Statistically, we see a huge percentage of calories consumed and simple carbohydrates typically at night before bed. And that's a big driver of waking because you're going to bed on those calories that are being stored as adipose.

Welcome to the Holistic Truth Podcast. I'm Jamie Dorley, CEO of Nutritional Frontiers. and I am Christine Genovese, creator of the Soul Intelligence Method.

We're here to help you break through chronic disease and dysfunction physically, mentally, emotionally and energetically. with real proven strategies, protocols and tools you can use in your practice today.

Hello, everyone, and welcome back. We're live on your favorite podcast for natural healing and wellness. This is the holistic truth. Can you handle the truth, Christine Genovese?

Absolutely, I can. It's why I'm here. we are on a mission to make the world healthy in every way, physically, mentally, emotionally, spiritually, energetically, any way we can support people.

Yeah, we want to make your world and the world healthy. I'm your host, as always, Jamie Dorley, with the co-host, the one and only, our chief growth officer at Nutritional Frontiers, and, The creator of the soul intelligence and movie star, Hollywood.

Welcome back from Hollywood, Christine. How we doing? I'm doing great, Jayme. I am pretty excited. Lots of really good things going on in my life. There's a movie coming out in theaters near you very soon called The Pillars of Power, and it's How to Live Your Best Life.

And we talk about all kinds of pillars, whether it be relationship or finances to health and mental health, right? And so I so excited about today's guest because he certainly represents at least two of those five pillars in the work that he does in We expanded into New England a few years ago and we had about 10 people at this really cool, intimate steakhouse and there was one gentleman there, a young gentleman, and I think he knew the product line better than some of our team did.

So as we were going through, I finally was like, dad, yeah, take over. So he was in sync with our slide presentation and on top, especially the GI protocol that night and the quality control.

And I really realized very quickly, he's a strong, passionate young man. And when I looked at his background, by no surprise, I realized why he's so smart, competitive, and knowledgeable and passionate.

He was a Division I wrestling champion. So when you look back, wrestling is probably the hardest sport I ever did. And what I realized when I did wrestling the first time is, first of all, there's no teammates like football.

There's not 10 other people around you to save you if you screw up. If you screwed up, you're usually looking at the lights. That means you are on your back getting pinned.

And I was like, oh, I can do wrestling. This is easy. No equipment. We're inside. The weather is good. And after about an hour of a warm up, so I'm like oh my God, this is way beyond anything I thought possible.

But realizing that not only the wrestling background and I always like when athletes or people in music because It's not just the physical, it's the discipline that you put in with tennis or me with bodybuilding and football and him with wrestling.

It is gymnastics with my daughter and lacrosse and baseball. You know, we all want to be professionals, but most of us don't make it. But you can apply that discipline to anything and to see him go to naturopathic school up in

New England and now on the Roots Natural Medical Center.

And I believe he went to Sacred Heart University where, you know my friend, my best man's wife and my goddaughter went too. So great background in being a natiropathy doctor.

You practice up in connecticut and he's been a speaker for us of the world of wellness so nice warm welcome for doctor zachary moran how we doing doc i'm great thanks for having me.

I was so excited to have you on the show i know there's quite a few topics that we wanted to talk about today. but before we jump into probably bone joint inflammation, can you give us a little more expanded background?

How did you even get into naturopathic medicine? Because some people don't even know what it is yet, right? And people usually think of medical routes, usually someone in their family or personal experience.

What got you lit up about natiropathy medicine. Yeah, you're right. Connecticut, New England area, we're still growing in the holistic side of medicine, We're still growing the functional side of medicine.

Where I grew up, I was blessed to be in a family where my father was conventionally trained, but also trained as a DO overseas in Europe, which is a little different than a do in the States.

So he had a pretty good background on how to manually address a lot of physical ailments. But we grew with a focus on nutrition, health, physically active.

And then as I went through pre-med in undergrad and then started to pursue some residency opportunities, some shadowing opportunities with conventional doctors, I soon realized that the conventional space did not jive with a lot of the things that I had wanted in my career.

A lot it was management of medicine. And a of it standardized and it really wasn't offering optimal health. It was more reactive. attendings that I was shadowing were, they really did not advise pursuing the field, we'll put it that way.

They were pretty straightforward in that they said it was probably not in my best interest to pursue medicine, which I think was really- Ouch. Yeah, despite them being large figures in the field, surgeons and they were like, this is a field that doesn't have the same rewarding principles it once had.

And so that pushed me into a feel that allowed me to pursue something more from a health and fitness perspective, which is where my background was. I was an athlete and at the time I also was pursuing a competitive CrossFit career.

And I wanted to know more about how to improve health and fitness. Naturopathic school has a lot of nutrition, has lot health aspects too outside of just the medical field.

It bridges the gap between disease and health. Pursuing it was just perfect for me and from there I was able to apply it to my own health, to family's health in all the patients I've seen since.

That's awesome. I guess that, you know, they saved you a lot of money, maybe. Time, energy, and effort. Because we spend an awful lot time helping to educate those that are in allopathic medicine to make that transition to naturopathic and find that happy medium, right, where it all fits together.

So what are some of the areas that you focus on specifically at your practice? Like, what do people come to see you for? Yeah, good question. I predominantly focus in complex chronic disease.

So I see a lot of chronic infectious disease like tick-borne illnesses. I typically see patients that don't have or have exhausted a lot of the traditional routes and they're looking for help that isn't available to them.

20, 30 year histories of debilitating conditions. More recently, we're seeing a whole lot more in the mast cell activation category, mold toxicity category and a ton of toxicities have increased recently.

It's a field that I really wasn't prone to initially. In medical school, I was much more in the regenerative spaces. We're doing injection therapies with stem cells and musculoskeletal conditions.

And that was the pursuit because of my background in fitness that i was trying to pursue. Once I got out into practice, the demand for these inflammatory conditions and answers for the inflammatory condition was so high.

that patients were asking for help and I was just, I couldn't say no. And so at that point I pursued more of the field I'm currently in. So right now I practice in Connecticut, on the Eastern side of Connecticut and we're seeing a lot of patients who just don't have options to addressing root causes.

That's what we are trying to offer. I love that, hence the name Roots Natural Medical Center, right? I loved that. And we always say, don't run for the cure.

You'll be running forever, but run the cause. Often, as I learned from your background, you share the same focus that we do. Stress, toxicity, nutritional deficiencies, lack of movement, and genetics really can be tied into anything, any of the things that people are coming in with.

Luckily, he really just made a great point is you give people hope. You know, years ago when we started Nutritional Frontiers, I was doing consults three days a week to really get back in the front line and learn more about the patient's journey through an office.

And oftentimes they're to come in and say, I've tried everything. I'm sure you've heard this. Nothing's working. And I like, well, you tried, everything that you know, but you haven't been here yet.

But I love the fact that he gives people hope, especially for these more complex patients, years ago, when I was an ACSM personal trainer. I would tell people, look, I can work you out and put you on a diet in four months, and get you in pretty decent shape, regardless of how you come in.

Gosh, now it's completely different. I mean, the diet and training is not enough anymore. So what are some of the evaluation tools that you find to be most important or most useful for your patients coming in because I think in functional medicine, we went from no testing years ago or AK or the observation, you know, the physical testing the old days that is still very valid.

And then I think we over tested genetic MTHFR. You know, you need all these crazy tests and it became thousands and thousands of dollars. And I. Some doctors, um, fell in a trap of treating the tests.

I dig where the pendulum is kind of swinging back here where we're settling in. So what are your thoughts on testing and what is it the journey for the patient look like?

Because really for when we want to make the world healthy, the number one thing we gotta do is give people hope. Yeah, yeah, absolutely. And unfortunately, a lot of the patients that I've seen, number 15, 16, 25, 35, I remember doctors that they've see and, you know, they'd done a lotta protocols both conventionally and allopathically and functionally trying to get to their cause.

And like you said, a lot of patients come in with various routine and specialty tests and they may have yielded some answers, maybe some results, but it really, the process for me largely comes down to answering and asking enough questions.

So it starts with the history. my intake process is annoyingly lengthy. You sound like my friend Jacqueline Shedden. When I first took hers, I put funny answers in to see if she would read the whole thing.

You're qualifying to see if they'll even be compliant with the paperwork, right? Yeah. Absolutely. Yeah, and if I'm

trying to uncover, you know, 20 years of chronic complex disease, I need to trace it back to some level of, is this an origin?

Is this ongoing? So a lot of times we'll have a 20 plus page intake which I preview for at least in half an hour to an our before the patient comes in and then we will have sit down conversation surrounding their current conditions and the current symptoms.

It gives the patients an opportunity to kind of express what they're experiencing and from that i can really get a good gauge of where the problem resides.

And from there there's diagnostic opportunities for us to pursue whether it's a specialty test or blood work or something of that nature. What a completely different experience.

I want to hold that point for a minute because people listening out there. Folks, he takes a half hour to an hour before you come in to actually review your paperwork.

How many times have we all got into a doctor's office? And you can tell he or she is way behind schedule. They're flipping through your chart to see why you're here today, right?

They spend zero time. I think a lot of this has to do with the medical third-party insurance reimbursable platform and system that we've all been a victim of, Because in, you know, in defense of the doctor, she doesn't have time because the insurance company just cut her 20%. Now she has 20% less time to spend with you.

She's got to spending with more and more patients and their hook is get that, diagnosis code. And then what is the medication that they're going to recommend?

So what are some of those tests? I mean, take a tremendous amount of time. Are there a couple of tests that you say, these are two I gotta do on everybody?

What is it? Yeah, so we're very conscious of trying to be, um, efficient for the patients. The knee, most patients come in with some type of insurance in Connecticut.

We able to run blood work, uh, through insurance most of the time. So it gives us a good idea. Um, I am notorious for being a vampire when it comes to blood works.

I make sure that patients are, are capable of handling bloodwork at 15 to 20 vials. And we'll make that. We get a lot of information. Yeah. So, but it's a good tool.

We run a lotta blood work that most doctors have never seen before. And so, that comes as a great tool for our patients. Then we'll run some other diagnostics, pending the conditions.

You can do specialty kits for infectious disease, gastrointestinal stool testing, urine testing. There's lot different types of hormone testing that we utilize.

But we're really trying to address each individual patient and their current concerns. So it's highly individualized. But I will say nowadays, patients, I think maybe 85 plus percent of my patients have a need for gastrointestinal support.

Yeah, that would make sense. Everything begins and ends in the gut. I Think we heard that from some guy a few 2000 years ago, maybe. Just Socrates, I think had that, or Hippocrates, one of the two.

It's some Greek guy. Yeah. And there's a truth to it too. There is. Well, when I look at it energetically, because that's what I do, right? I'm looking for the underlying emotional energetic root cause, and I totally relate to when you say you feel like you're the last stop on the magical mystery tour of health, people are like, well, i've tried everything else.

I might as well try this, You know, I really talk about it because it is the core of who you are, right? Like your gut is in the center of your being, just in your middle of you.

And that is first thing that gets struck. It's actually where our self-esteem is housed in our gut, in that core. We talk of serotonin, the happy hormones produced there.

So when you take a hit, you're taking it right in a gut and if you think about If you have to go do like a speech or something, you might get butterflies in your stomach or if something really bad happens, do you feel like you get like punched in the gut?

There's a reason for that. That is really the core of who we are and our center, our self-esteem, how we show up in That's usually the first place that gets hit and that's where a lot of the energy gets stored.

So from an energetic perspective, it makes complete sense to me why we would typically begin and end in the gut. Now, speaking of that, when I think about it's summertime and the got and core of who we are, I'm starting to think like weight loss.

And how do we look good getting to the beach and being outside and staying in shape? And I know besides all of those chronic conditions that you treat that weight loss and the hormone connection is something you're also really focused on and passionate about.

So why don't you tell us a little bit about that side of your practice? Yeah, it's a big driver for a lot of the reason people come in. They're extremely fatigued, they've got gastrointestinal inflammation, hormonal imbalances, and weight gain as a result of all of those.

So as we look at weight in general, patients that come and say, hey, I would like to lose some weight and I don't really know why I can't. The first place and the most obvious place to look is the metabolic conditioning, right?

what we're calorically ingesting, how we are ingest it, what type of macronutrients we ingested. Every calorie is not the same, right? We can say that there is, but there's a difference in our quality of food consumption and our metabolic expenditure or exercise.

So first place to look is making sure our Metabolic health is sufficient. A lot of that comes to do with how you're eating and what you are eating. But on top of that, a lot of patients will come and they say, regardless of what I eat, how much I can't lose weight.

In that situation, you have to look at inflammatory conditions because inflammation is a big contributor to fluid retention and that will hold fluid regardless what you're eating or what your not eating.

And then another very large component that I see typically with weight gain is hormonal weight game. Um, and a lot of it's cortisol driven. A lot. Patients nowadays have tremendous hormonal roller coasters with cortisol.

Um sleep disturbances are a product of that. Fatigue is a project of. And cortisol is another very strong contributor to fluid retention, adipose contributing, um, it drives up blood sugar.

So we'll see a. Changes affecting weight gain. and weight changes. So we try and address comprehensively all three. And that's where we have the results, making sure that there isn't an underlying variable contributing to their weight.

Metabolic inflammation and stress in cortisol. See, that's what I was referring to earlier. Like years ago, you didn't have all the pro-inflammatory foods.

People weren't quite as stressed out, even though their lifestyle may have been harder. I think this overwhelming indulgence in TV, news, propaganda, social media, all these things have created more and more stress for people.

And technology was supposed to allow us to work from anywhere, but not everywhere. I recently had a colleague, you know, wanted to call us in from a funeral home.

I was like, no, that's not a place to make a phone call for work, okay? So, we had an event with Dr. Silva was speaker. He's a DO and he was talking about metabolic syndrome.

And he talked about cortisol. The first time I really heard it put this way, like you just said, cortisol is a fat storage hormone, especially when it spikes at night.

Can you elaborate a little more on that and, you know, why are people having low cortisol in the morning and high at and affecting sleep? Yeah. So typically just for basic physiology purposes, cortisol is supposed to spike shortly after waking.

It's not just your stress hormone, but it's your waking hormone. Its supposed regulate your ability to perceive external stimulus. Light, sound, smells, food.

When you see the sunlight come up, your cortisol supposed rise. There's a direct correlation there. And so for most people, we're not on a biological clock anymore.

They're on work clock now. And, so that influences a lot of our cortisol. The screens, the blue lights, stressors working out too late at night, eating too later at.

You're going to drive a cortisol at the wrong time. That influences your sleep, which is how we see sleep disturbances. And then in addition, inflammation is also a cortisol driver.

So if you're harboring chronic inflammation from what you are consuming or chronic infections, your cortisol will constantly be spiking throughout the day and even at night.

And you see, look at things like sleep apnea, right? If you can't breathe, you gonna be a little stressed. If can sleep well. Sounds about right. Yeah.

Although I envisioned someone's hands wrapped around my neck when he said you Yeah, let me adjust your pillow. We've heard that before from the spouse, right?

Permanently. Yeah. So, I mean, you can see all the chronic cortisol drivers, not to mention just life. I, mean nowadays people are working more than ever.

There's not a lot of time where we're having community to down regulate. Cortisol doesn't get dropped. And then you gotta get this chronic burnout presentation where we're getting cortisol to upregulate to the point where it's driving blood sugar elevation, which is what it intended to do in times of fight or flight.

So if we get chronic elevations blood, sugar goes up. insulin goes up, we end up storing fat, storing adipose in times of, because if you're driving a blood glucose, but you are not actually running from the bear, you aren't burning off the glucose and you store it.

So you end it with an adepose condition. Well, it's interesting. I read recently that most people go through a fight or flight response an average of 16 times a day.

Back in the day, It was just a couple. But that can come from just like a text you get on your cell phone or an email that gets you, oh my gosh, I got to respond.

You know, it's crazy when you start thinking about that. No wonder we can't calm down. Our vagal nerve is crazy and we've got all this inflammation, our body's on constant high alert.

So do you have any, you know kind of lifestyle tips or protocols that you usually use with people that are in

constant, high stress like that? Yeah. And oftentimes patients come to me with years of this brewing where it's now a habitual learned response.

The autonomic nervous system is now trained into that sympathetic state. So it takes some time of rewiring to untrain that response, right? But from a lifestyle standpoint, one of the most important things you can do is get back on that biological clock.

Are you having good sleeping cycles, waking cycles? Trying to get the body back into parasympathetic, um, breath work, activity, sunlight, grounding, sick routine retrains the system.

And then we'll supplement in addition to that to support the. Because there are a lot of times when your cortisol is drive. elevated and constantly in an overused state, you're going to deplete yourself rapidly from a mineral standpoint, from the nutrient standpoint.

A lot of the amino acids are going be depleted. So supplementing to give your body the opportunity to get back into parasympathetic is almost an essential at this point.

Well, tell us, you know, I have to pay for the podcast. Tell us what are some of your favorite nutritional frontier supplements that you put people on in terms of protocol?

Yeah, so I will use adrenal support typically in the morning. We use the adrenal glandular. Plus, we'll combine it typically with the Adrenamax, which will have the herbal component in addition to the glandula.

And we'll dose those according to the patient's needs. So there's a reference dosing on the bottle, but that's generic based upon the average individual.

Some patients are going to need a lot more based on their current situation. And then we will use a bunch of the multivitamins and magnesium complete and a bunch of other supports to help nutritionally support the resources for the adrenals on top of the herbals to stimulate them.

That's the morning protocol to give them the resource to make the cortisol. And then in the evening, night time, we'll use calm day and sleep time to re-regulate their biological clock to get them to sleep at night.

And that's usually a pretty effective regimen to get them back into biology within three to four weeks. I love it, it sounds like my protocol. Adrenomax, adrenal glandular, frontier multi, super B in the morning.

And then I do a calm day, sleep time, and mad complete at night. It works really well, I loved the fact that you really pointed out, you know, therapeutic dosing.

I think some people are so depleted and they may not take enough. They may take one capsule because they're afraid. So what's your thoughts on therapeutic dosing?

Yeah. If you look at the comparison of the adrenal glandular versus what conventional systems will use for adrenal insufficiency with hydrocortisone, you can take substantial amounts I've had patients use the adrenal glandular up to 10 capsules throughout the morning.

So from waking to about six hours into their day for short term to get them back to sustainability. But those are patients who are in a position where they have a medical diagnosis of adrenal insufficiency and they're relying on steroids to kind of get awake and survive the day.

pending the need of the patient, and we've been able to reverse a lot of those conditions by supporting the adrenals sufficiently to kickstart them back into production.

I love it. Up to 10 per day. That gives me, hold on, I go grab a couple more I guess. Boy. Yeah, it's interesting. Um, and then calm days sometimes during the day, depending on what kind of a day I'm having.

And then at night, I use the Adrenamax because I learned from Dr. Lin that it's an adaptogen. So it'll dial the cortisol up or down as you need it, which I think is super cool.

And I also, I religiously take format complete every night, but I got to watch when I take them. Because if I decide to sit down and watch something, you know, just zone out, maybe like a discovery episode or a documentary, like in 20 minutes, it hits me and I'm done.

It totally relaxes me. Yeah. Magnesium is one of those things that at this point in time, almost every single individual needs to be supplementing. There's just not enough of it in our food.

And there is just a huge need for it from our lifestyle standpoint. So everyone could benefit from magnesium at some threshold. Yeah, we agree. It's actually gotten to our number five seller in the company.

So top five, it's crept its way up there. And you mentioned multi, our woman's complete to number three seller. I think people need to know that because sometimes they discount the importance of a multi.

Even though the American Medical Association said back in JAMA, June 28, 2002, everyone needs a multivitamin regardless of age or health condition. That research was done at Harvard School of Medicine.

right down the block from you. And then when you look at magnesium, the research all shows for the last 10 years, that's the number one nutritional deficiency in the world is magnesium.

Now the challenge is, from where we are, is that there's no shortage of magnesium in a market. They can buy it from the grocery store, a vitamin shop, or a professional company like Nutritional Frontiers.

When we say professional folks, we deal with healthcare professionals like Dr. Moran here. The difference is these lower level magnesiums are different forms.

I think people get caught too much in the dose. Someone was asking me last night at a dinner, well, how much magnesium is in there? I said, look, it's elemental magnesium.

So I just want to review for everybody. You have mag oxide, which is the lowest bioavailable form. It's almost ground up rocks and that's very difficult to absorb.

However, you can put 500 milligrams in one capsule. So it has a higher dose, but the form is poor and the bioavailability is port. Then you have citrate, which is really good for constipation, muscle cramps, something like that.

And then you the amino acid chelates like maglycinate and then The fourth level, which we use, is the bisglycinate. So two glycine molecules covalently bonded to the magnesium, therefore bioavailable in all tissue, and you get a much more therapeutic result at a smaller dose.

Four caps of ours will yield 300 milligrams of elemental, highly absorbable form of magnesium versus that one cap at 500 milligram, Yeah, it's a big distinguish dose because most people, when they go to CVS or Costco or somewhere, they're grabbing over the counter magnesium and because the in expense of magnesium oxide, that's typically the one you'll see.

So make sure you're noted what you kind of are getting. Yeah, it's cheap and they can put a lot in one cap. They see the mag oxide. It's 500 milligrams.

Oh, Dr. Marantz would tell me to take 500 mg. His is too expensive. I'm going to go buy this one for a fraction of the cost. But we always say the most expensive vitamin is one that does not work.

And when you look at forms, it is imperative to your success that you follow doctor's recommendation on these and get the high quality supplementation.

I always say, hey, work on your budget and other areas versus trying to skimp out on health because it's going to determine the result you get. And the same goes with the food.

The amount of pro-inflammatory foods I see people eating is shocking. What is some of the most common culprits that will drive cortisol up at night? And then also, what are some ones that I would say stay away from that are driving up the inflammation?

Yeah. And this is a very common problem because if you look at people who are chronically fatigued, cortisol is not rising sufficiently in the morning by midday, you've got little left and you're looking for coffee or carbohydrates mid day for that crash to help sustain your energy.

By the time nighttime comes, your back to zero cortisol. But the problem is, is that you have. to finish out your day, it's 5 p.m., you can't go to sleep, right?

You've got kids or anything else to do, dinner or whatever. And so what happens is is that when you stay up past that crashing point of cortisol, you end up craving glucose because your cortisol is insufficient and you're looking for simple carbohydrates.

So that's gonna be simple sugars like ice cream or cookies or chips or something that is going to give you that glucose that your body is no longer able to stimulate with cortisol.

And statistically, we see a huge percentage of calories consumed and simple carbohydrates typically at night before bed. That's a big driver of waking because you're going to bed on those calories that are being stored as adipose.

Wow, that is a clip right there that could change America. I'm not joking. Well, you just said so eloquently in 30 seconds, sums up 90% of people that came in to see me as a trainer 30 years ago and probably close to a hundred percent.

Now they could present with any kind of chronic condition, but right exactly what you said, the caffeine, don't forget nicotine, high fructose corn syrup.

Um, that people are constantly craving and, you know, they're, crash in the morning. They crash any afternoon and night to get this extra spike after they consume all these comfort foods.

And they wonder why they've tried everything and all they do when they, before they come in to see you is cut back a little bit on the volume of food or cut out the ice cream or start an exercise program for a few weeks.

It's not going to do it. I got to change your metabolic rate. In fact, Harvard released, um, research. about two or three years ago, right after Tufts University came out with the food scores, which had like Cheerios number three and canned peaches number two, like the worst possible things people could eat.

So what Harvard did is looked at, what are the three really underlying causes of this? One is their metabolic rate, so you got excellent metabolism, but it's also you can change your metabolic rate, right?

And then the second thing is obviously the quality of food that they eat. A calorie is not a calorie, folks. 100 calories from broccoli versus 100 calorie from a Snickers, probably have to be the fun size, is completely different than what it does to your metabolism.

But the third really key thing what they found is that the ecology of the microbiome, And we found that fascinating. That's really the missing component for a lot of people.

So when they're feeding it sugar, they usually load it with candida and parasites and bacteria and some of these other things affecting their metabolic rate.

What are some the most common offending foods? Or products that people eat when they come in that puts him in this pro-inflammatory state that they think is healthy.

I always found it funny when someone come and, oh, what do you eat, Christine? I'll eat cereal for breakfast. And I'm like, What? No, it's Cheerios with skim milk.

Worse. We actually had a book in the wellness center called Cereal, like C-E-R- E-A-L, Killer. Yeah. It was, it was a bowl of cereal. And it would tell you how, you know, these big lobbyists, Kellogg's and Post, which actually the same people that used to own the tobacco companies, they've invested all their money in the cereal and product companies.

You know how they really have brainwashed our society that these are healthy. Um, and they may say, brand flakes or whatever these cereals are called.

but, and then the skim milk factor, I was like, oh no, no. No, we're way off here. So that was the one I thought I just, it's not the skin milk, It's just watered down milk.

And that one thing for me, what did you find was some of the most common ones that you say that people think are healthy and that are pro-inflammatory?

Yeah. We are by far the overfed, undernourished country. And what we want to look for is where are we getting nutrition? Basically tell people, stay away from things that are tan in color, right?

So you're looking at wheat, grains, pastas, breads, rice, white potatoes, everything, mostly everything of that color is low in nutrition, high in calories.

And so those are things are going to be nutritionally depleting instead of giving you the nutrition you need. A lot of people actually crave more calories or more food because they're undernourished.

So if you give the body the nutrients it needs, it no longer has to seek more foods and more calorie. You look at someone who's really obese, they actually are probably very nutrient deficient, which is a very conflicting kind of interesting idea, but very consistent.

And so what I've done with a lot of patients is instead of trying to get them to reduce their calories, I just overfeed them nutrition. And because of the satiating effect of high quality nutrition, we typically don't overeat.

So like for instance, at bedtime, Some protein, usually my go-to is the peanut butter super shake. It's got fiber in it. And it's also, I throw it with the proline greens chocolate flavor.

So I make a Reese's formulation, maybe a little bit of- Hey now, my favorite right there. Number one of all time. Mm-hmm. Then a bit a ice and you got a nice smoothie milkshake before bed.

Now you're satiated and your calorically not overexpending and getting nutrition in. I also, one of our healthcare providers recommended making it into a hot chocolate if you want something warm in the evening too.

And I was like, Ooh, that's a good idea. You can make it even creamy with a little almond milk in it. Delish. Well, I can't believe it, but we are like coming up towards the end of time with you, Dr.

Moran. I know that people have been engaged with this conversation and I'm going to encourage everybody to comment, like and share this episode with someone who needs to hear it And Dr.

Moran, if someone wants to work with you, how do they find you? Are you accepting new patients and can they work? My phone's going to be blown up when we send this out.

Yes, we are seeing new patience. We are in Connecticut. Our website is rootsmedicalcenter.com. And you can find

us on Facebook. Were on Instagram as well.

I try and disseminate as much information as I can. within Reason on those social media platforms. So feel free and follow us there. Give us a call at the office.

Awesome. Well, we will make sure that we have links to all of your socials in the comments. And thank you so much for the gift of time that you gave us today and sharing all your wisdom with us.

Jane? Yeah. One, uh, one last, a parting shot for you. Cause I know you got a background in exercise and so do I. And I think people look at it as like punishment.

and I love what you said about telling them what foods to eat. Because, you know, originally I would just tell them that they can eat and they would get pissed off.

Right. So it's like, tell him what they. Yeah, and he always encouraged people to do things they like to. Even if it not really exciting that day or they feel a little tired, sore, lazy, whatever it is.

Like the exercise bike to me never works. My butt hurts. It doesn't do anything on my legs, but the stair master does, it's just challenging, right? Or walking hills for me.

So what are some of the exercises you find that you tend to recommend more to someone that's maybe a beginner or, you know, doesn' have that athletic background like you or Christine, or they look at exercise as a punishment?

Yeah. I mean, I've worked with a lot of different patients and over my years I really realized that the opportunity physically to move, if you're capable of moving, it's a blessing.

A lot patients don't have that opportunity. And so I try and acknowledge that, you know, I was given the opportunity to move and be physical. And I, uh, was giving this body to maintain.

So I think it's a perspective, right? Movement is medicine. Moving is essential. If you don't move, You will end up losing the ability to. And so number one thing is move daily and get someone to do it with you.

It's always better to to it more consistent when you're doing it someone you enjoy doing with. And that's where community really builds consistency. Whether it's a class, whether it is one individual.

Once that is established and there is a consistent routine to find something you enjoyed and then try and diversify from it. I think that diversity is really a good idea when it comes to exercise.

So doing a little of everything, make sure you're getting some strength training in there. Make sure getting duration in that whether it's a hike, whether to swim, whatever it is.

But you give an opportunity to move, utilize it. It's fantastic advice. I'm laughing because this morning, you know, I am back in Pittsburgh. There's a lot of hills where I live.

So I was walking up the hill and sometimes you just don't feel like you're… I wasn't warmed up yet, right? Yeah. And was getting to the top of the Hill.

Didn't make it to to park yet. When I looked in the parking lot, there was a gentleman in a wheelchair. And I looked at him, and I look again, he smiled.

I said, thank you God, I'm not tired, not sore. And then I picked up the pace right away. So I think sometimes we forget, like my buddy says, getting old is a privilege.

Being able to move is privilege and a blessing. Thank you so much. I got chills. Words of wisdom from Dr. Zachary Moran. This guy's a fantastic naturopathic doctor.

He lives the lifestyle. he's got a heart of gold and he so generous with his wisdom today. So we really appreciate it. Thank for all support, not only for the holistic truth, but also for me and Christina team and Nutritional Frontiers.

You've been a blessing to our team. It goes both ways. I appreciate it. Thank you for today. Yeah, whatever you need, you let us know. Thanks so much to my co-host, Christine Genovese.

Look forward to seeing everyone at an event near you this summer and fall. And as Doc says, make sure you keep moving. Let's have a great day, a Great summer, and God bless everybody.

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