregnant, that means your health is bad and you're aging rapidly and you're probably not going to live as long. You're probably cutting 10 years off your life because you're not going to make it into your 70s and 80s, right? And we saw that with COVID, with increased inflammation of COVID, people were dying like flies.

Erectile Health and Early Hormone Warning Signs

You know, people that we didn't think would die in their 40s were having strokes and heart attacks. And we were thinking, whoa, what's going on here? It must be COVID.

It wasn't COVID. It was our bodies were toxic and then, you know, a small inflammation in your body and you die. Yeah. Most guys though, they brush off these symptoms like fatigue or loss of strength. And it's funny, you're you're talking and I'm hearing words that have come out of my husband's mouth, you know, just about like he's not as strong as he used to be. Um, you know, just general fatigue. He used to snore really bad with sleep apnnea and we kind of remedied that. So, and it's just about, you know, fixing those little things like you were talking about. It's not always the big things like guys look for like blood pressure and, you know, and unfortunately cholesterol gets thrown on them. They don't normally look at like, hey, I'm just generally more tired than I was, and then they get chalk it up to being old or their doctor says that to them. So, I appreciate you even just starting with something as simple as walking. If you can't walk well, you don't have you have pain when you walk.

You can't I mean, my gosh, when's the last time most of these guys ran? Yeah. And you know, the wife will say, "Stop shuffling your feet. Pick up your feet when you walk in the morning." you know, and then we should be asking, why is this guy shuffling his feet? He doesn't have Parkinson's, right? Why shuffling his feet? You know, or you're so forgetful. You leave everything. You leave, you know, we go to the friend's house, you leave your jacket, your wallet there, your keys, and you got into the wrong side of the car. You know, we we laugh at these things. And, you know, we call them brain farts. And uh, you know, I'm from New Jersey. That's the way we talk. And, uh, that can be it can be an isolated thing. I'm not saying all these symptoms by themselves are are pathonommonic for disease are anything serious but we need to pay attention to those things. So if we start dropping things all the time we're forgetful. We lose things. Um you know you go to Target and you leave everything that you bought. But this happened to one of my patients. He came to my office. I have a Target right next to my office and Target called me and uh cuz the pharmacist knows me over there and she's like, "Dr. Silva," I'm like, "You're calling me?" Like, "Target called me?" Like, "What? What is this?" Right? And they're like, "Yeah, your patient so and so is there with you cuz he said that he was going to come see you after he picked up his meds." And I'm like, "Yeah, he's here. Why? He left his whole shopping cart and his meds here." Poor guy. You were probably like, "So, we're going to talk about the gut brain connection today." So $40 worth of stuff he left at Target and just Well, it's better than working out and not paying for it, you know? I mean, jail, so there's the flip side. So, we had a big conversation, you and I, last week, a three-hour conversation on Saturday morning. It was supposed to just be a five minute call, but that never happens between us. So, anytime I can captivate your brain, I'm like, let's just stay on the phone forever.

Um, we talked about blood markers, cholesterol in general, and I know that you teach on a wide variety of of different markers. Cholesterol seems to be the mainstream industry marker for health for men because it's this cardiovascular risk and we just heard you say it's not, but there are some numbers that you think are more important and some testing. So, if you can give just a highlight for our listeners because this whole month is about men. We started off with understanding hormones and testosterone as that secondary hormone that kind of develops all your traits. We brought in Jamie Dorley last week. We talked about supplementation, natural ways. We also talked about neurological impact, mood, uh, and you know, I mean, we were we had statistics that of the 500,000 people that unalive themselves, 80% are men.

Yep. So, there's a big push now for men to be aware of what's going on in your day-to-day health. So, what are some of the testing that they can do or ask their functional practitioner or come see you and say, "Hey, I I want to get these tests done." Dr. Silva said, "Those are the things I need to be looking for." Yes. So, thank you. So, uh Dr. Tracy, uh the things you mentioned, I just want to reiterate two things real quick. is that being cranky or having mood changes and also people that are snoring a lot that didn't snore before.

Those are telltale signs that you're needing hormone replacement or testing of the hormones because remember the hormones are there to function to make us function properly. And of course, there's a lot of vitamins like vitamin D3, magnesium that go with the hormones to support the hormones. Uh, like people don't realize this, but your thyroid hormone is only made 20% of T3 is only made in the thyroid. So if you give somebody thyroid medication, they can only make 20%. So you're like, "Wait a minute, where's the 80%." The 80% is made in the periphery of the body, not in the thyroid. And you need things like magnesium and D3 and K2. You're going to hear this me saying this a hundred times. They do a lot of things. And those make your body make more T3, which is the active form of the or convert T4 to T3 as we should say. And uh a lot of people can't do that. And then we give them thyroid hormone and the doctors say they're resistant to the thyroid. They're not resistant. It's just that 80% is made outside the thyroid. You could only beat the thyroid up to make 20%. It won't make more. you know so a lot of things we have to explain to patients the way the body functions and that way they can treat themselves appropriately. Now, cholesterol, I was fortunate in my training, um, I went to medical school, um, in the in the 90s, late 80s, early 90s, and I was fortunate to meet a lot of this, believe it or not, like all these drugs came out during my medical school training. When I went to medical school, HIV was still treated in the hospital as a dying terminal disease. We didn't have, we had two medicines to treat it. That's it. So, the cholesterol was a new kid on the block. I met Dr. Castelli, one of the most famous scientists at Harvard that studied this stuff. And what he told me personally was that in the studies, the total cholesterol and the LDL were not the most significant to predict heart disease. And that's the ones we use the most, right? And total cholesterol is very variable.

Better Blood Markers: Cholesterol, APOB, and CRP

And when we measure that, it's calculated and measured. It's not an So, if you do three cholesterol tests in the same day, depending the time of the day and everything, you can get three different results. So, that's not good. What we found out, what they told me, these were the researchers that did the research, is that HDL, the, you know, so-called good cholesterol and the triglyceride level and the ratio, which should be 2:1 or ideally one one, but up to 2:1 is normal, your triglycerides over your HDL. So for example, if you have a triglyceride level of 100, which is the ideal, 100 or less, and your HDL is 50, you would have a ratio of 2:1, which is good, or less. But instead, we focus on LDL when LDL is not even a causer of disease. Now, what we should say to be correct is um oxidized LDL or inflamed LDL. But when you take a statin, the re what what one of the things the statins does is that it increases the receptors on the liver to recycle the LDL. But the problem is it doesn't recycle oxidized LDL. So it doesn't work like that. And it's anti-inflammatory. And you get the maximum dose at the 70 to 85% of the dose with the lowest dose you can get an anti-inflammatory. And of course we use CoQ10 and other things that are and turmeric things that curcumin that you even get a better lowering without the side effects. There's a lot of side effects to statins that we're not going to go into but many um so I focus more on triglycerides. I focus more on um HDL the ratio and also we do something called hom IR which is your fasting glucose times your fasting insulin which most doctors don't even measure divided by 405 which is a constant and you're going to get a level like around 1 to 1.5. Mine was 4.3 when I started which is horrible. Now it's one and um that's going to predict your level of insulin resistance. you get a score and you can follow the patient with or the you know the patients themselves can follow their score and see if they're improving or and and sort of keep tabs on how their doctor is doing and it's okay to challenge your doctor and talk to your doctor about these things and ask them questions. I

mean they should be able to answer your questions. That's what we're here for. But those are really good tests. Now the newest test that I want to talk about today um kind of new to a lot of cardiologists and doctors that we've been using is APOB. So APOB is a type of carrier of cholesterol. It stands for a apo lipoprotein and it's basically your body is made of water. So it needs this layer. It's one cell layer thick to carry your cholesterol which is made of fat um around your blood and deliver it to where it has to go.

Remember all the cells in your body are made of cholesterol. Your brain has 30% of all the cholesterol in your body. Uh the cholesterol of your brain is about 240. The cholesterol of an egg is about 240. So this cholesterol being under 200 is not correct. And in fact, if your cholesterol is under 180 with medication, you actually shorten your lifespan. So it's not good for you to have a low cholesterol unless it's naturally low. In some women, they have such high HDL like in 130 HDL that their cholesterol is normally and then everything will be low. Um um their total everything will be low. But uh LDL is not the bad cholesterol. It's one type of LDL which we do a uh Dr. Tracy and I were talking about this uh the other day on the phone. We do like a Berkeley panel which will tell you the particle number, the particle size, and then you could see if you have healthy LDL or unhealthy. And believe it or not, there's even a type of HDL that's not healthy. So, you have to do it on all the different kinds. It's more complicated than what we're saying. But basically, the take-home message is cholesterol is not the bad guy. Oxidized cholesterol, which is caused by sugar consumption in the liver. when you eat fructose. So glucose is an electrolyte. It goes through the liver, every cell in your body. Fructose is not used by any cell in your body and it's metabolized in the liver like whiskey, like alcohol. So if you give your kids fruit juice from a bottle, you're giving them basically a type of alcohol, which is fructose. The only thing is it doesn't really go uh to the brain like alcohol and make you although I think kids get drunk when they eat too much sugar. If you look at little kids eating sugar, they act drunk. So, in a way, they do get um intoxicated and basically their little livers are working overtime and can cause a lot of problems with fatty liver and obesity and joint pains and rashes and eczema and all these things that we think are normal for little kids to have when really their digestive system is not optimized, not working properly, and they're having all kinds of problems. And then we're giving them creams and lotions and steroids when we should just be treating their guts and their livers and their pancreas and all that stuff. So really important. Um the thing that made me question all this I'll tell you real quick in 10 seconds they started doing uh beriatric surgery in my hospital where I was a resident and one of the surgeons I worked with him very good surgeon and uh I noticed these people would have surgery and within two days two two weeks they were off all their diabetes medication and I'm like what? Yeah, they're off the insulin, they're off the metformin, uh they came off two or three of their blood pressure medications, they don't have high blood pressure anymore, they don't have uh I'm like, that's impossible. There's no way that that works. And then it was another patient and another patient and another P. I'm like, okay, now it's not. This is a real thing. I got to investigate this. It turns out when you fix their insulin resistance, everything got better within weeks. These are people that had been diabetic for 10 or 20 years. And then I don't know if you remember this, Dr. Tracy, but back in the day, the doctors would tell the patients to gain weight. So, they weren't fat enough. So, they had to gain like 80 pounds so they would qualify for the surgery to have the bypass surgery. You know, I was never in that club, but I know a lot of doctors were doing that. And as soon as they did the surgery, even though it's not a great surgery because you can't absorb a lot of stuff after the the initial surgeries that they were doing back in those times were more severe, they do much better uh procedures now. Um like gastric sleeves, but back then it was the oldfashioned cut the stomach out and the dadum out and and reso everything.

They would be cured. Okay, they had poop all the time and you know they had other issues but they didn't have diabetes or hypertension anymore. And I thought that was so and nobody was talking about it. And I'm saying to myself, hello. Oh, hey, doesn't anybody see this and and everybody kind of blew it off, but that's what got me interested in function. So I said, you know what?

Instead of cutting somebody's stomach out, why don't we just change their diet and fix their gut? We don't have to cut their stomach out. Well, that's where all the research came from. GLP1s and GIPS was the gastric bypass success and exactly what you're saying. They realized that by resectioning and taking out the first part of the small intestine, they they took the GLP-1 and directed it right into the second level of the small intestine. And it fixed everything. It helped activate GLP-1 because most of the disease was in that first part of the small intestine. The LS cells that you know that were releasing it were damaged. So, long story short, that's where all this all of this research came for GLP1s and why they were successful. And the interesting thing was two weeks into gastric bypass, most people didn't really lose a ton of weight. So, it wasn't the weight reduction, it was the resectioning and building a new pathway. Now, as hard as that was, and yes, there's long-term problems because, right, their

microbiota got messed up.

Their ability to absorb B12 and other nutrients long term was dangerous. But it really launched the idea that if we can change a pathway of communication for us, it's through good nutrition and detox, you can fix the underlying cause.

So that's super fascinating. I didn't know that. It's funny because I that's the first thing I teach in my peptides for weight loss course is where did this research come from? It's from gastric bypass. So I I teach the whole thing on it. Um, so blood markers for men, you know, obviously the the Berkeley uh cholesterol panel uh as well as knowing your homir, which is just simple math, but you do have to know your fasting glucose and your fasting insulin. And then any other markers that you feel are like CRP, the high sensitivity CRP. So we use that a lot in my office. That's a great predictor of endothelial damage and inflammation. Of course, there's some false if you we had a guy the other day, the nurse called me, "Oh my god, his, you know, CRP is 15. The guy has pneumonia or had a upper respiratory infection. So, there's some false positives. All these tests, the main thing is you have to go to your doctor. They have to know how to read the test and interpret them. Every test has a potential to be done incorrectly or fail or so always be, you know, if you get a real weird test result, I always repeat it or question it. I don't just go with every test result that I get. if it doesn't match the clinical picture of the patient, I'll reorder the test or, you know, do something different. But CRP is a really good u measure of and we use a lot of um curcumin in my office. Um I love it. You know, Dr.

Lifestyle Foundations for Longevity

Len, one of our our our teacher doctors, always says you put your arms out and as many as you can fit in your hands without falling on the floor. That's how many you take in in one time. I take about four twice a day because I have a little bit of uh rheumatoid arthritis um from my uh past and which I'm working on through my gut and uh yeah uh we and we also noticed that uh GLP1s because of that also work for alcoholism and we use it for bulimia. You can use it for anxiety and depression. Um it it does kidney protection in diabetics. It does brain protection and people at risk for stroke, uh cardiovascular protection.

So, there's a lot of benefits um with those medications besides just the weight loss. And we're learning more and more every day, more uses. We're micro doing it now and in patients that need those other protections, but may not necessarily need to lose weight. So, you can micro dose it and uh spread it out.

Um, and you know, the blood work is an ally, but I always say you have to use the blood work in a clinical picture of the patient. Blood work. I always tell patients, I don't treat labs, I treat patients. So, you got to always use the blood work. But people think that you need this million-doll blood work. You can order an APOB by itself. It's a very good test. You can order a CRP, a high sensitivity CRP, or even a regular CRP. You can order um you know a a fasting insulin and a fasting glucose. You can even do those in the office some of those things and you can get a really good idea. You can do a basic uh lipid panel fasting. And by the way, the lipid panel you should do 12 hours fasting if you can. Uh the more fasting it is, the more since it's calculated, it's not measured, right? So the difference between like a Berkeley panel, they're measured so it's more accurate. The other ones are calculated. That's why if the triglycerides are too high, they always tell you they cannot calculate the LDL. Um, so those things are are are calculated and the other ones are measured. So, it's more accurate, but you can get an idea. You know, if somebody comes over with a triglycerides of 500, they're still going to be high.

There's no way they it went over 400 points over the normal. You know what I mean? So, my patient the other day, his blood sugar was like 270. He's like, "Yeah, I had a cup of coffee this morning." I'm like, "No, nice try." No.

Right. Right. That must have been a hell of a coffee. That's right. Did I mention the 42 scoops of sugar in the flavored? Yeah. So, you know, take that with it. I had a patient that told me they only drank one beer a day. And then I went on his Instagram and it was like a five liter bottle of molasses. I It was like a keg. It was like a What are those over in Germany when you have the big like yards attached to your neck? Yeah. So, so we went through some, you know, signs to look for that most men miss. We went through some more important testing that they should be asking for versus like, hey, just do a cholesterol panel so you can put me on a statin. So, what are some things that men should be doing for their longevity and health every day?

They're going to, you know, look at these signs and symptoms and saying, "Well, I I can't walk. I my feet hurt." You know, what what should they start doing? What's an everyday supplement, an everyday lifestyle practice? in an everyday nutrition plan that you would be like one, two, three, here's what you do. So there's pillars of health. We call them pillars of health, which means that if you don't eat right, you can't exercise more to compensate for not eating right. So number one would be a diet that's high in good fats, moderate, medium proteins because proteins activate insulin as well and inflammation. So, medium protein, high good fats like avocados, olive oil, nuts, um even butter and um low in processed sugars, right? You can eat fruits but not at midnight because it has fructose. But if you eat the real fruit and avoid all those crappy boiled pasteurized juices that they shouldn't be they shouldn't be allowed to call it juice. They should just be able they should call it sugar water in my opinion. But um yeah, so adding nutrition, drink coconut water and healthy water with a good pH. So water, healthy diet, which I just talked about. Uh sleeping regularly every night, turning the iPad off. Don't stay up till 2 in the morning unless you're talking to Dr. Tracy. And uh um you know uh exercising could be walking. Just start walking. Get some good shoes. And you know what I tell people? You can bring the whole family. Your kids can walk, your mom can walk, your dad can walk, your dog can walk. I guess you can't put your fish in a maybe if you carried a fish tank. But, uh, the dog can walk, the kids can walk, the the parents can walk. Walking is really important. All the blue zones that people that live over 100, they have in common, they walk a lot. They walk all over. Okinawa, Japan is another blue zone. Lots of walking, right? And they eat a lot of plants. They eat a lot of plant-based food, which is has a lot of phytonutrients. But olive oil is the food that has the most phytonutrients.

So add olive oil to all your food. That's one way to increase. And u the other thing is deal with stress. So um whether it's you know I use prayer. I'm Christian. I like to pray. I know a lot of people say they want to meditate. I would consider that creative praying. And uh you know um but uh some kind of removal from life and going somewhere and either laying down or or sitting in a a nice uh dim room with natural light, not under these fluorescent lights that we have and maybe going to the beach barefoot, walking barefoot. I know that sounds like I should be arrested for saying that, but yes, you should walk barefoot in the proper ground. Make sure it's clean and no needles and stuff like that, but walk on dirt or grass or sand. I like the beach. Breathe in negative ions from the water and ground yourself in the earth. That is a thing. And the so that's things you can do. Now what you should take this is almost 99.9% of the population. Vitamin D3 with K2, magnesium. Uh depending on what you have, you may there's different forms. I like uh magnesium blycinate, but you may have to have a mixture depending if you have more brain issues or constipation, you can have a mixture of those. Um I like um Celtic salt in my water. Has 91 minerals. So you do a pinch or two of Celtic salt in your water. And uh I like an omega-3 um fatty acids uh DHA and EPA. And of course we can we can give you all the dosages and all the brands that we like and all that but those are those are the basic ones and a chelated uh multivitamin. Um one of the other tests that you can do that we kind of missed was doing a methylation test. You probably only need to do that once in your life. It's not something you need to do every year but doing a genetic methylation test. But one way around that is just make sure whatever vitamin multivitamins you take they're methylated. But that's so that's why pregnant women take prenatal vitamins and sometimes they still have problems is because they probably have some kind of genetic block in the methylation process and they can't absorb the folic acid or or some of the other B6 or B12 and then they have issues especially if they're a little bit older like we tend to be these days. So um that's a really important point. But if you do those simple things, it's not expensive and uh you know you tweak your diet a little bit. I'm not saying you have to be 100% perfect, you know. Um, but just add all those healthy things in your diet. Watch your processed foods and sugars. Walk, drink clean water, get outside. You know, uh, I read this thing that we were supposed to spend 85% of our time outside. So, for example, when you go out, today's the beginning of summer, perfect day to say this. So, the pineal gland gets um, activated by sunlight, a natural sunlight, right? And that's helps you in night and day and melatonin and all that, but it also helps with stress relief and uh um increasing cortisol and all that, but just being outside. We only spend 2% of our time outside now, Dr. Tracy, instead of 85%.

2%. Okay, maybe in Florida we're a little bit better, you know, because it's easier. But, um, still, I mean, our kids are are are not being raised correctly in house in computers, um, on screens all day long, and that definitely has a negative impact of health, you know.

Well, let me ask you that. It sounds like inflammation is key, having the right testing is key, making some simple lifestyle changes is key. You know, since this whole month is dedicated to men, I really think our metabolic dysfunction is really one of the root causes. Like, it really does start with the simplicity of what is at the end of our fork. Uh, and it's the easiest thing that I think we can control, but we don't because we're just inundated with

misinformation. Can you just make the connection for men listening between the entire insulin resistance that you're kind of looking for on their markers, how it impacts their hormones, and then what are some simple things would applying what you said here with the highfat diet, the supplements, will that help them fix that? Yes. So, yes, you can fix this.

It's easily fixed. And there's lots of good books out there we can recommend to you as well um to get a more specific diet. But basically it's like this. When you eat processed foods which are chemicals, they're not natural. So the difference between a natural food like a potato and a processed food like a potato chip is it's altered. And now unfortunately we even have natural foods that are GMO that are altered that they look like tomatoes but they're not really tomatoes anymore. we don't know what to call them, you know, they're not tomatoes or tomatoes. They're something else, right? And um so basically, you're eating these foods, they have pesticides on them, chemicals in them. Um orange juice, when you buy orange juice in the store, it has corn syrup in it. And what they did was they took all these crappy ingredients and named them natural flavors. That's beautiful. So now you look in the back, it says 100% natural juice. And you look, what's this ingredient, natural flavors? Well, it's a bunch of, you know, what t that they were able to um make a name, call them natural flavors, and put them in your food. So, when you drink orange juice, it doesn't look like orange juice. If you go to Brazil, where my family's from, even though I was born in exotic New Jersey, um, and you ask for orange juice, they fresh squeeze it. It looks like dirty water.

How Insulin Resistance Affects Hormones and Aging

It looks like fuzzy water with orange pieces in it. If you get the orange juice from the supermarket, it looks like orange milk. So, we know that that's wrong. It doesn't look like that regular orange juice, right? And um so you're getting a bunch of crap in our food that we didn't bargain for. So that goes to your brain.

It causes it goes to your gut first. Then from your gut, it goes to your brain. It clogs your liver. It clogs your pancreas. Causes diabetes and insulin resistant. Makes your blood pressure go up. Damages the inside of your arteries. Causes cracks in your arteries, which is why the cholesterol has to go there. The cholesterol they use as glue to heal the cracks in your arteries. So the co the cholesterol is not the bad guy. And then you get a a cap on there that's made of calcium. That's why they use calcium score. And then um this goes to your hormones. Unfortunately, it affects your FSH. So women cannot have babies, men cannot make sperm. It damages your testicles.

It damages your pituitary. It damage your secretion of hormones like FSH which make your testicles and ovaries produce eggs and sperm and it blocks testosterone. We see things like uh SHBG and different hormones being out of control. It makes your um uh one of the hormones that we look at is um for example your estrogen ratio. So people are estrogen dominant right? They have high and this is men too not just females. We call them man boobs in men.

And estrogen increases your risk of cancer, right? Um prolactin levels go up. Uh usually prolactin is due to a lack of vitamin D and other uh important uh nutrients and then you get stressed. So we live in high stress lives. We have cell phones. We have to answer the phone all day long, all night long and we don't have any time off. And then what happens is all these chemicals go into your genes into your through epigenetics. They go in through your sperm into your egg and then you have a baby at age 40 and the baby's autistic.

That was something unheard of when we were a little kid. So autism is pollution, genetic pollution from your parents to the baby. And plus all the nutrient deficiencies that the pregnant woman probably has. And imagine how many chemicals she's getting from all her food that are going to the baby. Um, so you know, it's all connected. Um, and now we're seeing 30-year-olds that cannot get people pregnant, that are not getting erections, that are not developing properly, that are aging super rapidly. We can check uh telomeres and aging uh statistics. In my office, we don't go by chronological age anymore. We go by biological age. So, every patient that comes in, I assign a biological age. Sometimes it's good, sometimes it's bad, it's worse. And then you know I tell them look we can fix this but you have to starts with the fork just like you said starts with what you put in your body. You uh literally you are what you eat. And I would even go one step further. You are what you absorb. So some people eat correctly but they don't absorb any of the food because they're damaged. And that's another issue that we you know we can go into another time. But it's very very simple to just make basic changes. Not expensive. You don't have to spend

$1,000 on food. You don't have to get any expensive drugs. Uh you just take some simple supplements, walk, drink plenty of water, switch over to fruits and veggies and lean uh meats like your mama and your grandma told you, and you're going to start improving your life. Yeah. Amen. Well, thank you, Dr. Silva, for being here and sharing all your knowledge. I know that guys are probably sitting back like, "It can't be that simple." But it is. It really is. Uh, and I know that you're a big advocate for, you know, higher fat, exercise, so you do all the right things. So, you're very special doctor. Tell us about your practice and where you're located so people can reach out to you. Sure. So, we're down in Deerfield Beach next to Fort Lauderdale. Um, right next to Fort Lauderdale Airport. Uh, we're right on Federal Highway, which is a main road there. We do functional medicine, regenerative medicine, and we do nutritional counseling. We do IVs and all kinds of IV therapies and uh we basically get you back to where you need to be. We see how far you've strayed off course and we kind of get you back. And it reminds me, you know, I'm Christian. It reminds me the story of Jesus where he had a hundred sheep and one got lost and he went after the one instead of saying, "Well, I have 99. I'll just make sure these 99 are safe and I'll let that one see if he wanders back or we'll let one go." Nope. He went over there and put that noose that that that hook around them and hooked him and brought him back on his shoulders. And I feel like, you know, that's what we need to do to each other. We need to use Jesus as an example. Not necessarily a religious thing, but I'm just saying we need to look out for one another and help one another, encourage one another. So one of the things that makes my patients successful is we make networks with the patients and friends and one kind of encourages the other and they call each other and you know talk about these things with each other and uh kind of see where once you see that the problem is in everybody and everybody's kind of the same it kind of demystifies the problem and makes people think like oh this is a normal thing that we have to fix. This is a a normal thing in our society and we need to address it and and all be healthy. And think about it.

Don't you want to live in the world where the kids are healthy and the adults are healthy and you can go out and have fun and travel? We don't want to live in a world where everybody's sick and polluted and aging rapidly and dying and being on chemo and getting that's another thing. I've seen 30 year olds now getting stage four colon cancer in 30 year olds, you know, 28. So, we're seeing the cancers are growing in young people and and aggressive cancers, not benign cancers. And that's a it's all the same cause.

Practice Information and Closing Advice

it's inflammation and you know uh I'm getting into cancer treatment more and more almost not by choice just because it's so prevalent now and basically what I what I was shocked to learn when I started looking into it basically it's the same mechanism as heart disease and diabetes and all these people dying of heart attacks at age 35 and 40 they all have some kind of insulin resistance or metabolic disorder so it's really the number one problem in the world in our country definitely To me, it's a medical emergency that we need to address as a society. Sounds like RFK is trying to do a good job.

He's cleaning house and he's, you know, holding the food companies accountable to that. But I think every citizen of the United States, every adult, you know, you're over, let's say, 21 years of age, you have the responsibility as an adult to take care of your body. God gave you a temple, a body, and you should learn about it. There's people like Dr. Tracy, a lot of people out there that have good information, good podcast. Learn about what's going on. Uh don't necessarily listen to what everybody's saying, but learn for yourself what you need to do to be healthy. It's a lot The message that I always tell my patients, it's a lot easier and cheaper than you think to get healthy. It doesn't have to be a $10,000 thing to get healthy. Start with little things and change little things. Make little changes. It takes 21 days to make a habit and start increasing how much water you drink. Start increasing how much you walk. Park your car far away and walk far away. You know, uh go to a park after work instead of going home and walk for 15 20 minutes. Um read a book. Get rid of read trace Dr. Tracy's book and uh and uh you know and and her podcast uh read up on everything and and see there listen and see what's going on. Uh my my teacher was Dr. Dr. Mark Heyman. Uh that's how I started learning about in integrative and functional medicine. Uh what I like about him is that um he has a nice mix between regular medicine and um you know functional medicine. So a lot of docs are scared to do what I do because they feel like they have to hang up their their their their sneakers and they can't be doctors anymore. No, on the contrary, you're going to be a better doctor. You're going to understand your patients better and you're going to get better results. So you can do both. You just have to start with the things that are broken like the gut which is I I I learned a statistic Dr. Tracy that 94% of the world has a nonfunctioning gut. Wow. Healthy gut. So only 6% of the world has a gut that works. Yep. That's unbelievable. And if we know that's

where it all begins, right, that means those people are generally unhealthy, which is probably you and I sitting here too. So we need to take care of our guts. So no judgment on anyone listening. This is more of information of things that we all struggle with cuz we live in this world. And you know, I love everything they brought to the table today. So thank you so much for being here. And if you guys feel this podcast was informational, please share it with someone who can benefit. Also, make sure you subscribe to the channel and don't forget to look up Dr. Silva and go see his staff. They're amazing.

Thanks for being here, Dr. Silva. God bless you, Dr. Al. Always a pleasure talking.