The Sleep Solution: Unlocking Longevity, Recovery & Brain Health | The Longevity Protocol Ep. 34 Transcript

(Transcripts are generated by AI and may contain errors)

Show Introduction

[Music] [Music] Welcome to the Longevity Protocol with Welcome to the Longevity Protocol with Dr. Christina Bosch and Dr. John A. Dr. Christina Bosch and Dr. John A.

Robinson. We'll be your guides to Robinson. We'll be your guides to uncovering the secrets to optimal uncovering the secrets to optimal health, better sex, and happiness. From health, better sex, and happiness. From debunking aging myths to exploring the debunking aging myths to exploring the science behind what it means to live the science behind what it means to live the longevity protocol. We'll dive into a longevity protocol. We'll dive into a wide range of topics.

wide range of topics.

Sleep Hygiene Basics

So get ready for an exhilarating journey So get ready for an exhilarating journey in what it means to live well and feel in what it means to live well and feel >> Why so serious?

>> Why so serious? >> Well, I was going to say, why are you so >> Well, I was going to say, why are you so cute? cute? cute? >> I mean, why does it just always start >> I mean, why does it just always start off that way for me?

off that way for me? >> Um because as soon as I look at you >> Um because as soon as I look at you Yeah. you're laughing and I'm just Yeah. you're laughing and I'm just thinking, you look cute. You look great.

thinking, you look cute. You look great. >> Thanks, man. >> Thanks, man. >> Um I like this episode today. Um maybe >> Um I like this episode today. Um maybe it could be because I'm a little bit it could be because I'm a little bit tired of um but sleep is really one of tired of um but sleep is really one of those um really important hacks and those um really important hacks and that's what we're going to talk about that's what we're going to talk about today.

today. today. >> Oh, how are we calling sleep a hack? But >> Oh, how are we calling sleep a hack? But okay, I'll let you get going. okay, I'll let you get going.

>> That's that's Well, >> That's that's Well, >> we just started. I'm already getting >> we just started. I'm already getting oppositional. Go ahead. oppositional. Go ahead.

the the catchphrase, the the new fangled the the catchphrase, the the new fangled techy kind of catchphrase of some kind techy kind of catchphrase of some kind of hack that you have to figure out.

of hack that you have to figure out. Yeah, it's maybe a little bit of an Yeah, it's maybe a little bit of an obnoxious kind of term, at least for us. obnoxious kind of term, at least for us.

Um, but it is something that's pivotal. Um, but it is something that's pivotal. It's something about lifestyle. We were It's something about lifestyle. We were saying before, it's not just a health saying before, it's not just a health shouldn't be about a trend. It should be shouldn't be about a trend. It should be about a lifestyle. And that's certainly about a lifestyle. And that's certainly the case when it comes to sleep.

the case when it comes to sleep. Um, I think it's important to mention Um, I think it's important to mention how many different things sleep is how many different things sleep is actually helping with with with our actually helping

with with with our health.

health. health. >> Yeah. >> Yeah. >> Yeah. >> And really how it eludes so many people >> And really how it eludes so many people and so many patients that come to see and so many patients that come to see us.

us. us. >> Yeah. I mean, I think it's important to >> Yeah. I mean, I think it's important to note that part of the reason why people note that part of the reason why people rely so much rely so much on hacks is rely so much rely so much on hacks is because they're not sleeping well. So, because they're not sleeping well. So, they feel like they need all of these they feel like they need all of these other things to boost them up and pep other things to boost them up and pep them up. And and the reality is if we're them up. And and the reality is if we're not sleeping well and we're not not sleeping well and we're not regenerating and repairing and restoring regenerating and repairing and restoring then longevity is very difficult to then longevity is very difficult to grasp.

grasp. grasp. >> People are always looking for like >> People are always looking for like tricks and tips. tricks and tips. >> Yeah. >> Yeah. >> Yeah.

>> Tricks, tips, hacks. >> Tricks, tips, hacks. >> My trick is >> My trick is um sleep. My tip is do whatever you got um sleep. My tip is do whatever you got to do to sleep. Now, I mean, you know, to do to sleep. Now, I mean, you know, we're making light of it, but obviously we're making light of it, but obviously it's a whole episode. And sleep is it's a whole episode. And sleep is challenging for both you and I for for challenging for both you and I for for many reasons.

many reasons. Some of them are external, which it's Some of them are external, which it's important that we address because sleep important that we address because sleep hygiene hygiene hygiene >> I think over the years actually sleep >> I think over the years actually sleep hygiene is one of the things that I've hygiene is one of the things that I've had to spend time working on with had to spend time working on with patients the most. There's a lot of patients the most. There's a lot of things that people don't realize they things that people don't realize they shouldn't do.

shouldn't do. I don't know if I'm jumping notes. You I don't know if I'm jumping notes. You know how I always do that. But I will know how I always do that. But I will say that say that >> well which let's talk about I mean might >> well which let's talk about I mean might as well. what I mean that's really as well. what I mean that's really frankly where it starts. Then we can get frankly where it starts. Then we can get into some of the things that we do and into some of the things that we do and the strategies and hormones and various the strategies and hormones and various things that can certainly help but it things that can certainly help but it does start off with the basic hygienic does start off with the basic hygienic thing. I mean that's a kind of a fancy thing. I mean that's a kind of a fancy term for just saying what are your what term for just saying what are your what are your habits?

are your habits? >> What are your habits? >> What are your habits? >> Um well for starters the bed should be >> Um well for starters the bed should be preserved for only two things. Sleep and preserved for only two things. Sleep and making love. Literally just those two making love. Literally just those two things. Every time people use the bed things.

Darkness and Bedroom Setup

Every time people use the bed for um reposing I don't know if you say for um reposing I don't know if you say that in English like that but that in English like that but >> for resting while they are awake the bed >> for resting while they are awake the bed is is is getting associated with being awake and getting associated with being awake and reading or scrolling or or working or reading or scrolling or or working or anything that's keeping your brain anything that's keeping your brain stimulated and that's actually very bad stimulated and that's actually very bad for the establishment of routine and for the establishment of routine and physiology is very dependent on routine.

physiology is very dependent on routine. So, I always say to people, it's okay if So, I always say to people, it's okay if you're in your room because that's where you're in your room because that's where you want to rest, but get a get a you want to rest, but get a get a comfortable chair or find another place comfortable chair or find another place in

the home where you can sit to do in the home where you can sit to do those things right before you go to bed.

those things right before you go to bed. Do not lie in bed and do anything until Do not lie in bed and do anything until you're except get ready to sleep.

you're except get ready to sleep. >> Yeah. And get out of bed if you're going >> Yeah. And get out of bed if you're going to have any kind of disturbance.

to have any kind of disturbance. Correct. Get out of bed. That's huge. Correct. Get out of bed. That's huge. And then if you need to work or you And then if you need to work or you need, you know, you need to write need, you know, you need to write something down because something's in something down because something's in your head, uh get out of bed and try to your head, uh get out of bed and try to really limit it to uh sleep and sleep really limit it to uh sleep and sleep and sex only.

and sex only. >> I think um another hack, another tip, I >> I think um another hack, another tip, I I got I'm I'm a huge component, you know I got I'm I'm a huge component, you know how obsessed I am about keeping it as how obsessed I am about keeping it as dark as possible. U making sure we've dark as possible. U making sure we've had to hunt for the right curtains.

had to hunt for the right curtains. >> Okay, we laugh about this because he's >> Okay, we laugh about this because he's constantly I'm going to use the word constantly I'm going to use the word harass. I'm going to go out there and harass. I'm going to go out there and I'm going to say harassing me about the I'm going to say harassing me about the fact that the room isn't dark enough and fact that the room isn't dark enough and I'm Yeah. Okay, fine. But um you one can I'm Yeah. Okay, fine. But um you one can use eye masks.

use eye masks. >> Yes, I'm I'm not a fan. I mean that's >> Yes, I'm I'm not a fan. I mean that's like a personal thing. You're right. I like a personal thing. You're right. I guess you know I could just put the mask guess you know I could just put the mask on and I've tried it and you know on and I've tried it and you know personally I don't like personally I don't like >> makes your eyeballs hurt.

>> makes your eyeballs hurt. >> It just comes off. I don't know. I don't >> It just comes off. I don't know. I don't like something on my face like that. So like something on my face like that. So I mean again that's just me personally I mean again that's just me personally but that would help it to some degree.

but that would help it to some degree. Um, certainly earplugs is the same kind Um, certainly earplugs is the same kind of concept, you know, although we don't of concept, you know, although we don't really do that. To me, it's more about really do that. To me, it's more about the light.

the light. >> And there's plenty of research to show >> And there's plenty of research to show even the smallest amounts of light can even the smallest amounts of light can disturb sleep because it's starting to disturb sleep because it's starting to trigger trigger trigger >> the pineal gland. So, now we're kind of >> the pineal gland. So, now we're kind of speaking hormonally here. It's speaking hormonally here. It's triggering triggering the pineal gland triggering triggering the pineal gland >> and disrupting melatonin production. The >> and disrupting melatonin production. The moment the the body, the eye uh senses moment the the body, the eye uh senses light, it turns off melatonin because light, it turns off melatonin because it's like, "Oh, well, it's morning. It's it's like, "Oh, well, it's morning. It's time to get up. So, let's turn off time to get up. So, let's turn off melatonin production." Right?

melatonin production." Right? >> So, that's where the screen time, right? >> So, that's where the screen time, right? And if you're having and you have light And if you're having and you have light in your room, this is, and this can be in your room, this is, and this can be like light from the alarm clock.

like light from the alarm clock. >> Yes. >> Yes. >> Yes. >> Um light from your cell phone. I mean, >> Um light from your cell phone. I mean, having your cell phone next to to your having your cell phone next to to your bed.

bed. bed. >> Yeah. >> Yeah. >> Yeah. >> Maybe we're jumping around too much. All >> Maybe we're jumping

around too much. All right. Let let's let's let me go back to right. Let let's let's let me go back to just what we were saying to summarize as just what we were saying to summarize as we go, okay? Because that's my brain is we go, okay? Because that's my brain is a bullet thinker. Number one, we were a bullet thinker. Number one, we were saying when we're talking about sleep saying when we're talking about sleep hygiene, making sure that the room is hygiene, making sure that the room is very, very dark. Number two is save the very, very dark. Number two is save the bed only for sleep and sex.

bed only for sleep and sex. >> Okay. And then you were saying about the >> Okay. And then you were saying about the room being really dark. You're talking room being really dark. You're talking about like curtains, for some people, about like curtains, for some people, sleep masks.

sleep masks. >> Yeah. I mean, if there right, if there's >> Yeah. I mean, if there right, if there's if there's windows, you've got to you've if there's windows, you've got to you've got to eliminate all that light.

got to eliminate all that light. Eliminating light from uh a Eliminating light from uh a a clock like you're saying. I mean, a clock like you're saying. I mean, anything that's going to bring in that anything that's going to bring in that extraneous light, it you've got to keep extraneous light, it you've got to keep it as dark as possible.

it as dark as possible.

Sleep, Energy, and Exercise

>> And you know, this is true for kids, >> And you know, this is true for kids, too, because I think parents have a too, because I think parents have a tendency to want to use nightlights for tendency to want to use nightlights for their children, but actually it's very their children, but actually it's very bad for children's sleep.

bad for children's sleep. >> It's not just bad for their sleep, it's >> It's not just bad for their sleep, it's actually bad for their eyesight. So actually bad for their eyesight. So there's research to show that if there's there's research to show that if there's um a a frequent use of these night um a a frequent use of these night lights, it actually causes nearsighted, lights, it actually causes nearsighted, inability to see at a distance, right?

inability to see at a distance, right? >> Um so yeah, >> Um so yeah, >> and there's some correlation of children >> and there's some correlation of children being a little bit more anxious um being a little bit more anxious um especially anxious in the dark. So, one especially anxious in the dark. So, one of the things that um is recommended is of the things that um is recommended is in is to get children and adults in is to get children and adults comfortable with sitting in the dark comfortable with sitting in the dark even when they're awake and letting even when they're awake and letting their eyes get used to seeing in the their eyes get used to seeing in the complete dark. And that's good for complete dark. And that's good for eyesight. It's also good for resetting eyesight. It's also good for resetting the brain. And it does help train the the brain. And it does help train the brain to kind of slow down and shut down brain to kind of slow down and shut down in the dark.

in the dark. >> Yeah, that's a good point, too. It made >> Yeah, that's a good point, too. It made me think just just about sleep in me think just just about sleep in general. And this is what I always say general. And this is what I always say to patients. One, you have to prepare to patients. One, you have to prepare for sleep, but you also need energy to for sleep, but you also need energy to sleep.

sleep. sleep. >> That's what's always kind of strange >> That's what's always kind of strange when we think about the idea of just, when we think about the idea of just, well, I'm exhausted, so shouldn't I be well, I'm exhausted, so shouldn't I be able to just put my head on the pillow able to just put my head on the pillow and pass out because I'm so tired? So, and pass out because I'm so tired? So, if there's metabolic disturbances, if there's metabolic disturbances, um, then it's difficult to sleep.

um, then it's difficult to sleep. thyroid issues, low uh testosterone and thyroid issues, low uh testosterone and estrogen actually can cause a lack of estrogen actually can cause a lack of metabolic energy to allow you to capture metabolic energy to allow you to capture REM REM REM >> there. I might be jumping around a bit, >>

there. I might be jumping around a bit, but I think we're we're establishing the but I think we're we're establishing the hygiene concepts and there's there's hygiene concepts and there's there's maybe other things.

maybe other things. >> Just a question about though when you >> Just a question about though when you say that about energy, you don't mean say that about energy, you don't mean that the person should go to sleep when that the person should go to sleep when they feel fully energized. You're they feel fully energized. You're talking about metabolic energy like talking about metabolic energy like physiologic physiologic physiologic health for the purposes of restoration.

health for the purposes of restoration. It's that but it's also the idea of pure It's that but it's also the idea of pure exhaustion is not what we're looking exhaustion is not what we're looking for. You have to enter into sleep is an for. You have to enter into sleep is an active process.

active process. >> Um so we don't want to be a complete you >> Um so we don't want to be a complete you know exhaustion kind of concept in order know exhaustion kind of concept in order to get there and a lot of times people to get there and a lot of times people think that's what it is or they think if think that's what it is or they think if they're exhausted shouldn't they just be they're exhausted shouldn't they just be able to sleep easily?

able to sleep easily? >> You know that's interesting. I'm not >> You know that's interesting. I'm not sure that I've ever considered that sure that I've ever considered that component, but I have over the years component, but I have over the years said to people who have difficulty said to people who have difficulty sleeping. Part of the reason most of my sleeping. Part of the reason most of my patients and myself will have difficulty patients and myself will have difficulty sleeping will be because of that freight sleeping will be because of that freight train brain, like the brain that just train brain, like the brain that just doesn't shut down. And I've always doesn't shut down. And I've always recommended it's important that you recommended it's important that you exercise during the day so that your exercise during the day so that your physical body can help balance out the physical body can help balance out the brain usage. So you want to use your brain usage. So you want to use your body in a parallel fashion to the way body in a parallel fashion to the way you use your brain. And I always you use your brain. And I always explained how that actually restores explained how that actually restores peace in the brain.

peace in the brain. >> I never thought about it from the way >> I never thought about it from the way you're describing that what it is really you're describing that what it is really doing is preventing the brain from being doing is preventing the brain from being so exhausted that it can't relax.

so exhausted that it can't relax. >> Yeah. And I just I love the uh >> Yeah. And I just I love the uh correlation there to exercise. And we correlation there to exercise. And we absolutely have to make sure we're absolutely have to make sure we're >> exercising in order to Yeah, I think >> exercising in order to Yeah, I think it's a good it's a good >> good analogy or just just truthful that >> good analogy or just just truthful that you have to exhaust your body to some you have to exhaust your body to some degree. We we know again this research degree. We we know again this research is pretty clear. Uh common sense is is pretty clear. Uh common sense is pretty clear if you're exercising you're pretty clear if you're exercising you're going to sleep better.

going to sleep better. >> And that's true. >> And that's true.

Sleep Duration and Naps

>> You know, let's maybe switch and talk a >> You know, let's maybe switch and talk a little bit about u sleep and longevity. little bit about u sleep and longevity.

I mean, how is this affecting like why I mean, how is this affecting like why does it matter? I mean, why is it so does it matter? I mean, why is it so important important important >> and what's the amount of time? How much >> and what's the amount of time? How much should somebody be sleeping?

should somebody be sleeping? >> And I think that let's talk about the >> And I think that let's talk about the time first. That whole 7 to N hour time first. That whole 7 to N hour concept is is pretty consistent in the concept is is

pretty consistent in the research. Um again, pretty consistent research. Um again, pretty consistent from a practical.

from a practical. >> I think anecdotally that would be what >> I think anecdotally that would be what most people report. most people report. >> Sure. And when you're starting to get >> Sure. And when you're starting to get under seven or certainly over nine under seven or certainly over nine there, oh, you know, too much sleep there, oh, you know, too much sleep there's diminishing returns and not there's diminishing returns and not enough is obviously not good. But enough is obviously not good. But everybody's wired a little bit everybody's wired a little bit differently and I think that there's differently and I think that there's always the outlier. So seven to nine is always the outlier. So seven to nine is a good concept to figure the sort of a good concept to figure the sort of center of the bell curve, but there's center of the bell curve, but there's always going to be outliers that maybe always going to be outliers that maybe can get more sleep and they're going to can get more sleep and they're going to be fine. And some people can certainly be fine. And some people can certainly get away with less. But generally get away with less. But generally speaking, you need that seven to nine.

speaking, you need that seven to nine. >> Yeah. And I would uh propose for the >> Yeah. And I would uh propose for the people that feel like they need more people that feel like they need more sleep that it's it's never good to sleep that it's it's never good to oversleep. There is this concept in oversleep. There is this concept in homeopathic medicine where they say you homeopathic medicine where they say you sleep into an aggravation which is so sleep into an aggravation which is so true for any of those like weekend true for any of those like weekend warrior sleepers where they decide I'm warrior sleepers where they decide I'm gonna I I can't imagine gonna I I can't imagine >> can't imagine doing this nowadays but um >> can't imagine doing this nowadays but um even when I was younger I think it was even when I was younger I think it was challenging but you know they say h I challenging but you know they say h I slept in until 9 10 11 they slept in 12 slept in until 9 10 11 they slept in 12 hours I got 14 hours of sleep hours I got 14 hours of sleep >> but you wake up and you're a little >> but you wake up and you're a little groggy and that's because actually groggy and that's because actually you've aggravated the system by sleeping you've aggravated the system by sleeping so many hours consecutively. I always so many hours consecutively. I always tell the patient, I'm like, "Look, get tell the patient, I'm like, "Look, get up, do something in the morning that's up, do something in the morning that's part of your regular routine. Drink some part of your regular routine. Drink some water, move around, get some sort of a water, move around, get some sort of a task done. Even if you take a midm task done. Even if you take a midm morning nap, even if you go back to bed, morning nap, even if you go back to bed, no problem. But don't stay sleeping no problem. But don't stay sleeping those extra hours because those extra those extra hours because those extra hours have been shown to not be hours have been shown to not be restorative." Well, since you said we're restorative." Well, since you said we're talking about extra hours and you just talking about extra hours and you just said naps, um I think naps are important said naps, um I think naps are important to talk about because naps are um again to talk about because naps are um again a little bit a little bit >> delicious.

>> delicious. >> delicious. >> You love naps. >> You love naps. >> I do. I really do. >> I do. I really do. >> Well, what's interesting about that too >> Well, what's interesting about that too from a uh from a cultural standpoint, from a uh from a cultural standpoint, the idea of the siesta and those kind of the idea of the siesta and those kind of things, these have to be considered and things, these have to be considered and they are considered in the research and they are considered in the research and trying to determine is a nap beneficial trying to determine is a nap beneficial or not and what's the length of the nap or not and what's the length of the nap in order to be beneficial. things like in order to be beneficial. things like for your health for cardiovascular like for your health for cardiovascular like take that for an example. Um take that for an example. Um cardiovascular health has actually been cardiovascular health has actually been shown to improve with naps but once you shown to improve with naps but once you get over about an hour there's research get over about an hour there's research to show that it actually is detrimental to show that it actually is detrimental for for for >> cardio. Again you're you're you sleep >> cardio. Again you're you're you sleep into an aggravation. So into an aggravation. So >> it's always about the sweet spot. I mean >> it's always about the sweet spot. I mean that's the thing about we've mentioned that's the thing about we've mentioned this on other episodes. That's the thing this on other episodes. That's the thing about the laws of nature. Um the laws of about the laws of nature. Um the laws of nature are the laws of health and too nature are the laws of health and too much or too little is rarely the right much or too little is rarely the right answer.

answer. answer. >> Yeah. That that balance for sure. And >> Yeah. That that balance for sure. And and there's also there's a cultural and there's also there's a cultural component to that, but the culture of component to that, but the culture of often reflects the geographic often reflects the geographic environment. So you think about places environment. So you think about places that are extremely hot in the middle of that are extremely hot in the middle of the day. It's very common for life to the day. It's very common for life to start early when the sun comes up and start early when the sun comes up and then there's that reprieve in the middle then there's that reprieve in the middle of the day because it's more dangerous of the day because it's more dangerous to be outside because of the heat, to be outside because of the heat, right? So those cultures are going to be right? So those cultures are going to be more prone to napping. And then the more prone to napping. And then the opposite would be true when you have opposite would be true when you have those winter climates. You're not really those winter climates. You're not really napping in the middle of the day because napping in the middle of the day because there's such a short amount of uh there's such a short amount of uh sunlight. So if you're following the sunlight. So if you're following the rhythm of the sun, that's often a really rhythm of the sun, that's often a really good indicator as well of what your good indicator as well of what your sleep should look like.

sleep should look like. >> Yeah. And that's obviously not always >> Yeah. And that's obviously not always practical for people. So should they um practical for people. So should they um if they're in a situation where those if they're in a situation where those things aren't able to be honored, um things aren't able to be honored, um what should they do? Should they map?

what should they do? Should they map? And really the answer is yes. when you And really the answer is yes. when you can try to get it in and even short naps can try to get it in and even short naps can be beneficial. Again, this is a can be beneficial. Again, this is a little bit controversial, at least in my little bit controversial, at least in my research about the research that really research about the research that really short naps sometimes could be argued short naps sometimes could be argued that weren't as good. Too long. I think that weren't as good. Too long. I think no matter what, generally speaking, if no matter what, generally speaking, if you're able to get an extra nap in, it's you're able to get an extra nap in, it's a good idea.

a good idea. >> Yeah. And I think we've mentioned this >> Yeah. And I think we've mentioned this before, but I think one of the things we before, but I think one of the things we want our listeners to really understand want our listeners to really understand is that they need to continuously is that they need to continuously increase their self-awareness. Like increase their self-awareness. Like actually listen to your body, listen to actually listen to your body, listen to the cues. If you're tired in the middle the cues. If you're tired in the middle of the day, like it's it's pretty much of the day, like it's it's pretty much clockwork that at 100 p.m.

clockwork that at 100 p.m. >> I get sleepy. And I don't mean like >> I get sleepy. And I don't mean like pathologic, my lunch was too big sleepy. pathologic, my lunch was too big sleepy.

You know what I mean? Like my entire You know what I mean?

Caffeine, Alcohol, and Blood Sugar

Like my entire system starts to shut down a little bit system starts to shut down a little bit as if my battery pack was removed. And as if my battery pack was removed. And usually it's just a moment of rest. If I usually it's just a moment of rest. If I can take those 20 to 30 minutes to have can take those 20 to 30 minutes to have some genuine rest, that's very some genuine rest, that's very important. What will I often be doing?

important. What will I often be doing? Pushing through that, eating while I Pushing through that, eating while I work, etc. work, etc. >> Or using maybe caffeine >> Or using maybe caffeine >> or use I mean I don't do that, but a lot >> or use I mean I don't do that, but a lot of people do that. And that's that's of people do that. And that's that's ignoring your body body's cues. So, it ignoring your body body's cues. So, it has been one of my goals really since has been one of my goals really since the the the beginning of last year to the the the beginning of last year to become more in tune with my sleep become more in tune with my sleep signals in the middle of the day. I signals in the middle of the day. I don't have the luxury of taking a sleep, don't have the luxury of taking a sleep, but I have been much more respectful of but I have been much more respectful of resting again for those 20 minutes resting

again for those 20 minutes around that 100 p.m. and it has made a around that 100 p.m. and it has made a difference. I've noticed that it keeps difference. I've noticed that it keeps me a lot more alert for the the me a lot more alert for the the afternoon.

afternoon. afternoon. >> So, should someone use uh or let's talk >> So, should someone use uh or let's talk about caffeine. I was kind of trying to about caffeine. I was kind of trying to segue a little bit there in terms of segue a little bit there in terms of what are some you know people ask about what are some you know people ask about that. How does that affect ultimately that. How does that affect ultimately sleep? Um, we're obviously trying to get sleep? Um, we're obviously trying to get energy, but what is it doing ultimately energy, but what is it doing ultimately for sleep? And if there is an excessive for sleep? And if there is an excessive amount of caffeine and particularly amount of caffeine and particularly past, depending on how fast somebody past, depending on how fast somebody metabolizes caffeine, particularly past, metabolizes caffeine, particularly past, you know, 2 3:00, right?

you know, 2 3:00, right? >> For a lot of people, that's going to >> For a lot of people, that's going to ultimately disturb their sleep later on. ultimately disturb their sleep later on.

And that's because of the clearance of And that's because of the clearance of caffeine. It really takes on average caffeine. It really takes on average actually about 12 hours to clear it out.

actually about 12 hours to clear it out. Yeah. Yeah. Yeah. >> Um at least so that idea of using it in >> Um at least so that idea of using it in the morning that is going to be okay for the morning that is going to be okay for even for a lot of people even at even for a lot of people even at lunchtime having tea or whatever I I've lunchtime having tea or whatever I I've certainly learned that about myself. I certainly learned that about myself. I was able to uh when I was younger use was able to uh when I was younger use caffeine tea or something like that at caffeine tea or something like that at lunch but if I did that it would just it lunch but if I did that it would just it would ramp me up too much later on.

would ramp me up too much later on. >> So caffeine in the morning for me works >> So caffeine in the morning for me works good and doesn't seem to disturb my good and doesn't seem to disturb my sleep then ultimately. You know, the sleep then ultimately. You know, the thing with caffeine for me also is that thing with caffeine for me also is that there's several reasons why I don't want there's several reasons why I don't want people relying or even if they're not people relying or even if they're not relying on it, like let's say they're relying on it, like let's say they're not using it because they're like, "Oh, not using it because they're like, "Oh, I need coffee to stay awake." No, I need coffee to stay awake." No, they're just they just have the habit of they're just they just have the habit of having that midday coffee or iced tea having that midday coffee or iced tea because Arizona is like a huge iced tea because Arizona is like a huge iced tea >> culture, right?

>> culture, right? >> Iced tea, fine. But here's the thing >> Iced tea, fine. But here's the thing about the coffee drink that most of about the coffee drink that most of these people are reaching for. They're these people are reaching for. They're also having coffee drinks. They're not also having coffee drinks. They're not sitting there having their little sitting there having their little espresso at the cafe while they people espresso at the cafe while they people watch, you know, they're inhaling their watch, you know, they're inhaling their venti filled with empty calories and venti filled with empty calories and toxic ingredients. And it's so bad for toxic ingredients. And it's so bad for the adrenals. It's so bad for visceral the adrenals. It's so bad for visceral fat. It's so bad for over stimulation.

fat. It's so bad for over stimulation. It's bad for neurotransmitters. So It's bad for neurotransmitters. So there, like with everything, I guess I there, like with everything, I guess I always joke and I say, you know, you always joke and I say, you know, you want to listen to us and get your your want to listen to us and get your your black and white answers, but I just black and white answers, but I just don't live in a black and I just don't don't live in a black and I just don't live in a black and white world. I'm live in a black and white world. I'm thinking about the spectrum of habits.

thinking about the spectrum of habits. And I think if we think about the And I think if we think about the spectrum of habits, then people are spectrum of habits, then people are going to be much more successful in going to be much more successful in finding a routine that works for them. M finding a routine that works for them. M >> so that

afternoon coffee especially if >> so that afternoon coffee especially if it's a mixed coffee drink is one of the it's a mixed coffee drink is one of the number one things hands down I think number one things hands down I think people can do eliminate that even if it people can do eliminate that even if it means start by reducing eliminating that means start by reducing eliminating that to help with their evening sleep to help to help with their evening sleep to help with their belly fat and to help just with their belly fat and to help just normalize hormones.

normalize hormones. >> We went to Vienna. We went to Austria >> We went to Vienna. We went to Austria um 06 was right at the tail end of um 06 was right at the tail end of school for us. What an amazing trip. And school for us. What an amazing trip. And at that time I had only just started at that time I had only just started drinking coffee. I I made it all through drinking coffee. I I made it all through undergrad through really the majority of undergrad through really the majority of of medical school and I just never drank of medical school and I just never drank coffee. I wasn't a coffee drinker.

coffee. I wasn't a coffee drinker. >> I'd have tea for sure. come sort of a >> I'd have tea for sure. come sort of a from a culture of that. But even then, from a culture of that. But even then, it wasn't like I was using the tea for it wasn't like I was using the tea for the caffeine to get through studying and the caffeine to get through studying and all. It just wasn't my thing. I It all. It just wasn't my thing. I It really wasn't until I sort of met you really wasn't until I sort of met you and and some of the other students, some and and some of the other students, some of your other girlfriends within uh of your other girlfriends within uh medical school that I thought, "Oh, medical school that I thought, "Oh, okay. Let me try this coffee thing." okay. Let me try this coffee thing." >> Anyway, by the time we got to the end of >> Anyway, by the time we got to the end of school, we go to Austria and we sat and school, we go to Austria and we sat and and I drank coffee there and it it was and I drank coffee there and it it was sitting and it was relaxed. Correct.

sitting and it was relaxed. Correct. >> And I I just didn't feel jacked up from >> And I I just didn't feel jacked up from it. We were kind of going from cafe to it. We were kind of going from cafe to cafe in the middle of the winter. Uh and cafe in the middle of the winter. Uh and it was just wonderful. And and it could it was just wonderful. And and it could be argued as well, not just the fact be argued as well, not just the fact that it was this relaxing setting, which that it was this relaxing setting, which I think that was a huge part of it. The I think that was a huge part of it. The style of how they you idea of the fast style of how they you idea of the fast concept of coffee there just was largely concept of coffee there just was largely foreign. But the other thing is that it foreign. But the other thing is that it could be how they're producing um the could be how they're producing um the coffee bean and and and over the years coffee bean and and and over the years I've learned that.

I've learned that. >> Yeah. And they weren't giving us mocha >> Yeah. And they weren't giving us mocha lattes. We were having high quality lattes. We were having high quality coffee coffee coffee >> with perhaps some cream.

>> with perhaps some cream. >> And I just so that listeners know when I >> And I just so that listeners know when I say I know from experience I remember I say I know from experience I remember I have a my relationship with coffee and have a my relationship with coffee and tea is much like my relationship with tea is much like my relationship with alcohol. I enjoy the flavors of what I'm alcohol. I enjoy the flavors of what I'm drinking. I'm not really drinking coffee drinking. I'm not really drinking coffee as a pickme up. That's never been my as a pickme up. That's never been my relationship with coffee. In college, I relationship with coffee. In college, I remember I would put so much sugar in my remember I would put so much sugar in my coffee that I'd have to like, you know, coffee that I'd have to like, you know, like stick my tongue to the top like stick my tongue to the top >> and it would be that like delicious >> and it would be that like delicious coffee flavored sugar at the bottom. You coffee flavored sugar at the bottom. You know, you know when you put so much know, you know when you put so much sugar in your coffee it doesn't sugar in your coffee it doesn't dissolve. Like that's that was a that dissolve. Like that's that was a that was a meal.

was a meal. >> That's not mine. and it was so >> That's not mine. and it was so delicious. Well, no, now I can't stand delicious. Well, no, now I can't stand sweetened coffee. But what I did was I sweetened coffee. But what I did was I had awareness. I was like, hm, maybe had awareness. I was like, hm, maybe this isn't that's so good. Maybe this this isn't that's so good. Maybe this isn't a good idea. And little by little, isn't a good idea. And little by little, I taught myself to to enjoy the coffee I taught myself to to enjoy the coffee again without the sugar to the point again

without the sugar to the point that now I don't like it. I do think that now I don't like it. I do think that's part of what made you a fan in that's part of what made you a fan in Austria was that the quality of what you Austria was that the quality of what you were drinking, the taste, and it was were drinking, the taste, and it was just an undeniable experience of just an undeniable experience of pleasure.

pleasure. pleasure. >> And that's what I've done now. I've kind >> And that's what I've done now. I've kind of translated that forward and figured of translated that forward and figured out, you know, my ritual for my morning out, you know, my ritual for my morning cup of coffee, my sort of rocket fuel cup of coffee, my sort of rocket fuel you'd call it, but it's I'm I'm using you'd call it, but it's I'm I'm using Life Boost. Um, encourage everyone to Life Boost. Um, encourage everyone to check that out. It is um uh low acid.

check that out. It is um uh low acid. It's shade grown uh beans, so it's low It's shade grown uh beans, so it's low acid. It's obviously organic. It's uh acid. It's obviously organic. It's uh mold free because it's tested for mold.

mold free because it's tested for mold. Um and just super high quality. and it's Um and just super high quality. and it's dark. I drink it black and I add a dark. I drink it black and I add a little bit of uh cacao. And why? Because little bit of uh cacao. And why? Because >> the cacao actually um balances out some >> the cacao actually um balances out some of the negative jittery effects that of the negative jittery effects that people can get from caffeine. Plus people can get from caffeine. Plus magnesium, which first of all, coffee magnesium, which first of all, coffee has a lot of magnesium in it. Pure cacao has a lot of magnesium in it. Pure cacao does as well. And it just balances out does as well. And it just balances out neurotransmitters better with that, neurotransmitters better with that, let's say, stimulation you're getting let's say, stimulation you're getting out of it. And it's just a more balanced out of it. And it's just a more balanced effect. So it's that and that's you know effect. So it's that and that's you know I do it as a uh as a ritual uh first I do it as a uh as a ritual uh first thing in the morning it's French press thing in the morning it's French press you know it it winds up being for me you know it it winds up being for me really good and I feel like that's a a really good and I feel like that's a a health health health >> well there are health benefit right >> well there are health benefit right that's right there are that's what I was that's right there are that's what I was going to say there's health benefits to going to say there's health benefits to black coffee there really are but you black coffee there really are but you want to be mindful of the quality of the want to be mindful of the quality of the coffee that you're buying and um and I coffee that you're buying and um and I do find that Arabica beans are going to do find that Arabica beans are going to for most people uh be less jittering for most people uh be less jittering >> for most for most people. Um, >> for most for most people. Um, >> you had also mentioned alcohol. Um, and >> you had also mentioned alcohol. Um, and I think it's important. We're obviously I think it's important. We're obviously we're spending some time here on we're spending some time here on caffeine because obviously and coffee caffeine because obviously and coffee and these things because it's so and these things because it's so important to so many people, but that's important to so many people, but that's affecting sleep. The other question is, affecting sleep. The other question is, well, what does alcohol do? Does alcohol well, what does alcohol do? Does alcohol help with your sleep?

help with your sleep? >> And really the answer is no. It can give >> And really the answer is no. It can give you that immediate depressant effect, you that immediate depressant effect, but uh ultimately it's lowering blood but uh ultimately it's lowering blood sugar, which has a whole lot to do with sugar, which has a whole lot to do with disturbing your sleep just in general.

disturbing your sleep just in general. That's the other hygienic kind of That's the other hygienic kind of concept that we'll say to make sure concept that we'll say to make sure blood sugar is not too low in the middle blood sugar is not too low in the middle of the night, right?

of the night, right? >> So, for a lot of patients, we just >> So, for a lot of patients, we just simply tell them to eat fat and protein simply tell them to eat fat and protein right before bed. Keep the carbs down, right before bed. Keep the carbs down, but fat and protein right before bed, but fat and protein right before bed, and that can usually get them past that and that can usually get them past that 1 to 2 a.m. low blood sugar issue. But 1 to 2 a.m. low blood sugar issue. But alcohol just exacerbates that.

alcohol just exacerbates that. >> I just want to pause on that because I >> I just want to pause on that because I

think that's an extremely important think that's an extremely important point for sleep hygiene. One of the main point for sleep hygiene. One of the main reasons why people will have disturbed reasons why people will have disturbed sleep will be because they get low blood sleep will be because they get low blood sugar in the middle of the night. And sugar in the middle of the night. And those people will often find that those people will often find that they're waking up, I would say, between they're waking up, I would say, between 1:30 and 3:30. So, you get sleep 1:30 and 3:30. So, you get sleep disturbance. I always ask the person, do disturbance. I always ask the person, do you sleep through the whole night? Well, you sleep through the whole night? Well, no. I get up to go to the bathroom. And no. I get up to go to the bathroom. And I say, okay, but is the need to get up I say, okay, but is the need to get up to go to the bathroom what is awaking to go to the bathroom what is awaking you? Or do you wake up and then notice you? Or do you wake up and then notice you have to go to the bathroom? If the you have to go to the bathroom? If the need to go to the bathroom is what's need to go to the bathroom is what's awaking you, awakening you, then usually awaking you, awakening you, then usually those people get up, they go to the those people get up, they go to the bathroom, they go in bed, and they fall bathroom, they go in bed, and they fall asleep right back. And it's not a big asleep right back. And it's not a big sleep disturbance.

sleep disturbance. >> It's the other scenario, the scenario >> It's the other scenario, the scenario where you wake up, and then suddenly where you wake up, and then suddenly you're like, "Oh, I have to go to the you're like, "Oh, I have to go to the bathroom." You go to the bathroom, you bathroom." You go to the bathroom, you get back in bed, you can't fall asleep.

get back in bed, you can't fall asleep. So, I think one of the easiest things So, I think one of the easiest things that you can do for yourself, and I for that you can do for yourself, and I for most people this works, is have that most people this works, is have that pre-bedtime snack. So 30 to 60 minutes pre-bedtime snack. So 30 to 60 minutes before bed having as as you were saying before bed having as as you were saying something fat and protein some sort of a something fat and protein some sort of a bololis. Um I like to do especially in bololis. Um I like to do especially in the winter I like to do protein powder the winter I like to do protein powder like a chocolate protein powder with like a chocolate protein powder with some raw milk or a little bit of cream some raw milk or a little bit of cream and some cinnamon which is also a blood and some cinnamon which is also a blood sugar regulator.

sugar regulator. Nutmeg all of those herbs are nervines. Nutmeg all of those herbs are nervines. They help with the relaxation and then They help with the relaxation and then it helps with sleep. If you don't want it helps with sleep. If you don't want anything sweet, uh, bone broth, bone anything sweet, uh, bone broth, bone broth is another great option. You can broth is another great option. You can put a little bit of extra olive oil in put a little bit of extra olive oil in that. You can put some collagen. Um, that. You can put some collagen. Um, collagen and creatine are great for collagen and creatine are great for sleep, too. But anyway, I just wanted to sleep, too. But anyway, I just wanted to make sure we paused on that because make sure we paused on that because that's an extremely useful tidbit for that's an extremely useful tidbit for sleep quality.

sleep quality. >> Yeah, that's definitely a hack. >> Yeah, that's definitely a hack. >> Yeah, that is a hack. Yeah, but you were >> Yeah, that is a hack. Yeah, but you were saying about alcohol saying about alcohol >> does. Well, since you segueed, I got to >> does. Well, since you segueed, I got to segue to your segue and explain what I segue to your segue and explain what I do with my patients. So, I I definitely do with my patients. So, I I definitely have them do peanut butter and butter.

have them do peanut butter and butter. >> Oh, yeah. >> Oh, yeah. >> Peanut butter and butter. Um, and you >> Peanut butter and butter. Um, and you take a tablespoon of each and mix it take a tablespoon of each and mix it together. It's really makes it extra together. It's really makes it extra creamy and you're getting that butter in creamy and you're getting that butter in and all the, you know, short- chain and all the, you know, short- chain fatty acids, all the other benefits of fatty acids, all the other benefits of that that keeps the blood sugar that that keeps the blood sugar regulated. That's what's happening. The regulated. That's what's happening. The blood sugar goes down, then adrenaline blood sugar goes down, then adrenaline kicks in in order to try to bring your kicks in in order to try to bring your blood sugar back up. And so, for blood sugar back up. And so, for patients that are waking up in the patients that are waking up in the middle of the night and they say, "Yes, middle of the night and they say, "Yes, now I have to go to the bathroom." one, now I have to go to the bathroom." one, they're awake, but also the adrenaline they're awake, but also the adrenaline makes you actually want to urinate. It makes you actually want to

urinate. It actually stimulates what's going on actually stimulates what's going on there. Um, and it kind of makes you want there. Um, and it kind of makes you want to pee at that point. So, it's like a to pee at that point. So, it's like a double whammy, double whammy, >> right? And those people are also a >> right? And those people are also a little easier to define because when you little easier to define because when you ask them, do you wake up refreshed? The ask them, do you wake up refreshed? The answer is no. And it seems to be that answer is no. And it seems to be that they're unrefreshed they're unrefreshed regardless of how much sleep they do regardless of how much sleep they do get.

get. get. >> Okay, >> Okay, >> Okay, back to the alcohol. back to the alcohol. >> Mhm. So yes, it's it's not it's it's >> Mhm. So yes, it's it's not it's it's tying we're tying that back into the low tying we're tying that back into the low blood sugar.

blood sugar. >> Correct. Well, that's really one of the >> Correct.

Sleep and Longevity

Well, that's really one of the big reasons why um people wake up. It's big reasons why um people wake up. It's it's really not doing good things to the it's really not doing good things to the blood sugar several hours away from blood sugar several hours away from drinking it. So you get that maybe that drinking it. So you get that maybe that it'll it'll calm you down, it'll it'll calm you down, >> but you're going to pay for it unless >> but you're going to pay for it unless everything's kind of balanced down. And everything's kind of balanced down. And of course, it always comes down to the of course, it always comes down to the amount.

amount. amount. >> Correct. Always. It's the quant >> Correct. Always. It's the quant quantity. quantity. quantity. >> So is sleep helping with our longevity?

>> So is sleep helping with our longevity? Is it helping with um our lifespan or Is it helping with um our lifespan or health span? And you know um we've got a health span? And you know um we've got a note here about the blue zones note here about the blue zones and in the blue zones we definitely know and in the blue zones we definitely know that sleep quality was part of. So what that sleep quality was part of. So what are the blue zones? These areas in the are the blue zones? These areas in the world where there's high concentrations world where there's high concentrations of centarians people who live 100 or of centarians people who live 100 or more and this is scattered throughout uh more and this is scattered throughout uh the world. Um, one interestingly is uh the world. Um, one interestingly is uh right in California, but you know, right in California, but you know, Okanalities and we've talked about this Okanalities and we've talked about this before and definitely you know sleep is before and definitely you know sleep is a key part to what's going on a key part to what's going on having the proper rhythm. I think that's having the proper rhythm. I think that's the other thing too back to what you had the other thing too back to what you had said before just about um rhythms of said before just about um rhythms of what's going on in the environment.

what's going on in the environment. There's just following the followth There's just following the followth rules of nature. rules of nature. >> Yeah.

>> Yeah. >> Yeah. >> Yeah. You know, um it's an interesting >> Yeah. You know, um it's an interesting discussion about sleep when we think discussion about sleep when we think about, well, what are the the real life about, well, what are the the real life and the practical disturbances to and the practical disturbances to people? Is is it a question of the fact people? Is is it a question of the fact that they drank too much or a question that they drank too much or a question of they're not exercising enough? Um of they're not exercising enough? Um they have too much on their mind and and they have too much on their mind and and some of it is just that there's not some of it is just that there's not enough time in the day to do everything enough time in the day to do everything that you need to do. there's uh that you need to do.

Hormones and Cortisol

there's uh limitations and the person will say, limitations and the person will say, "Well, if I wake up earlier, if I wake

"Well, if I wake up earlier, if I wake up an hour earlier, then I can get my up an hour earlier, then I can get my workout in workout in >> or do I stay in bed and sleep a little >> or do I stay in bed and sleep a little bit more?" And that's a that's actually bit more?" And that's a that's actually a very good question. So, how would you a very good question. So, how would you answer that? If you have the patient who answer that? If you have the patient who says, "Okay, the best time for me to says, "Okay, the best time for me to wake the best time for me to work out is wake the best time for me to work out is at 5:00 a.m. So, I have to wake up at at 5:00 a.m. So, I have to wake up at 5:00 a.m., but that means they're only 5:00 a.m., but that means they're only getting 6 to 7 hours of sleep." What getting 6 to 7 hours of sleep." What would you say to that?

would you say to that? I'd say work out. I'd say work out. >> You would say work out. >> You would say work out. >> I would. And then also because they're >> I would. And then also because they're not going to work out well they're not going to work out well they're saying every single day, but most of the saying every single day, but most of the time with workout we're gonna say on time with workout we're gonna say on average is around three times a week. So average is around three times a week. So three times a week that's what they're three times a week that's what they're doing. They're getting far more benefit doing. They're getting far more benefit out of the consistency of that workout out of the consistency of that workout than let's say robbing themselves than let's say robbing themselves >> of that >> of that >> of that. Yeah. here. Since you said >> of that. Yeah. here. Since you said that, you can actually improve your that, you can actually improve your energy with a workout even though you energy with a workout even though you just had low sleep, just had low sleep, >> right?

>> right? >> right? >> So, you can push past that. I I wouldn't >> So, you can push past that. I I wouldn't recommend doing this all the time, but recommend doing this all the time, but the point is that if you're you're like, the point is that if you're you're like, "Wow, I just didn't sleep well. I'm not "Wow, I just didn't sleep well. I'm not I'm not refreshed." Exercise will I'm not refreshed." Exercise will actually help to push that out and and actually help to push that out and and make you more energized.

make you more energized. >> You know, I know people always say that >> You know, I know people always say that and I know the research is very and I know the research is very consistent with that, but I'm I'm going consistent with that, but I'm I'm going to call And I'm going to say to call And I'm going to say that's only true after 3 weeks of really that's only true after 3 weeks of really sticking to it. So the person has to be sticking to it. So the person has to be aware that they're not going to feel nec aware that they're not going to feel nec some might. Some might, but I think a some might. Some might, but I think a lot of people are just not going to feel lot of people are just not going to feel well until after they've had enough well until after they've had enough oomph to get through those first three oomph to get through those first three weeks of adaptation.

weeks of adaptation. >> Yeah. You know, right? There's there's >> Yeah. You know, right? There's there's another what's that? That's not a hack. another what's that? That's not a hack.

We'll call that a cheat code. Okay. You We'll call that a cheat code. Okay. You know, so yeah, you can only cheat code know, so yeah, you can only cheat code so many times with a lot of these so many times with a lot of these things. It makes me think of um and I things. It makes me think of um and I and I think I had done a video on this and I think I had done a video on this on can you out exercise, you know, a on can you out exercise, you know, a really crappy diet, really crappy diet, >> right?

>> right? >> right? >> And really in the end, the answer is no. >> And really in the end, the answer is no. However, I I want to to put a however on However, I I want to to put a however on that.

that. that. >> When it comes to CrossFit, >> When it comes to CrossFit, >> the people who compete in CrossFit, >> the people who compete in CrossFit, >> and I've I've I've watched some >> and I've I've I've watched some documentaries with that. I understand documentaries with that. I understand the way they eat. When they're in the the way they eat. When they're in the middle of their competition, they're middle of their competition, they're eating like eating like >> Meaning quality.

>> Meaning quality. >> Oh, quality. Quantity. You just can't >> Oh, quality. Quantity. You just can't even imagine even imagine >> because they're eating a lot.

>> because they're eating a lot. >> They're eating a lot because they have >> They're eating a lot because they have to. Yeah. to. Yeah. >> And if they didn't, it actually it >> And if they didn't, it actually it wouldn't do well. I mean, they're eating wouldn't do well. I mean, they're eating pizza and Taco Bell like just whatever.

pizza and Taco Bell like just whatever. >> Bodybuilders, right? >> Bodybuilders, right? >> Yeah. To some. Well, a little different >> Yeah. To some. Well, a little different depending on what they're doing if depending on what they're doing if they're trying to, you know, cut for a they're trying to, you know, cut for a for a competition and raise that fat.

for a competition and raise that fat. But, and we're just talking about energy But, and we're just talking about energy expenditure. Can those crossfitters kind expenditure. Can those crossfitters kind of out exercise that crappy diet?

of out exercise that crappy diet? Actually, they can. Actually, they can. >> Okay, fine. But that's not longevity. >> Okay, fine. But that's not longevity.

>> I know. I'm just I'm bringing it up as a >> I know. I'm just I'm bringing it up as a as a cav. I mean, that's actually a as a cav. I mean, that's actually a great topic that perhaps we should write great topic that perhaps we should write down because I think it merits I think down because I think it merits I think it's important for people to understand it's important for people to understand the difference between calorie the difference between calorie deprivation for a specific goal versus deprivation for a specific goal versus calorie deprivation for life calorie deprivation for life >> and also fitness for a specific goal >> and also fitness for a specific goal versus fitness for longevity because let versus fitness for longevity because let me tell you those are two very different me tell you those are two very different types of workouts.

types of workouts. >> Yes. >> Yes. >> Yes. >> But I like your answer about the the >> But I like your answer about the the sleep. Your your point is how many times sleep. Your your point is how many times a week are you depriving yourself of a week are you depriving yourself of that sleep? You're saying three times a that sleep? You're saying three times a week, maybe four. So that's three to week, maybe four. So that's three to four times a week that you're depriving four times a week that you're depriving yourself of sleep. That's a good answer.

yourself of sleep. That's a good answer. I think mine's probably an amalgam. I I think mine's probably an amalgam. I would say that I like your answer and would say that I like your answer and that would be my first comment to the that would be my first comment to the person. My second comment and I take person. My second comment and I take this advice for myself is that if you this advice for myself is that if you are listening to your body are listening to your body really listening not like oh I don't really listening not like oh I don't feel like that's not listening to your feel like that's not listening to your body if you're listening to your body body if you're listening to your body then after some time robbing the sleep then after some time robbing the sleep when your quality of sleep is bad to when your quality of sleep is bad to begin with I think can be detrimental.

begin with I think can be detrimental. So if you have good sleep, if you are a So if you have good sleep, if you are a person who in general sleeps well and person who in general sleeps well and wakes up refreshed, then by all means wakes up refreshed, then by all means wake up and do the exercise for sure wake up and do the exercise for sure three to four times a week. It's the three to four times a week. It's the right answer. If you are a person who right answer. If you are a person who already has bad sleep, then maybe you're already has bad sleep, then maybe you're still waking up to do the exercise, but still waking up to do the exercise, but the the type of exercise has to be the the type of exercise has to be restorative. This is where I would say restorative. This is where I would say then walk or do some yin yoga that I then walk or do some yin yoga that I talk about all the time. do something talk about all the time. do something that's going do deep stretching because that's going do deep stretching because you're still getting in movement and you're still getting in movement and you're still giving yourself the health you're still giving yourself the health benefit of exercise, benefit of exercise, but if you're run down because your but if you're run down because your sleep isn't good and you run empty, sleep isn't good and you run empty, doing a hard workout doesn't doesn't doing a hard workout doesn't doesn't help.

help. help. What do you think? What do you think? >> Balance is usually the key. And I agree >> Balance is usually the key. And I agree with what you're saying there.

with what you're saying there. >> Okay. >> Okay. >> Okay. >> Sold. >> Sold. >> Sold. What else can people do um for their What else can people do um for their sleep? Let's talk about hormones real sleep? Let's talk about hormones real quick quick quick >> please. Ultimately >> please. Ultimately for a lot of people their hormones uh for a lot of people their hormones uh when they are disturbed when they are when they are disturbed when they are low they're having levels of deficiency low they're having levels of deficiency sleep quality gets disturbed sleep quality gets disturbed >> and certainly when it comes to let's >> and certainly when it comes to let's talk about women and menopause um talk about women and menopause um estrogen is just such an important estrogen is just such an important hormone um to focus in on neurochemistry hormone um to focus in on neurochemistry so you can have uh REM sleep, you can so you can have uh REM sleep, you can hold on to sleep and it's just so common hold on to sleep and it's just so common to see it in menopause.

to see it in menopause. So, we'll give estrogen and So, we'll give estrogen and >> progesterone. >> progesterone. >> progesterone. >> Est progesterone is probably one of the >> Est progesterone is probably one of the best stimulates the benzoazipene best stimulates the benzoazipene receptor. It's like a benzo. It's can be receptor. It's like a benzo. It's can be quite potent and hypnotic uh for a lot quite potent and hypnotic uh for a lot of women. So, a little bit of estrogen of women. So, a little bit of estrogen and progesterone can go a long way for and progesterone can go a long way for sleep.

sleep. sleep. >> Yeah. And of course, you know, my number >> Yeah. And of course, you know, my number one thing is get your adrenal function one thing is get your adrenal function test. I think doing a salivary adrenal test. I think doing a salivary adrenal test, which is four readings, often test, which is four readings, often called an adrenal stress index, four called an adrenal stress index, four collections of saliva within a given collections of saliva within a given day, is my favorite way to test it, our day, is my favorite way to test it, our favorite way to test it. It's going to favorite way to test it. It's going to give you a sense of how your cortisol is give you a sense of how your cortisol is being produced because if you are being produced because if you are overproducing cortisol later in the day, overproducing cortisol later in the day, then you are going to have a much harder then you are going to have a much harder chance sleeping well.

chance sleeping well. >> That's usually what we see. Uh the >> That's usually what we see. Uh the overall amount of cortisol is overall amount of cortisol is reasonable. They they they're producing reasonable. They they they're producing it. They're just producing it.

it. They're just producing it. >> It's dysfunctional. >> It's dysfunctional. >> Yeah. >> Yeah. >> Yeah. >> So, it's low in the morning when it >> So, it's low in the morning when it should be high and it's high at night should be high and it's high at night when it should be low.

when it should be low. >> And there's strategies to be able to >> And there's strategies to be able to help with that. Certain herbal help with that. Certain herbal strategies that, you know, I'll give strategies that, you know, I'll give another uh tip hack suggestion here. Um another uh tip hack suggestion here. Um you know, we've been using something you know, we've been using something called cortisol manager for years. um called cortisol manager for years.

Signs of Poor Sleep

um that one of the key things as fossil that one of the key things as fossil title searing some other usual suspects title searing some other usual suspects but magnolia is in it and um when it but magnolia is in it and um when it magnolia is used in a high quality and magnolia is used in a high quality and it's been uh standardized in a it's been uh standardized in a particular way particular way >> it will have a certain potency to it >> it will have a certain potency to it that has a a certain amount of the that has a a certain amount of the active ingredients in it. So whenever active ingredients in it. So whenever we're talking about any of these we're talking about any of these supplements, we're always saying, you supplements, we're always saying, you know, physician grade, high quality, know, physician grade, high quality, standardized, and that's where you're standardized, and that's where you're going to get the medicinal effects.

going to get the medicinal effects. >> So with the magnolia that's in this >> So with the magnolia that's in this

cortisol manager is really, really good.

cortisol manager is really, really good. But we've also come across something But we've also come across something that's even more potent than that. So that's even more potent than that. So the active ingredient within magnolia is the active ingredient within magnolia is called honchio. H O N O K I O L. I called honchio. H O N O K I O L. I believe I'm pronouncing that right.

believe I'm pronouncing that right. >> I like that word because reminds me of >> I like that word because reminds me of something from Hawaii. something from Hawaii.

>> Yeah. Right. Yeah. >> Yeah. Right. Yeah. >> Maybe it is. I mean, >> Maybe it is. I mean, >> yeah. Yes. Anyway, honial um it's a >> yeah. Yes. Anyway, honial um it's a certain hydrayed version of this and certain hydrayed version of this and it's 20 times as potent as magnolia as it's 20 times as potent as magnolia as standardized magnolia which is already standardized magnolia which is already really good. Again, we've been using really good. Again, we've been using that for years.

that for years. >> So, this honchiel has kind of taken >> So, this honchiel has kind of taken things to the next level things to the next level >> um for patients who are really really >> um for patients who are really really needing that. I've personally taken it.

needing that. I've personally taken it. Um it's it's pretty effective. one pill Um it's it's pretty effective. one pill kind of goes a long way uh for really uh kind of goes a long way uh for really uh relaxing you through through sleep. So relaxing you through through sleep. So >> yeah, >> yeah, >> yeah, >> there's a definite uh option for people >> there's a definite uh option for people if they could find it, we certainly if they could find it, we certainly have, have, have, >> right? Because even though I'm making >> right? Because even though I'm making fun of this idea of hacks, I mean, you fun of this idea of hacks, I mean, you know, I'll be the first one to say that know, I'll be the first one to say that a lot of times you need an aid or like, a lot of times you need an aid or like, you know, a band-aid to help get you you know, a band-aid to help get you through the repair. I give the analogy a through the repair. I give the analogy a lot of times like you broke your foot lot of times like you broke your foot and you're not going to use the and you're not going to use the crutches. You know, that doesn't make crutches. You know, that doesn't make any sense. You still need to move any sense. You still need to move around. So around. So >> yeah, you're going to say the crutches >> yeah, you're going to say the crutches aren't natural. You're not supposed to aren't natural. You're not supposed to use crutches.

use crutches. >> The crutches don't fix the bone. Well, >> The crutches don't fix the bone. Well, kind of. I mean, they do because they kind of. I mean, they do because they give the bone an opportunity to rest. So give the bone an opportunity to rest. So this is also true of these products.

this is also true of these products. Even though I'm, you know, cheeky and Even though I'm, you know, cheeky and saying life hacks, whatever. But yes, saying life hacks, whatever. But yes, use the aids that you need them, they're use the aids that you need them, they're not the problem. The problem is using not the problem. The problem is using them in lie of actually addressing the them in lie of actually addressing the the underlying reasons why the person is the underlying reasons why the person is having symptoms or disease in the first having symptoms or disease in the first place, place, place, >> right? like just maybe as simple as poor >> right? like just maybe as simple as poor sleep hygiene. So we're kind of full sleep hygiene. So we're kind of full circle there.

circle there. >> So yes, the aids are there, the >> So yes, the aids are there, the hormones, these things are important hormones, these things are important >> as we always do. Everything is a >> as we always do. Everything is a comprehensive approach on what we do.

comprehensive approach on what we do. Yeah. Um with with everything with a Yeah. Um with with everything with a patient. You just can't you their patient. You just can't you their symptoms, their condition, their being symptoms, their condition, their being is not within a vacuum. It's got all is not within a vacuum. It's got all these other aspects to it and you need these other aspects to it and you need to work with someone that's going to to work with someone that's going to talk about all of those things and put talk about all of those things and put together a

comprehensive plan. Um, I'd together a comprehensive plan. Um, I'd like to say something about that about like to say something about that about um um um the signs and symptoms of low sleep the signs and symptoms of low sleep because I don't think we have it in our because I don't think we have it in our notes and I I want to make sure I notes and I I want to make sure I mention you know people think oh I know mention you know people think oh I know when I don't have enough sleep the when I don't have enough sleep the symptom is I'm sleepy but it could be symptom is I'm sleepy but it could be migraines it could be low back pain it migraines it could be low back pain it could be the other hormones stop working could be the other hormones stop working well it could be um weight gain it could well it could be um weight gain it could be heltosis which is bad bad smelling in be heltosis which is bad bad smelling in the mouth. Um, the mouth. Um, >> indigestion.

>> indigestion. >> indigestion. >> I mean, the list of symptoms that you >> I mean, the list of symptoms that you may not directly be correlating may not directly be correlating >> to your bad sleep is really long.

>> to your bad sleep is really long. >> Yeah. Memory and focus. >> Yeah. Memory and focus. >> Memory and focus, irritability, anxiety. >> Memory and focus, irritability, anxiety.

And this is important because people And this is important because people will say, "Well, I don't sleep well and will say, "Well, I don't sleep well and I have this and I have that." And then I I have this and I have that." And then I would say, "Wait, maybe you have this would say, "Wait, maybe you have this and that because you don't sleep well." and that because you don't sleep well." So that that's important when you're So that that's important when you're thinking about your own health, when thinking about your own health, when you're communicating with your you're communicating with your practitioner to remember that the body practitioner to remember that the body functions as a whole. So you don't functions as a whole. So you don't necessarily need to treat the system necessarily need to treat the system independently if you're not also independently if you're not also treating it as a whole.

treating it as a whole. >> Well said. >> Well said. >> Gracias. >> Gracias. >> Gracias. What else? What else? >> I think that's I think we have covered >> I think that's I think we have covered it. Um it. Um >> yeah, we can have put more stuff in the >> yeah, we can have put more stuff in the notes because I can talk about sleep all notes because I can talk about sleep all day long and the day long and the >> I think that the deliciousness of it. So >> I think that the deliciousness of it. So I don't know about that.

I don't know about that. >> All right. Well, either way, there's >> All right. Well, either way, there's more to be said. There's always more to more to be said.

Recap and Closing

There's always more to be said. I think this was a great great be said. I think this was a great great summary. summary. summary. >> I think we covered >> I think we covered >> um you know, do you want to do your >> um you know, do you want to do your recap? I think you've got some nice recap? I think you've got some nice takeaways here that maybe you can takeaways here that maybe you can summarize and and of course reach out if summarize and and of course reach out if you have more questions.

you have more questions. >> Summary. >> Summary. >> Summary. >> I think um sleep is obviously a >> I think um sleep is obviously a foundation uh for our health, for foundation uh for our health, for overall performance, and certainly for overall performance, and certainly for longevity. you'll live longer if you longevity. you'll live longer if you sleep better.

sleep better. >> Um, yes, you can't uh these supplements >> Um, yes, you can't uh these supplements and these strategies are are helpful. and these strategies are are helpful.

They are aids, but they're only going to They are aids, but they're only going to work uh so well. Um, but little bits of work uh so well. Um, but little bits of uh improvements with your sleep, taking uh improvements with your sleep, taking some of this advice that we're talking some of this advice that we're talking about today, even a little bit if you're about today, even a little bit if you're getting an extra 15, 30, 60 minutes a getting an extra 15, 30, 60

minutes a day, right? That in turn can be helpful.

day, right? That in turn can be helpful. >> Um, and make sure you're just >> Um, and make sure you're just prioritizing it ultimately. and uh nap prioritizing it ultimately. and uh nap whenever you can.

whenever you can. >> I think that's great. I leave you with >> I think that's great. I leave you with one thought, which is if you're having one thought, which is if you're having unsatisfactory or dissatisfactory sleep, unsatisfactory or dissatisfactory sleep, then take a minute to analyze your then take a minute to analyze your habits. What are you doing before bed?

habits. What are you doing before bed? What is your sleep like? And what are What is your sleep like? And what are you doing upon rising? And that will you doing upon rising? And that will give you a lot of information on areas give you a lot of information on areas that you should start to improve.

that you should start to improve. Reference our notes as needed. Well Reference our notes as needed. Well said. said. said. >> All right. Thanks. >> All right. Thanks.

>> Are you liking what you're hearing? Do >> Are you liking what you're hearing? Do you want to hear more? you want to hear more? >> Are you loving this great content? and >> Are you loving this great content? and do you want to ask us a question?

do you want to ask us a question? >> Please like, subscribe, and comment. >> Please like, subscribe, and comment. >> You can find all of our links on our >> You can find all of our links on our social media, featured articles, social media, featured articles, basically everything we cover at Linkree basically everything we cover at Linkree at Longevity Protocol Pod.

at Longevity Protocol Pod. >> And if you want to understand and hear a >> And if you want to understand and hear a little bit more about our personal little bit more about our personal lives, follow us on Instagram at the sex lives, follow us on Instagram at the sex docks.

docks. docks. >> Here's where you can comment and ask >> Here's where you can comment and ask questions that we will directly answer questions that we will directly answer in our videos.

in our videos. >> Be sure to subscribe to our substack. >> Be sure to subscribe to our substack. This is where we get far more This is where we get far more information for you, protocols on information for you, protocols on longevity and health, and definitely the longevity and health, and definitely the notes for today's episode.

notes for today's episode. >> And finally, if you're ready to make a >> And finally, if you're ready to make a change, a real change in your own life, change, a real change in your own life, feel free to check us out at our private feel free to check us out at our private