The $135 Lab Test That Predicts 5-Year Mortality (MVX) Transcript

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Introduction to the MVX Test

Today we're going to talk about the NVX test, which I think is probably the most important test you need to take that you don't know anything about, right?

That's really where it comes down to. Let's talk what is the MVX Test. The MVX test stands for metabolic vulnerability index, and it was created through a process since 2018 by a team of researchers through LabCorp, which is an international lab company.

And they got some other testing through the NIH, National Institute of Health, on 24,000 people. And it does several things. Number one, it gives you a score for your health, one to a hundred.

You want that score to be very low and it also will predict your longevity in the next five years. I should say mortality. It actually has a mortality incidence rate.

depending on your score on a scale of zero to about 70 percent. So like if you have a really high score, let's say like 80 out of 100, then your mortality chance is very high in the next five years.

If it's low like 30, your chance of dying is like 3 percent, so you want a very low score. It also gives you a path to take to improve your health. So it measures six factors and these six actors can be improved through nutrition only.

Drugs do not help reduce your score. And so it'll give you a path such as detoxing metals and chemicals or getting rid of infections and inflammation or nutrition such amino acids or vitamin B1.

So it's a very specific, fantastic, and very inexpensive test that it just got released January 6th of 2025. When you say inexpensive, what's the average cost of the test?

Because we know some lab tests are hundreds or thousands of dollars. I charge $135. Other doctors will charge more, others will charged less.

How MVX Measures Health and Longevity

Yeah, but that's I mean it's really reasonable for a test that is going to determine or give you information whether or not what your percentages of dying in the next five years.

So I think that it is really. Yeah and how to reverse that. Really reasonable. You said this was done on like 23,500 people or a whole bunch of people.

Why? Why was this just something they were tracking or was it just an accumulation of different tests that they realized there were these factors and they made it into one test?

What's the background on it a little bit? Well, the back on is this. So what are the researchers? Dr. Bill Cromwell, he's a lipidologist. He started his practice in 1988. So during that time, there was the cholesterol scare.

And it goes back decades before that. Still now, conventional MDs are harping on LDL as the worst thing. But in 1988, Dr. Cromwell was having patients come to him saying, hey, my cholesterol is high.

I don't want to die. What should I do? Well, Doctor Cremwell, he's just brilliant. He has the right questions. You know, and he is like pondering like, well, maybe LDl isn't the worse thing, And if it's not then what is so combine his brain with a bunch of other researchers at lab Corp.

And they studied I'm going to say about 30 factors in the blood. and different ways of testing those three factors. And they came up with six, and they have to be tested through what's called NMR, which I don't want to get into, as opposed to PCR.

But NMR is how you measure these six factors, And then they do some math, they give you these scores. So not only do you get the big score, one to 100, but you also get to ranges of the six.

The two main categories are malnutrition and inflammation. And so with those two categories, you also get a score. So and that's been like what I've been doing since it got released, like looking at these numbers and how do we make them better?

Do you want some to go up? You want them to down? What if this goes up and this go down like you got to put it all together and you wanted that overall score to come down.

Sure, sure. You said there's six factors. Should we talk about what those six factor are just briefly? Yeah, I'll do it really briefly. So the first one is called glycA, which is a measurement of inflammation and infection.

And it's a combination of other factors that you may have heard of, like homocysteine and C-reactive protein, and also like white blood cell remnants.

If you have a white-blood cell that's been damaged because it battling infection, it'll fall apart. Those remnants are part of glycoA. Another factor is small HDL particles.

And so, again, getting back to the LDL discussion, it's not LDl that's the main problem.

The Six MVX Factors

You want a high number of these small HDL particles. because they soak up LDL. And another factor is called citrate. So citrite, you want that to be at a good number.

If it's too high in the blood, that means that you're toxic. Your body's filled with toxins and the citrates can't get into the cells. Now, citrete is like the first step of mitochondrial function of the Krebs cycle.

That's some science that may not understand, but the point is your body won't make energy unless it has citright. Okay, then the last three all come together as a group and that's called the branch chain amino acids.

And they're valine, leucine and isoleucin. And when you have a low number of those, it means you're not making muscle and your body can't digest it or you not eating enough.

So we want to fix that. When these numbers are off, the end result is like the End of Life. People call it frailty. They call a sarcopenia, which is muscle wasting.

They call it cachexia, which is like when people have cancer, they can't gain weight. And so you want to, you can reverse engineer this as long as it's not too far gone, right?

When you're like 40 years old, like I'm 53 right now. So I've reduced mine dramatically. My score was 55 back in January and now it dropped down to 31. It dropped 24 points in just four weeks.

And there's reasons why. And then I had my third test run and at that time I have a sinus infection and so it went up. Let me just explain this because it's super interesting.

So my first score being 55, one month earlier I discovered a gas leak at my house. So the breathing in gas from the gas meter which was outside for a year it was so bad I had trouble breathing high blood pressure actually went to the hospital in May of 2024. On a Saturday morning I head crushing chest pain.

Then in December of 2020 for I found. the gas leak and I was able to fix it. So in January I had my first MVX test run and it was very high at 55, which gave me a 20% mortality incidence for the next five years.

Just having not gas leaked, breathing regular air, and then in February I redid MVx and dropped all the way down to 31. Now my chance of mortality is 3%.

So dropped 17% in four weeks just because I wasn't breathing in gas. And then four days after that, I had the sinus infection and it bumped up a little bit to 39. So it went from 55 to 31 to 29. The point is, what's your first obstacle for improving your health?

Is it some kind of toxin or collection of toxins? Is that some of infection or collections of infections or another aspect is the nutritional part. So when I had the gas leak.

And I felt so bad in May and went to the E. R. 10 days after that, since I'm in the nutrition field, I want to make this long story short. I started taking B1 vitamin B one, which is Benfo timing.

And it's a version called Benful timing, The B1 saved my life. In two weeks, I was 95% better. So it kept me going through 2024. But again, that's part of MVX test.

My B-1 status was good because I'd been taking it for the whole year before, almost a year. Those six factors, we talked about this one point, they actually align up pretty well with your seven-step blueprint to optimal health.

Personal Results and Health Improvements

They do so my seven-step blueprint is the solution to the six factors and it's like almost one for one like my Seven Steps are not too much or too little to address the the Six Factors of MVX.

So I spent let's say 30 years developing my 7-Step Blueprint Optimal Health. the graphic that I made for the seven steps I created in 2018, I believe.

And so I had the solution for MVX, you know, seven years before MVS was even released. and it's just like, if you have truth somewhere, You're going to find that same truth everywhere.

So this is how you get your health, your body better is by doing these seven Steps and they address the six factors of MV X. And let's talk a little bit about how it was released because you're pretty integral in getting this released, because before it wasn't available to the general public, right?

Right. It was used by the government for the research. And when I found out about MVX, it at the beginning of 2024. There was a video that appeared on YouTube, and I watched that video six, seven times.

Like, this is the best video on YouTube. What the heck is this test? What is it made out of? And when I figured out what these six factors are, it's like, oh, I have the solutions for these 6 factors.

I know how to fix this. So what happened next was I started calling labs to try to get them to run MVX, including the lab at the NIH. And they wouldn't run it.

They gave me a couple of reasons. they said they're waiting for consensus, which I don't understand that statement at all. And they also said it doesn't measure disease and that's a problem.

And I said, well, yeah, I get it. That's the problem with medicine is they're always measuring disease. This test actually measures health or lack of health.

I had another lab tell me they didn't want to look like witch doctors. You know, I didn't get and I called six seven labs including NASA. I know somebody at NASA and so This is going on for about four or five months and then in January 6 of 2025 I Was on the phone with a lab the way that it happened was I had a question about one of the

factors One of this the small HDL particles.

It just had this one question And I was talking to this guy on the phone and he answered my question and I thanked him for it. And he gave me a little backstory on answer and we're kind of chatting a bit.

I said, you know, I'm just really excited about MVX. And he said, we have that. And I said I know you've run it on 24,000 people for the NIH, which I didn't know they had.

I did know that this was a lab, right? Wow. It was there's a third party that orders it. He goes, yeah, We did that and I say, but I can't order it for myself or my patients.

He goes, oh, just give me 15 minutes. I'll turn it on. This video is brought to you by MyOffice. We use new and old clinical discoveries, solving complex chronic illnesses using only diet and supplements.

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But if you just want jump into direct care immediately, just contact the office directly. He goes, oh just give me 15 minutes, I'll turn it on.

How MVX Was Released for Clinical Use

Like that, so there you go. Since then, I've been running MVX. I run it on lots of people so far. Yeah, it's amazing what you get when you really ask, if you just ask.

Huge indicator of, like you say, measuring health or lack of health. Do people still need to do other tests? I don't say need-to-do, but would it be beneficial for them to other test like a PSA for men or something or things like that?

Or is this really the only one they need or is the primary maybe the one that they needed and the other ones are just complementary? This is the first test to start with.

And of course, PSAs and all the other tests that are available are still needing to be used. But the question is for what purpose, right? To measure disease, that's one purpose.

But in my healthcare practice, I've been trying to improve health. So that gives us a different perspective on lab testing. With NVX, some of these six factors, you just start a nutrition program, or you start detox program or something.

But other factors will tell us, now run this next test. And that test might be to find out why you have inflammation or another test to found out how many organisms you or microbes you are living in your body.

I know the test would be to find out what are the toxins you have in your body and how much. So NVX directs us where to go with the next test and with therapies.

It is the primary. This should be the first test that everybody runs. I guess it should the be next tests everybody run. People's normal physicians are testing for disease.

If you go into your doctor's office and say, want this test, they're probably not even going to know what it is, right? So they need to come to someone like you who's actually measuring for a health or lack of health.

So don't be surprised if If you hear about this test and you go to your doctor and they're like, I have no idea what that is, and it's really not important.

So you've got to be educated. That's what I'm talking about. Right. The other aspect of this is that when medical doctors find something on the lab that's off, they are responsible.

If your LDL cholesterol is too high, then they just give you statin drugs. They are legally responsible to lower that LDl. And if they run a test that they know nothing about, and they don't know how to fix it, then chances are they're not going to be so happy to even run the test in the first place.

And the other aspect of this is that there's no drugs that fix MVX. Drugs cannot lower the score. The drugs may keep the scores the same or make it higher, but the way you fix the MVS is by repairing the biochemistry of your body.

In the we do that with nutrition and cleaning, detoxing the body and diet. Yeah, so let's someone come in and says, okay, actually, man, I want to do the test.

They arrange your office, they arrange it through your Office, right? And then what's the process? They go, what is the Process? Okay, They Go to the front page of my website.

And in the upper right corner says MVX test, click on that. and a page comes up, you put in your information and someone from my office will contact you and arrange payment and they get the requisition to you.

and you print that off and take that to LabCorp and it's officially called MVX Plus. And then you take the requisition to the Labcorp, and they draw your blood.

It's just one vial. And then results come back probably within a week. Within a we get it and then we send it straight to you. With an explanation, with a video that I made on how to read it.

If you want to go further you can get a consultation with myself or one of my other practitioners and if you wanna become a patient then you could do that.

So with MVX you use that main score and all the other scores as a report card. and like a grade card if you will on your care for yourself and your doctor's care.

So you want that number to come down and if your doing some therapy and it doesn't come then you gotta change up your therapy to something that will work.

so this is a great card slash report card for your self and you're doctor and basically the whole healthcare system.

Using MVX Alongside Other Tests

this is point people in the right direction like you want to find the doctors that lowered the MVX score and Right now I'm the only one in The country that's trying to figure out how to lower MV X and I've had some success With myself and then we have some patients that are working on on their scores, but we're brand new at getting some clinical results lowering NVX.

I was just saying, it is the ultimate health report card. That's what this is. Yeah, absolutely. Yeah for sure. And I've talked with some of the researchers and they had no idea that MVX will fluctuate so much from, you know, month to month based on your actions or your exposures.

and They thought that NVX would be the same number for the next two years and it might budge a little bit. They

also have no intention on using it clinically.

We're talking about PhDs and MDs. that they've done studies through Duke University, where, for example, they had some guys, older gentlemen with high glucose, and they put them on treadmills and their exercising, And they ran the MVX test before and after, their blood sugar dropped and insulin resistance got better, but it didn't change MV X.

And I told this researcher on the phone, yeah, because exercise is not part of my seven step blueprint to optimal health. So I could have told you it wouldn't work.

And the other study they did was with statin drugs to lower cholesterol. MVX did not lower with the staten drug. And I said, yeah, that makes sense because drugs are not part of the seven-step blueprint to optimal health.

The things that will fix your chemistry and improve your. Chemistry are in the seventh step blueprint and is basically cleaning the body, detoxing, getting rid of inflammation, microbes, and toxins.

That's the, the core. Do you foresee this ever becoming more mainstream or is this something that you're gonna have to be in the know to just know about?

Will this become mainstream? Boy, that's such a good question. If it becomes mainstream, it's because people will want to have their health improved. Okay, so I think a lot of viewpoints right now regarding health are I have a symptom.

I don't want that symptom so then and that's easy right like doctors have A million drugs for a million symptoms and it's an easy way to think right get rid of my symptom as and you can sometimes some drugs work in 24 hours like Benadryl or whatever.

But you're never getting to the cause. The problem never goes away permanently. And what you really want to do is fix the Cause. As you go through that process of fixing the Because, then you might have some ups and downs and maybe not feel so good.

But over time, you feel better and better. So the results are not so instantaneous, although they are more complete. And cheaper to get to and it takes a little bit of work means, you know, taking some supplements and changing your diet.

So in order for this to go mainstream, we need a lot of people to understand that to. Get your health back. You have to work at it. And the other thing is if insurance companies.

really want to help people, then they should change their process to improve health also, as opposed to treating symptoms or treating disease.

Why MVX Should Be Repeated Over Time

And that's the whole point of healthcare anyways, right, is to actually improve people's health. So if you're really in this industry, use MVX to rate or to grade your processes and your therapies.

And so if I had an insurance company, I would mandate all patients start their care with an MVX test. And then the doctor can say, well, my therapies will last six months or however many years.

They should have MV X testing once a quarter, for example, to look for progress. So will it become mainstream? Maybe if some people at the top maybe the Secretary of Health and Human Services, maybe that person can push for NVX testing on a regular basis throughout the country, depending on what are variables that need to be taken care of, such as health insurance payments, or maybe some like motor vehicle accident lawsuits.

You know, you gotta do, and you got to use, NVx needs to implemented in some way from the top. and from the

bottom. So patients can run this on themselves through my website and get a score and kind of rate their progress with their doctor's care.

Right. And from a frequency standpoint, you kind just covered this, but you know, a lot of people just have annual blood work. But something like this where you ran it every month at a minimum would suggest at minimum probably quarterly because it is pretty cost effective.

Yeah, at Right. And if you're really healthy, then you can just run it once a year, just make sure your health is maintained. But like if your actively trying to improve your healthy can run a monthly.

For instance, like with you, you know, probably were shocked to find out that your score was high. Right? And then, but it came down substantially in just a short period of time.

So the fact is that if someone runs the score and they get a score they don't like, there are things that can be done, and it may not be the big of a swing as that you had, but there's things they can do to substantially improve their risk factors in a short period of time.

That's correct, yeah. And the MVX six factors will tell you where to start first. So there's one person who ran his test, his score was the second best score I have seen.

His score is 23. When I looked at his numbers, though, I said to myself, well, he's eating too many carbohydrates. I can tell he got some infection or inflammation or something.

Um, and when I actually talked to him on the phone, And you know, hey, you have a really good score, but I can see that you're eating too many carbohydrates.

And he said, yeah, I eat sweets and I get these infections in my teeth. Hmm. So like I told him, like, don't have an ego because you ever really get score.

You have things to work on. Oh yeah. Totally right. Yeah. I guess that means even when, even if, if you doing really, really great, You can always do a little bit better.

Yeah, there's always, yeah, improvement. Yeah. And like I said, that there are things that can affect your score in a short period of time. So it's one of those things where that's why you might want to run it more often because you may have an infection or sinuses or allergies or whatever.

I do want say this. There are some people with a score of, let's say, I'm just going to say like 50, their score is 50. And some of them are 70, you know, let's say 75 years old and other people are 40 years.

I'm just saying like age is not a factor. Right. And that's one thing that MVX has been shown that when you're trying, trying to predict mortality or I'll say longevity, it used to be how old are you?

Are you male or female? Have you had a heart attack or do you have chronic kidney disease?

Who Should Get Tested and Final Takeaway

Those were the main factors. Also, the smaller factors were, are you a smoker? Are you overweight? Like those are miniscule as far as predicting longevity.

But now that MVX has been invented, it contributes to 60% of the prediction of your longevity, 60%. And then all these other factors become very miniskule.

Like that, you know, gender, age, smoking, weight, past history of disease, yeah. And you would think that companies like insurance companies, if they were to like a life insurance company, to have any type of policy issued, that they would require this test to be done to determine policy rates, because it seems like for them, they

wouldn't want to use that.

So like I said before, Hopefully it comes from top down, but a lot of these things happen from a ground swell or people going, you need to be having this test or you'd be looking in this task.

Right. Yeah. But with the insurance companies, it shouldn't just be like, take the test and see what your score is and then here's your rate because your scores, whatever number.

It should be, You're going to run this MVX score once a month or three months or something like that and see if the number comes down because if it's coming down it means that you know that person's health is improving.

So if you're an insurance company you want healthy people or and or you people who are working on improving their health. If you have a score and it keeps going up and you're an insurance company, you don't want that person because something's not right.

They're not doing the right stuff. If they got the wrong doctor, they're having some kind of a poor lifestyle choice. You know, it's like discovering a new molecule or something.

It's just amazing the fact that this test was being run. and then nobody really knew about it. And then from a phone call, I mean, you were able to facilitate this going out.

You said age is not a factor in who should get this test. So even someone who's younger, early 20s, should they be testing? This is a test they should be getting?

Yeah, one of my really bad scores that I've seen on all the people that have run this test, this woman was, she's in her 30s, and her score is very high.

And she is not a patient, I don't know her history, or if she has some diagnosis or something, but yeah, you can be young and still run the test. All right, well, this has been great.

This is a test I think everybody needs to have. If you see this or read about this, they need to call your office and schedule the test, right? Right.

And so like, it's more about longevity and improving your health so you can live longer and be healthier at the same time. What else do you want? Alright, exactly.

Alright. Thanks so much. Okay, thank you.