Hi. Hi. >> Hi.

Opening Banter and Schweddy Balls Joke

>> Hi. >> Hi. >> We're back. >> We're back. >> I love your Schweddy balls. >> I love your Schweddy balls. Since I'm to say that, I don't know what Since I'm to say that, I don't know what it is about the microphone today. It's it is about the microphone today. It's like like like giving SNL.

giving SNL. >> SNL? And what was that skit? It was >> SNL? And what was that skit? It was about what? about what? >> With Alec Baldwin and the Schweddy >> With Alec Baldwin and the Schweddy balls.

balls. balls. >> That's what it was it was his he >> That's what it was it was his he >> His Christmas >> His Christmas >> His Christmas Schweddy balls cuz his >> His Christmas Schweddy balls cuz his last name was Schweddy.

last name was Schweddy. >> They were like popcorn balls or >> They were like popcorn balls or something. something. something. >> Popcorn balls. >> Popcorn balls.

Schweddy balls. Schweddy balls. >> Anyway. >> Anyway. >> Anyway. >> Um >> Um >> Um speaking of uh speaking of uh Schweddy balls. Schweddy balls. >> Ew, really?

>> Ew, really? >> Um sex makes you live longer. >> Um sex makes you live longer. >> That's >> That's >> That's >> So, all >> So, all >> That's not okay.

>> That's not okay. >> All of these things that we're say Yes. >> All of these things that we're say Yes. And so, apparently on SNL they were they And so, apparently on SNL they were they were on to something.

were on to something. >> They were, I guess. >> They were, I guess. >> That that if you if you purchase >> That that if you if you purchase Schweddy balls uh Schweddy balls uh you can live longer and you can live you can live longer and you can live better.

better. better. >> Yes. >> Yes. >> Yes.

Research Overview on Sex and Longevity

>> So, >> So, >> So, >> I'm so confused by everything that just >> I'm so confused by everything that just was said there, but yes. was said there, but yes.

>> trying to tie it all in. Did it work? >> trying to tie it all in. Did it work? >> All right. Well, >> All right. Well, >> makes us live longer and better.

>> makes us live longer and better. >> Yes. I mean >> Yes. I mean you Right. I mean you would say you Right. I mean you would say >> I think it's obvious that it makes >> I think it's obvious that it makes things better. I mean it's I don't things better. I mean it's I don't >> Healthy sex, healthy loving >> Healthy sex, healthy loving relationships, healthy intimacy.

relationships, healthy intimacy. >> Yes. >> Yes. >> Yes. >> Yes. That's what we're talking about. >> Yes. That's what we're talking about. >> So, um in usual fashion here, >> So, um in usual fashion here, um I'd like to get into some of the the um I'd like to get into some of the the studies behind this because studies behind this because um we certainly can talk about the um we certainly can talk about the evidence behind this, the evidence behind this, the epidemiological evidence behind the fact epidemiological evidence behind the fact that sex and more of it

makes you live that sex and more of it makes you live longer and how it kind of does.

longer and how it kind of does. Um and then we can talk about some you Um and then we can talk about some you know, practical know, practical effects of all of that and how everybody effects of all of that and how everybody can like what does that do to your can like what does that do to your hormones, what does it do to your immune hormones, what does it do to your immune system and your heart, system and your heart, um how that all comes back to stress um how that all comes back to stress reduction and helping with your actual reduction and helping with your actual relationships and behavior. Um, and you relationships and behavior. Um, and you know, relate that all back to something know, relate that all back to something that's practical and what people um, that's practical and what people um, maybe can do to live a little bit maybe can do to live a little bit >> studies.

>> studies. >> studies. 12 studies that you're citing. 12 studies that you're citing. I mean, that's that's pretty impressive. I mean, that's that's pretty impressive.

That goes to show you That goes to show you and that's by no means all of the and that's by no means all of the studies out there. Just goes to show you studies out there. Just goes to show you >> of them, yeah.

>> of them, yeah. >> This is a well-documented >> This is a well-documented subject from a typical scientific subject from a typical scientific um, um, um, experimental experimental experimental parameters, right? Not to mention parameters, right? Not to mention 20 years of anecdotal evidence.

20 years of anecdotal evidence. So, So, So, >> Wha- what's the anecdotal evidence >> Wha- what's the anecdotal evidence there? there? there?

Womenu2019s Health Studies and Cardiovascular Benefits

>> Well, I mean, working with couples for >> Well, I mean, working with couples for 20 years, we really can see 20 years, we really can see >> Oh, I thought you were talking about us.

>> Oh, I thought you were talking about us. I really did for that moment. I really did for that moment. >> God, it's been Is it been Is it longer >> God, it's been Is it been Is it longer than that?

than that? >> I don't No, not longer. Geez, I'm not >> I don't No, not longer. Geez, I'm not that old. Yeah, um, anyway, that. that old. Yeah, um, anyway, that.

>> Well, if you were, you look amazing. >> Well, if you were, you look amazing. >> Ah, thank you. I will, especially next >> Ah, thank you. I will, especially next week when I get my hair colored. I just week when I get my hair colored. I just keep saying that. Go ahead.

keep saying that. Go ahead. >> You That's your disclaimer for today. >> You That's your disclaimer for today. Um, yeah, Um, yeah, speaking of what you were saying, a lot speaking of what you were saying, a lot of a lot of these studies go back, I of a lot of these studies go back, I mean, there was there was one from 1982 mean, there was there was one from 1982 that in in men, of course, because most that in in men, of course, because most of the studies tend to be with guys, uh, of the studies tend to be with guys, uh, that they're higher sexual frequency, that they're higher sexual frequency, they live longer.

they live longer. >> Wait, I'm sorry. I know that we want to >> Wait, I'm sorry. I know that we want to stick to numbers, but why is that? Why stick to numbers, but why is that? Why do you think that most of these studies do you think that most of these studies tend to be with men? Are they just tend to be with men? Are they just easier to measure cuz they're more black easier to measure cuz they're more black and white or and white or >> I think it was an availability >> I think it was an availability situation.

situation. situation. >> Like, what you Well, >> Like, what you Well, >> Back then, anyway. >> Back then, anyway. >> saying just in general, why do most >> saying just in general, why do most studies, whether we're talking about sex studies, whether we're talking about sex or not, have to do with men, uh, that or not, have to do with men, uh,

that men are often the cohort, um, I think men are often the cohort, um, I think it's an availability thing. It it also it's an availability thing. It it also also, a lot of times it would be, um, also, a lot of times it would be, um, college aged men. So, they would go into college aged men. So, they would go into colleges and just get these guys.

colleges and just get these guys. >> Their orange juice and their $5 kind of >> Their orange juice and their $5 kind of a thing. a thing. >> Yeah, exactly. Exactly. They were just >> Yeah, exactly. Exactly. They were just available right there.

available right there. >> probably easier to get approved to do >> probably easier to get approved to do studies on men than women. I think women studies on men than women. I think women because of the um because of the um you know, because of fertility and you know, because of fertility and anyway.

anyway. anyway. >> Just curious. >> Just curious. >> I don't exactly know, but um >> I don't exactly know, but um that's the the rough understanding. But that's the the rough understanding. But anyway, anyway, anyway, another study here. This was tracking a another study here. This was tracking a thousand men over 10 years and they thousand men over 10 years and they found a 50% reduction in overall found a 50% reduction in overall mortality among those with a higher mortality among those with a higher sexual frequency.

sexual frequency. Um Swedish studies. I mean, really, an Um Swedish studies. I mean, really, an Irish study. Irish study. Um and what's interesting, Um and what's interesting, the Women's Health Initiative study, the Women's Health Initiative study, that big uh study that we talk about that big uh study that we talk about quite a bit with uh breast cancer and quite a bit with uh breast cancer and estrogen therapy that we now know was estrogen therapy that we now know was all all all >> Bologna.

>> Bologna. >> Bologna. >> largely [__] correct? Um so, but >> largely [__] correct? Um so, but there were a portion of Women's Health there were a portion of Women's Health Initiative study was a massive study.

Initiative study was a massive study. They were looking at many different They were looking at many different things. It wasn't just estrogen therapy.

things. It wasn't just estrogen therapy. >> the it's not that the initiative itself >> the it's not that the initiative itself is bogus. It's just that some of the is bogus. It's just that some of the conclusions have been proven to not be conclusions have been proven to not be really relevant.

really relevant. >> Correct. And there was different what >> Correct. And there was different what they call arms. So, there are different they call arms. So, there are different arms of what is the overall Women's arms of what is the overall Women's Health Initiative study. One arm was Health Initiative study. One arm was specific to estrogen therapy for women specific to estrogen therapy for women and here's a different one where they and here's a different one where they were following 93,000 women were following 93,000 women >> nice.

>> nice. >> nice. >> from 50 to 79 for an average of eight >> from 50 to 79 for an average of eight years and years and >> That's very >> That's very >> no real surprise to us, but sexually >> no real surprise to us, but sexually active women showed a 36% active women showed a 36% decrease in cardiovascular mortality.

decrease in cardiovascular mortality.

Hormones, Stress, and Immune Effects

>> And sexually active in this case meant >> And sexually active in this case meant uh uh uh sexual intimacy at least one time a sexual intimacy at least one time a week. So, that's also not like week. So, that's also not like >> It's not exactly. Exactly. I I was >> It's not exactly. Exactly. I I was thinking that when I was looking at the thinking that when I was looking at the notes and just wanted to make sure that notes and just wanted to make sure that we said that that these numbers for we said that that these numbers for frequency is not really crazy.

frequency is not really crazy. >> Also, let's just really take a minute to >> Also, let's just really take a minute to look

at these numbers. They're aged 50 look at these numbers. They're aged 50 to 79 to 79 having sex at least one time a week and having sex at least one time a week and they had a 36% lower risk of they had a 36% lower risk of cardiovascular activities. Um, uh, you cardiovascular activities. Um, uh, you know, mortality. I think that's amazing know, mortality. I think that's amazing because that's also an older population.

because that's also an older population. A lot of times we're thinking, "Oh, A lot of times we're thinking, "Oh, older people, 79-year-olds are not older people, 79-year-olds are not having sex that often." Uh, not our having sex that often." Uh, not our patients.

patients. patients. >> I mean, well, they either they come in, >> I mean, well, they either they come in, uh, sometimes, you know, it's amazing. uh, sometimes, you know, it's amazing.

We were saying this the other day that, We were saying this the other day that, you know, patients come in already. you know, patients come in already.

They're pretty active. And they're there They're pretty active. And they're there to be more active. to be more active. >> it. >> it. >> it. >> Yeah, they're like, "Yeah, I'm now 75 >> Yeah, they're like, "Yeah, I'm now 75 and, you know, I love my husband. I want and, you know, I love my husband. I want to make sure I'm maintaining this for as to make sure I'm maintaining this for as long as I possibly can." long as I possibly can." >> Yeah.

>> Yeah. >> Yeah. >> And there's that motivation. Then >> And there's that motivation. Then there's many, many cases there they there's many, many cases there they don't they're not having any sex and don't they're not having any sex and then we're we're helping with that. But then we're we're helping with that. But sometimes they're just looking to really sometimes they're just looking to really enhance what they've already got. They enhance what they've already got. They don't want it to go away.

don't want it to go away. >> Mhm. >> Mhm. >> Mhm. >> They prioritized sex in their lives. >> They prioritized sex in their lives. >> Mhm. >> Mhm. >> Mhm.

>> Huge, um, English longitudinal study, >> Huge, um, English longitudinal study, uh, for aging. Again, this was a uh, for aging. Again, this was a female-specific analysis. About 2,400 female-specific analysis. About 2,400 women 50 to 89.

women 50 to 89. >> Damn. >> Damn. >> Damn. >> And women reporting sexual activity in >> And women reporting sexual activity in the previous year had significantly the previous year had significantly lower age-adjusted mortality rates.

lower age-adjusted mortality rates. Um, so sexual satisfaction was Um, so sexual satisfaction was independently associated with reduced independently associated with reduced all-cause mortality. I mean, this is all-cause mortality. I mean, this is just really just really >> So, that means that it didn't matter if >> So, that means that it didn't matter if it was good or not good. The fact that it was good or not good. The fact that they were still doing it.

they were still doing it. >> did it. Yeah. So, sometimes you got to >> did it. Yeah. So, sometimes you got to fake it till you make it. fake it till you make it.

>> I mean, I think that's a great statistic >> I mean, I think that's a great statistic because in other episodes we've talked because in other episodes we've talked about that notion of, you know, just get about that notion of, you know, just get the quickie in. Like, just do it. It's the quickie in. Like, just do it. It's so good for you. Well, here's another so good for you. Well, here's another piece of data that says it's good for piece of data that says it's good for you even if it wasn't good.

you even if it wasn't good. >> Right. Yeah, you'll get some benefit >> Right. Yeah, you'll get some benefit >> benefit out of it. >> benefit out of it.

>> No, it's like when the patient says, >> No, it's like when the patient says, "Well, when I took take that vitamin C,

"Well, when I took take that vitamin C, you know, they don't you know, it was you know, they don't you know, it was good for you. You might not know you good for you. You might not know you might not have felt anything from taking might not have felt anything from taking that vitamin C, but it it probably was that vitamin C, but it it probably was helping you." helping you." >> Mhm.

>> Mhm. >> Mhm. >> Higher frequency of orgasm also >> Higher frequency of orgasm also associated with lower risk of a high associated with lower risk of a high blood pressure, coronary heart disease.

blood pressure, coronary heart disease. I mean, this is I mean, this is >> I mean, it is exercise. >> I mean, it is exercise. It's exercise, so It's exercise, so It's a good way to exercise.

It's a good way to exercise. >> It's a little bit more than that, but >> It's a little bit more than that, but let's let's not uh well, let's go let's let's not uh well, let's go through a few more of these studies through a few more of these studies before we talk about what's really before we talk about what's really happening inside your body for that happening inside your body for that that's making these benefits happen.

that's making these benefits happen. Um another one See, yeah, there's plenty Um another one See, yeah, there's plenty of studies here for women. It wasn't of studies here for women. It wasn't just a bunch of guys. Australian long just a bunch of guys. Australian long shoot long longitudinal study on women's shoot long longitudinal study on women's health uh 5,800 women aged 45 to 50.

health uh 5,800 women aged 45 to 50. They followed them for 20 years. Um 29% They followed them for 20 years. Um 29% uh risk of all-cause mortality. That's uh risk of all-cause mortality. That's roughly what we're seeing. And some of roughly what we're seeing. And some of them was like a third a rough third.

them was like a third a rough third. >> good. I'll take it. >> good. I'll take it. >> Yeah. >> Yeah. >> Yeah. >> That's a good chunk. >> That's a good chunk.

>> Finish uh twin a twin cohort study. I >> Finish uh twin a twin cohort study. I love when they do twin cohort studies. love when they do twin cohort studies.

Um this is where they're doing a study Um this is where they're doing a study that's um that's um Why does that sound gross? Why does that sound gross?

You made it sound gross or you're You made it sound gross or you're thinking it is gross cuz I don't even thinking it is gross cuz I don't even know really know what you mean.

know really know what you mean. >> All righty. >> All righty. >> Um anyway, uh twin cohort studies uh >> Um anyway, uh twin cohort studies uh What? Really? You got it No, you have to What? Really? You got it No, you have to explain. That doesn't make any sense.

explain. That doesn't make any sense. >> Go ahead. >> Go ahead. >> Okay.

Age, Intimacy, and Relationship Health

>> Okay. >> Okay. I'm going to just go with it. I'm going to just go with it. Female only analysis Female only analysis 1,290 twin women followed for 23 years.

1,290 twin women followed for 23 years. Um yeah, again, here we are. 30% lower Um yeah, again, here we are. 30% lower mortality risk and you know, roughly mortality risk and you know, roughly we're getting this third uh we're getting this third uh 1/3 improvement in mortality and helping 1/3 improvement in mortality and helping with our cardiovascular health.

with our cardiovascular health. In this particular study, sexual In this particular study, sexual activity frequency was two times uh activity frequency was two times uh weekly versus uh less than monthly.

weekly versus uh less than monthly. >> Okay. >> Okay. >> Okay. >> Um so, a couple of times a week, one, >> Um so, a couple of times a week, one, maybe two times a week um is really not maybe two times a week um is really not asking a lot of us, hopefully.

asking a lot of us, hopefully. Um yeah, and you know, there's there's Um yeah, and you know, there's there's others here. The midlife uh women's others here. The midlife uh women's health study, Harvard's nurse health health study, Harvard's nurse health study. God, that one was 19,000 uh study. God, that one was 19,000 uh nurses.

nurses. nurses. Um Harvard Um Harvard >> one to two times a week. >> one to two times a week. >> Yeah. >> Yeah. >> Yeah. >> Yeah, it's >> Yeah, it's >> And the 38% lower risk of fatal uh fatal >> And the 38% lower risk of fatal uh fatal uh, heart disease. So, again, we're uh, heart disease. So, again, we're getting this rough 1/3. I think that getting this rough 1/3. I think that would be the the studies are kind of would be the the studies are kind of summarizing that roughly that you're summarizing that roughly that you're you're going to get a third.

you're going to get a third. >> And in the details of these studies, cuz >> And in the details of these studies, cuz we said you live longer and better. In we said you live longer and better. In the details of these studies, we're the details of these studies, we're seeing not just reduced mortality uh, seeing not just reduced mortality uh, events, but we're also seeing reduction events, but we're also seeing reduction in symptoms like um, in symptoms like um, vaginal tone problems, like women vaginal tone problems, like women complaining about prolapse, etc. We're complaining about prolapse, etc. We're seeing less cardiovascular disease. Like seeing less cardiovascular disease. Like we're seeing things that actually affect we're seeing things that actually affect your day-to-day, so your quality of life your day-to-day, so your quality of life is improved by an overall health is improved by an overall health perspective as well.

perspective as well. >> Yeah. Well, in this Harvard's nurse uh, >> Yeah. Well, in this Harvard's nurse uh, health study, uh, they were able to uh, health study, uh, they were able to uh, uh, uh, uh, calculate a 3.7 year improvement in in calculate a 3.7 year improvement in in lifespan.

lifespan. lifespan. >> Yeah, which is great. >> Yeah, which is great. >> Yeah. >> Yeah. >> Yeah. Uh, the Koreans, uh, they did a women's Uh, the Koreans, uh, they did a women's cohort study, about 5,900 women over a cohort study, about 5,900 women over a 12-year period age 40 to 69. Um, same 12-year period age 40 to 69. Um, same kind of concept. Um, kind of concept. Um, you know, the you know, the sexual frequency in this showed what sexual frequency in this showed what they said a dose-response relationship they said a dose-response relationship with mortality, meaning the more sex you with mortality, meaning the more sex you had, the longer you were living.

had, the longer you were living. I think this is really fantastic. I think this is really fantastic. >> Mhm. >> Mhm. >> Mhm. >> Um, and so, I think the biggest takeaway >> Um, and so, I think the biggest takeaway here from a here from a benefit to your body is your heart.

benefit to your body is your heart. Right. It's one of the biggest things. Right. It's one of the biggest things. Like you said, it's it's it's exercise.

Like you said, it's it's it's exercise. >> How symbolic. >> How symbolic. >> Oh, yeah. >> Oh, yeah. Wouldn't want to die of a broken heart Wouldn't want to die of a broken heart because you weren't having sex. So, have because you weren't having sex. So, have more sex, help your heart. So, what's more sex, help your heart. So, what's really happening? That's what I think really happening? That's what I think that's what's really exciting here.

that's what's really exciting here. And you and I kind of understand this, And you and I kind of understand this, but so people really understand the but so people really understand the hormonal benefits here. Obviously, hormonal benefits here. Obviously, testosterone.

testosterone. testosterone. We think sometimes that we need the We think sometimes that we need the replacement, and many, many, many times replacement, and many, many, many times you do need actual replacement, but you you do need actual replacement, but you can increase your own testosterone just can

increase your own testosterone just through the actions of of sex. You need through the actions of of sex. You need the testosterone to make you want to the testosterone to make you want to have sex, but by having the act of it have sex, but by having the act of it helps to increase the testosterone.

helps to increase the testosterone. >> Right. >> Right. >> Right. >> True, but what happens is that people >> True, but what happens is that people aren't living this way. They get aren't living this way. They get deficient and then they need replacement deficient and then they need replacement to get out of this. Now, you and I have to get out of this. Now, you and I have said on the podcast and with our said on the podcast and with our patients over the years patients over the years that once you start living healthier, that once you start living healthier, you may find that you either become you may find that you either become independent of HRT, whether it's thyroid independent of HRT, whether it's thyroid or sex hormones or whatever, or you or sex hormones or whatever, or you don't need as much, or you're not always don't need as much, or you're not always chasing levels because your lifestyle is chasing levels because your lifestyle is supporting healthy function.

supporting healthy function. >> Yeah, that comes back to the concept of >> Yeah, that comes back to the concept of comprehensive care that we can't just comprehensive care that we can't just look at it only as the hormone look at it only as the hormone replacement therapy without considering replacement therapy without considering other types of hormones, other aspects other types of hormones, other aspects about your health, your heart, about your health, your heart, you know, your brain, you know, all the you know, your brain, you know, all the other things that we measure and try to other things that we measure and try to help patients with with all these other help patients with with all these other tools that all in turn helps with more tools that all in turn helps with more energy and more sex.

energy and more sex. >> Yep. >> Yep. >> Yep. >> So, estrogen, oxytocin is another big >> So, estrogen, oxytocin is another big hormone that that is released and that's hormone that that is released and that's helping with stress and lowering helping with stress and lowering inflammation.

inflammation. inflammation. DHEA, so all of these hormones are DHEA, so all of these hormones are getting activated through the active sex getting activated through the active sex and then therefore helping to want to and then therefore helping to want to have sex more.

have sex more. >> Right. >> Right. >> Right. >> It's helping with your immune system. >> It's helping with your immune system. It's reducing inflammatory markers like It's reducing inflammatory markers like interleukin-6, C-reactive protein, interleukin-6, C-reactive protein, that's the one that we really look at that's the one that we really look at quite a bit with our patients on lab quite a bit with our patients on lab work. Sex in and of itself is lowering work. Sex in and of itself is lowering overall systemic body-wide inflammation.

overall systemic body-wide inflammation.

Sexual Frequency, Gender Differences, and Practical Takeaways

And it's helping with decreasing your And it's helping with decreasing your risk for infection. risk for infection. >> Mhm. >> Mhm. >> Mhm. >> And then we've already talked about >> And then we've already talked about that.

that. that. >> for the common cold. >> for the common cold. >> Just have sex. >> Just have sex. >> I knew it was out there somewhere. >> I knew it was out there somewhere.

It What What better place to be than It What What better place to be than sex? Um, cardiovascular effects, we've sex? Um, cardiovascular effects, we've been saying that all along. It's It's been saying that all along. It's It's really doing It's It's helping with your really doing It's It's helping with your blood pressure.

blood pressure. And endothelial function, that's back to And endothelial function, that's back to that concept of the exercise, the that concept of the exercise, the endothelium, yeah, that lining the blood endothelium, yeah, that lining the blood vessel vessel vessel and secreting nitric oxide. All of these and secreting nitric oxide. All of these things are things are dramatically improved through a little dramatically improved through a little bit of sex.

bit of sex. We're reducing stress. We're reducing stress. I think that's probably What What do you I think that's probably What What do you think about that? Do you think that's think about that? Do you think that's like a a stress reduction tool for like a a stress reduction tool for people?

people? people? >> I would say most people. Again, we're >> I would say most people. Again, we're we're talking about intimacy. we're talking about intimacy.

I should say I'm talking about intimacy. I should say I'm talking about intimacy. I mean I think they're talking about I mean I think they're talking about intimacy as well because they do talk intimacy as well because they do talk about sexual satisfaction. Right? So, about sexual satisfaction. Right? So, it's not just like it's not just like emotionally detached intercourse.

emotionally detached intercourse. Okay? Okay? Okay? Um Um Um What were you going to say something? What were you going to say something? >> No. >> No.

>> No. >> Oh, okay. That yes, absolutely for most >> Oh, okay. That yes, absolutely for most people that are in loving committed people that are in loving committed relationships, relationships, relationships, intimacy is going to help them manage intimacy is going to help them manage their stress. When you're feeling their stress. When you're feeling already stressed and you're able to already stressed and you're able to physically connect with your partner, physically connect with your partner, that's going to reduce When you're that's going to reduce When you're having sex more often with a loving having sex more often with a loving partner, you are going to have a more partner, you are going to have a more um a healthier stress response.

um a healthier stress response. Remember, stress is not the same thing Remember, stress is not the same thing as stressors. Stressors are the things as stressors. Stressors are the things in our life that put pressure on us.

in our life that put pressure on us. Often, we can't control that. What we Often, we can't control that. What we can control is our stress, which means can control is our stress, which means our stress response. So, sex is a our stress response. So, sex is a wonderful way to control our sex wonderful way to control our sex response regardless of how many response regardless of how many stressors we have.

stressors we have. >> Well said. So, if you're feeling >> Well said. So, if you're feeling stressed stressed stressed >> Boink. >> Boink. >> Boink. >> Ah, go ahead.

>> Ah, go ahead. >> Yeah, so relationship quality. That's >> Yeah, so relationship quality. That's what I When you were talking about all what I When you were talking about all of that, that's kind of what I'm of that, that's kind of what I'm thinking that I I think both men and thinking that I I think both men and women um women um need that need that check-in with their partner.

check-in with their partner. >> They need connection. >> They need connection. >> connection to make sure that they know >> connection to make sure that they know that everything's going to be okay and that everything's going to be okay and that's back to that response to stress.

that's back to that response to stress. Um so relationship quality, social Um so relationship quality, social connection, that's a known longevity connection, that's a known longevity factor. We know, you know, when the factor. We know, you know, when the we've talked before about the blue we've talked before about the blue zones, those areas in the world where zones, those areas in the world where people live 100 or more.

people live 100 or more. And so much of the reason of the as And so much of the reason of the as they've studied this, why do people live they've studied this, why do people live that long? Most of it's social that long? Most of it's social connection. Most of it is. We think it's connection. Most of it is. We think it's in in about diet and exercise and those in in about diet and exercise and those things and those are extremely important things and those are extremely important but the majority of it that gets them but the majority of it that gets them really past that let's say 80 year mark really past that let's say 80 year mark up to the 100 year mark is that social up to the 100 year mark is that social connection that kind of runs connection that kind of runs through it.

through it. >> of purpose because of you have duty to >> of purpose because of you have duty to others, that's probably one of the best others, that's probably one of the best things that you can do for yourself, so.

things that you can do for yourself, so. Children and grandchildren and Children and grandchildren and grandparents and community and all of grandparents and community and all of that really does.

that really does. >> particular case, your spouse, your >> particular case, your spouse, your partner, and that helps with that partner, and that helps with that longevity factor for you.

longevity factor for you. Um reduced loneliness, the same thing. Um reduced loneliness, the same thing. Gosh, you know, it's always Gosh, you know, it's always lonely is such a lonely word and it lonely is such a lonely word and it really makes it it's horrible. It really really makes it it's horrible. It really makes me think about COVID.

makes me think about COVID. And what that was such an important time And what that was such an important time where we really understood what where we really understood what loneliness was doing to people loneliness was doing to people from young and old.

from young and old. >> Mental and physical. >> Mental and physical. >> Correct. Um but definitely for the >> Correct. Um but definitely for the elderly, it's it's a known, you know, elderly, it's it's a known, you know, issue with their health of just feeling issue with their health of just feeling isolated and and lonely.

isolated and and lonely. Um Um Um So yeah, what's um in terms of some of So yeah, what's um in terms of some of the age and gender considerations here?

the age and gender considerations here? Um Um Um Benefits of sexual activity in older Benefits of sexual activity in older adults 65 and older adults 65 and older um um um is is is pretty clear in the research as well.

pretty clear in the research as well. Sexual activity changes with age and Sexual activity changes with age and maintaining benefits. maintaining benefits. Um Um Um Yeah, the use it or lose it phenomenon Yeah, the use it or lose it phenomenon in sexual health. I I that's what we in sexual health. I I that's what we were we were talking about in the very were we were talking about in the very beginning.

beginning. beginning. Um you got to just sometimes fake it Um you got to just sometimes fake it till you make it. We've talked about the till you make it. We've talked about the 30-day challenge. That's probably one of 30-day challenge. That's probably one of our our our favorite things to talk about for favorite things to talk about for patients. You know, just have sex no patients. You know, just have sex no matter what. It doesn't have to be matter what. It doesn't have to be hanging from the chandeliers or this hanging from the chandeliers or this whole production, but just make sure whole production, but just make sure you've done something every single day you've done something every single day for 30 days. It can be a massive shift for 30 days. It can be a massive shift for people in their relationship, but for people in their relationship, but just the ability to say, "Well, I just the ability to say, "Well, I actually can have sex this much." And actually can have sex this much." And then it makes you want to have more sex.

then it makes you want to have more sex. >> And get it out of your head that there's >> And get it out of your head that there's a number, there's an age at which people a number, there's an age at which people stop having intimacy. Like look at old stop having intimacy. Like look at old people walking down the street and say, people walking down the street and say, "Oh, man, I wonder how active their sex "Oh, man, I wonder how active their sex life." Instead of like thinking the life." Instead of like thinking the opposite, instead of thinking they have opposite, instead of thinking they have cobwebs, you know? Because the reality cobwebs, you know? Because the reality is that there is no age at which one is that there is no age at which one should stop having should stop having sexual intimacy.

sexual intimacy. >> Yes. >> Yes. >> Yes. Men will benefit obviously from their Men will benefit obviously from their testosterone. We already talked about testosterone. We already talked about that. Their prostate, that. Their prostate, that's probably one of the biggest that's probably one of the biggest things for guys.

things for guys. What we have learned with men and their What we have learned with men and their prostate is that ejaculation is prostate is that ejaculation is literally cleaning the pipes.

literally cleaning the pipes. And that if you don't do that frequently And that if you don't do that frequently enough, you'll see an elevation in the enough, you'll see an elevation in the PSA, prostate-specific antigen, in their PSA, prostate-specific antigen, in their blood work, and you'll see a an blood work, and you'll see a an enlargement of the prostate itself enlargement of the prostate itself because they're just not having frequent because they're just not having frequent sex.

sex. sex. >> And I would argue that the same is true >> And I would argue that the same is true for women. They just don't have it. I for women. They just don't have it. I don't think there's as robust don't think there's as robust research around this concept, but I do research around this concept, but I do find that women who suffer from urethral find that women who suffer from urethral irritation and UTIs that having orgasm irritation and UTIs that having orgasm specifically, so with the woman it's not specifically, so with the woman it's not just about the sex at that point. They just about the sex at that point. They need orgasm, that the orgasm is flushing need orgasm, that the orgasm is flushing out their pipes. And women who orgasm out their pipes. And women who orgasm more regularly are going to be less more regularly are going to be less prone to the UTIs.

prone to the UTIs. >> And it also helps with >> And it also helps with just overall vaginal health, pelvic just overall vaginal health, pelvic floor strength.

floor strength. >> And right tone, that's what I was going >> And right tone, that's what I was going to say, yeah, that vaginal to say, yeah, that vaginal uh anatomy gets strengthened.

uh anatomy gets strengthened. >> So, you know, we we we keep saying sex, >> So, you know, we we we keep saying sex, especially when we're talking about especially when we're talking about cleaning out the pipes. Does it cleaning out the pipes. Does it necessarily mean that it has to be necessarily mean that it has to be intercourse? What about masturbation?

intercourse? What about masturbation? Does that count? Um but so the answer is Does that count? Um but so the answer is yes, masturbation does count um for at yes, masturbation does count um for at least cleaning out the pipes uh for both least cleaning out the pipes uh for both men and women. So, it it if it is men and women. So, it it if it is something that's available, it still is something that's available, it still is beneficial.

beneficial. beneficial. >> Yeah. And right, obviously it >> Yeah. And right, obviously it when we're looking at women who are 80 when we're looking at women who are 80 years old and they're having sex, then years old and they're having sex, then we're thinking, well, that that implies we're thinking, well, that that implies that they have men that are around their that they have men that are around their age group that are having sex that are age group that are having sex that are not suffering from erectile dysfunction.

not suffering from erectile dysfunction. And unfortunately, erectile dysfunction And unfortunately, erectile dysfunction is a rampant disease um at least in our is a rampant disease um at least in our country. So, you have to imagine that country. So, you have to imagine that maybe sexual intimacy changes with age.

maybe sexual intimacy changes with age. Perhaps literally your bones, your Perhaps literally your bones, your muscles, your body, your back, whatever, muscles, your body, your back, whatever, the wear and tear on the body, maybe it the wear and tear on the body, maybe it forces you to change the way you're forces you to change the way you're having intimacy, but still have that having intimacy, but still have that intimacy, still seek that connection and intimacy, still seek that connection and that orgasm.

that orgasm. >> Yeah, there's there's an actual number. >> Yeah, there's there's an actual number. I'm just seeing the notes here reminding I'm just seeing the notes here reminding me. Men need orgasms at least once me. Men need orgasms at least once weekly, it sounds like both men and weekly, it sounds like both men and women are probably with the research women are probably with the research that we just looked at in terms of that we just looked at in terms of satisfaction and helping with longevity.

satisfaction and helping with longevity. But with men, uh if they get 21 But with men, uh if they get 21 ejaculations per month, ejaculations per month, >> Right, you always say that.

>> Right, you always say that. >> they massively lower their prostate >> they massively lower their prostate cancer risk. Um so, that still could be cancer risk. Um so, that still could be with intercourse, it could be with with intercourse, it could be with masturbation, a combination of the two.

masturbation, a combination of the two. Um yeah, for women, um this is a 2009 uh Um yeah, for women, um this is a 2009 uh study from the Journal of Sexual study from the Journal of Sexual Medicine. Um it was about one orgasm per Medicine. Um it was about one orgasm per week. And in this particular case in week. And in this particular case in that particular study in 2009, it a that particular study in 2009, it a higher frequency did not significantly higher frequency did not significantly increase benefit.

increase benefit. >> I think we've seen through all the >> I think we've seen through all the studies that we've looked at for various studies that we've looked at for various topics that women definitely have a topics that women definitely have a lower need of lower physiologic need for lower need of lower physiologic need for um for sex, they're probably more of um for sex, they're probably more of that one to two times a week. But we've that one to two times a week. But we've talked about this idea of at least three talked about this idea of at least three times a week because we're talking about times a week because we're talking about providing that regular connection. So I providing that regular connection. So I think think think when you're looking at just the data, when you're looking at just the data, one to two times for women is fine. But one to two times for women is fine. But when we're talking about more of that um when we're talking about more of that um general health concept, that's where if general health concept, that's where if you're doing it more than three times a you're doing it more than three times a week, you're keeping your partner week, you're keeping your partner healthier.

healthier. healthier. And that's a benefit. And that's a benefit. >> Well, since you just said this, so I >> Well, since you just said this, so I that sounds like a mathematical uh that sounds like a mathematical uh schism there. There's there's something schism there. There's there's something you you got a mismatch? Yeah, I mean, you you got a mismatch? Yeah, I mean, how do how do we remedy that? So in a how do how do we remedy that? So in a relationship, in a healthy relationship relationship, in a healthy relationship of a man and a woman, of a man and a woman, he's needing it three to four times he's needing it three to four times physiologically, almost to what our physiologically, almost to what our argument is here.

argument is here. >> Mhm. >> Mhm. >> Mhm. >> Um and women, one to two times a week. >> Um and women, one to two times a week. How do we bridge the gap?

How do we bridge the gap? >> Well, I think and these are very this is >> Well, I think and these are very this is at a very primitive level, at a very primitive level, women are designed to be nurturers.

women are designed to be nurturers. Women are designed to be more selfless Women are designed to be more selfless of themselves, of their bodies. So I do of themselves, of their bodies. So I do think women are designed to say, "This think women are designed to say, "This is what's good for my partner, therefore is what's good for my partner, therefore I will give of myself." And I am giving I will give of myself." And I am giving of myself because I'm giving to the of myself because I'm giving to the relationship and the relationship is a relationship and the relationship is a part of me. So even though it feels like part of me. So even though it feels like you're doing it for an external purpose, you're doing it for an external purpose, >> Mhm.

>> Mhm. >> Mhm. >> really it becomes an internal purpose >> really it becomes an internal purpose because when you are connected because when you are connected emotionally and you are striving to emotionally and you are striving to sustain over decades a connected sustain over decades a connected relationship, the relationship does relationship, the relationship does become part of each other.

become part of each other. I always give that analogy because I I always give that analogy because I think it's visually very clear of that think it's visually very clear of that movie Avatar when the writer would like movie Avatar when the writer would like stick their tail into the horse's ear or stick their tail into the horse's ear or whatever the

hell it was.

whatever the hell it was. >> I think it was tail to tail. >> I think it was tail to tail. >> Whatever. It was kind of gross, but I >> Whatever. It was kind of gross, but I totally understood. I'm like, "Oh, totally understood. I'm like, "Oh, that's like that's like >> yeah. For me, that was a perfect vis- I >> yeah. For me, that was a perfect vis- I guess not the ear.

guess not the ear. It was a perfect visualization of It was a perfect visualization of intimacy. Like you match up, you intimacy. Like you match up, you connect, and then your souls and your connect, and then your souls and your literal performance thrive when you're literal performance thrive when you're able to have physical connection.

able to have physical connection. >> Yeah, I really like your answer. Um that >> Yeah, I really like your answer. Um that was a certain certainly a flex for me.

was a certain certainly a flex for me. So, uh So, uh Thank you for your perspective. Well, Thank you for your perspective. Well, what you going to say? Well, I thank you what you going to say? Well, I thank you from the bottom of my heart and my from the bottom of my heart and my prostate prostate prostate for for your perspective on that. Um for for your perspective on that. Um yeah, that's that's what I was going to yeah, that's that's what I was going to say. Yeah, I I wasn't I mean I kind of I say. Yeah, I I wasn't I mean I kind of I was leading the witness. I figured you was leading the witness. I figured you were going to answer that way. And I were going to answer that way. And I think it's important for women that that think it's important for women that that that are listening to this to hear that.

that are listening to this to hear that. And for men to hear it. I mean because And for men to hear it. I mean because look, right where you're in the midst of look, right where you're in the midst of that, we'll call it a sacrifice for the that, we'll call it a sacrifice for the sake of that that men should also be sake of that that men should also be doing the same thing to sacrifice.

doing the same thing to sacrifice. Correct. I mean, that's a very important Correct. I mean, that's a very important It's a very important thing to recognize It's a very important thing to recognize that perhaps that perhaps um um um men This isn't necessarily true. I'm men This isn't necessarily true. I'm just using it for the purpose of just using it for the purpose of illustration. Maybe men don't need the illustration. Maybe men don't need the bed to be made every day or 5 days a bed to be made every day or 5 days a week, but women need the bed to be made week, but women need the bed to be made to be made whatever five times a week.

to be made whatever five times a week. Like I'm trying to give an example of Like I'm trying to give an example of Well, women don't need sex that often, Well, women don't need sex that often, but what is it the man is doing that is but what is it the man is doing that is giving them those additional feed your giving them those additional feed your soul kind of soul kind of sacrifices.

sacrifices. sacrifices. >> what it exactly would be outside of what >> what it exactly would be outside of what his his his needs are. Right, or or yeah.

needs are. Right, or or yeah. >> And And to always remember that most of >> And And to always remember that most of these health benefits are coming because these health benefits are coming because the relationship is nurtured. If the the relationship is nurtured. If the relationship is nurtured, then both relationship is nurtured, then both people should be prioritizing the health people should be prioritizing the health of the relationship.

of the relationship. >> Agreed. >> Agreed. >> Agreed. Um Um Um and I think that kind of really helps to and I think that kind of really helps to wrap up wrap up you know, you know, what things need to be done. So, let's what things need to be done. So, let's maybe try to summarize here.

maybe try to summarize here. Have more sex. Have more sex. It helps you to live longer. It helps you to live longer. It helps with your heart in a in a It helps with your heart in a in a massive way. You're roughly getting a massive way. You're roughly getting a 1/3 decrease in multiple diseases, 1/3 decrease in multiple diseases, partic- it's

helping with your immune partic- it's helping with your immune system, but particularly with heart system, but particularly with heart health and mortality risk. Roughly, health and mortality risk. Roughly, you're getting 1/3 of a reduction just you're getting 1/3 of a reduction just by making sure you're having sex roughly by making sure you're having sex roughly one, maybe two times a week.

one, maybe two times a week. Um, bridging the gap, maybe a little bit Um, bridging the gap, maybe a little bit more for guys who have a little bit more more for guys who have a little bit more of a need.

of a need. >> I think three times a week is a good >> I think three times a week is a good number. number. number. >> That kind of three, maybe four. >> That kind of three, maybe four.

>> Well, more sometimes is more. >> Well, more sometimes is more. >> I was selling a little bit more. >> I was selling a little bit more. >> But three times is definitely for the >> But three times is definitely for the purposes of purposes of >> Five times a week.

>> Five times a week. So, So, >> Twice a day. >> Twice a day. >> Y'all go. >> Y'all go. Go. Go. Go. >> Sometimes that happens. Sometimes >> Sometimes that happens. Sometimes patients will go back and talk about patients will go back and talk about uh, when they're on a vacation. I mean, uh, when they're on a vacation. I mean, that's where, you know, people can that's where, you know, people can certainly bank it right then.

certainly bank it right then. >> Bank it. >> Bank it. >> Yeah. >> Yeah. >> Yeah. Bank. Bank. Bank. It. All right, with a K. It. All right, with a K. >> All right.

>> All right. >> Um, >> Um, >> Um, and, you know, I think the connection is and, you know, I think the connection is the social connection is really the social connection is really important.

important. important. >> Yeah. >> Yeah. >> Yeah. >> That's going to help people to live >> That's going to help people to live longer. longer. longer.

>> Yeah, and and I just want to add on >> Yeah, and and I just want to add on there the idea that for for the body to there the idea that for for the body to benefit from sex, the body has to be benefit from sex, the body has to be healthy. So, it is again that yin and healthy. So, it is again that yin and yang. Like, the body has to be replete.

yang. Like, the body has to be replete. The body has to be well rested. The You The body has to be well rested. The You rest better when you have sex. When you rest better when you have sex. When you have sex and you're rested, the sex is have sex and you're rested, the sex is better. It's like, you know, this this better. It's like, you know, this this positive feedback loop. When a person positive feedback loop. When a person isn't feeling well, isn't feeling well, or they're sick, or they have chronic or they're sick, or they have chronic illness, then those numbers become a illness, then those numbers become a little bit variant. So, that is why the little bit variant. So, that is why the intimacy component is so important. If intimacy component is so important. If you don't have that intimacy, it becomes you don't have that intimacy, it becomes just a physiological requirement, and I just a physiological requirement, and I do believe strongly that that's going to do believe strongly that that's going to diminish the benefits. So, focus on diminish the benefits. So, focus on intimacy and love, and then reap the intimacy and love, and then reap the benefits from frequent physical sex.

benefits from frequent physical sex. >> And so, do you think then regular sexual >> And so, do you think then regular sexual intimacy helps couples to stay together?

intimacy helps couples to stay together? Don't answer that question. Don't answer that question. Because that's going to be our next Because that's going to be our next episode. Oh, you you have an answer?

episode. Oh, you you have an answer? >> Okay, I can hold. >> Okay, I can hold. >> Okay, you're going to have to hold it. >> Okay, you're going to have to hold it.

>> Very mature. >> Very mature. >> So, does regular sexual intimacy help >> So, does regular sexual intimacy

help couples stay together? That's what we're couples stay together? That's what we're going to answer on the next podcast. So, going to answer on the next podcast. So, that kind of really ties in to this that kind of really ties in to this particular podcast today. But, know that particular podcast today. But, know that