Think It’s Just About Prescriptions? Let’s Talk About What Really Heal Transcript

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Opening on Medication Awareness

I think was one of the things I'm passionate about is people knowing what meds they're on and why. And the dose, because there's so much loss. There's just so much loss in translation because it's they're not doctors, they're not nurses, they're not medical.

But but it is a language that gets to they get to be familiar with because it's their their health. And I want to implore responsibility that it's your health is your responsibility.

And it is a lot. It is a lot. You won't go through it alone. But but you do you want to know the name of the pill you're putting in your mouth every day?

You want to know what the common side effects are. You want to know not so that you can focus on them psychologically, but so you can be empowered. Welcome to Doctor Talks, the podcast where every episode leads to a healthier you.

Join us as we navigate the world of optimal health, uncovering groundbreaking strategies to conquer chronic disease. In each episode, we'll bring you the latest insights from leading health experts, medical innovators, and wellness warriors.

If you are seeking to transform your health journey, or if you're looking for answers to burning questions, you've come to the right place. Get ready to unlock the secrets of lifelong health and vitality.

This is Doctor Talks, real talk from real doctors on the issues that matter to you most. Hi, today on Truly Healthy MD, we have a special guest, Doctor Khan.

She is a board certified internal medicine doctor at MD just like I am. She has over 16 years of experience. She says her philosophy is simple. She says when your inner world matches your your outer one, everything changes.

She focuses on holistic health, mind, body and soul, and she believes this is a transformation comes from commitment and not shortcuts.

Guest Introduction and Background

When we first met, we had a lot of, comment because I also started out in hospitals all the time. And she's also worked in hospitals watching patients with these preventable conditions diabetes, heart disease, obesity.

And we just we hate to see that continuum continue. And I so, I know personally I find myself in the wellness space functional integrative medicine, lifestyle medicine because of that.

And so I'm so happy to have Doctor, Khan here. She is she's I was born in Southern California, has, Pakistani, roots. She's a first doctor in her family.

She also has a passion for helping others, start when they're young. Her family called her the little grandmother for her caring nature. So I'm super excited about this conversation.

Thank you, Doctor Khan, for being here. Yes. Thank you for having me. What a lovely introduction. This is. Disclaimer the first time I've done this. So, it's a little new for me.

That's for. Well, hopefully you'll feel super comfortable. And I know that our listeners have given us such great feedback about the, you know, they just like hearing from experts that, can tell them really actionable items, really

important things.

My listeners are all interested in lifestyle medicine, integrative functional medicine, and I love that you and I can be the sources of information direct from us to them, at, you know, no cost to them for listening to these podcasts.

So I, I love doing this and educating. And so all of my guests so far have been super comfortable talking about all this stuff. So hopefully you'll be super, happy with it too.

And I'm sure that our listeners will be thrilled to, learn from you. So, I always think interviews go better when we learn more about the person I like.

I said, I know that your internal medicine physician, you worked in hospitals. We have a lot of parallels there. We've also, you know, from what we've seen day after day in internal medicine, we're like, okay, so it has to be there has to be a better way. Right?

So tell me more about, you know, your transition from what they teach us in, internship and residency. That's it's like a pill for every ill sort of mentality to, hey, let's do more lifestyle based.

What what was that transition point in your life where you decide to do that? That's a great question. I think the, the this, the stuff that I was seeing in the hospitals was really bothering me as a hospitalist.

And, as much as I knew I was making a difference in the moments, it got to a point where I was like, I wish people knew so many things sooner and actually started to write down a list called No One Ever Told Me.

And it was like a healthy list of rants where people didn't didn't tell me these things about actually becoming a doctor. So, so so it was like people didn't tell me I was going to be mistaken for anything else than a doctor.

You know that I would be mistaken for the nurse, the respiratory, the therapist, the social worker, like everything. That. Resonates with you too, because in the hospitals it's like a little family environment, a little community.

So, I think I wouldn't really say that I like, shifted majorly in my practice of medicine. I'm still a traditional gold standard, classic internal medicine.

I have a mentor who's who's pretty traditional bread and butter. I'm a traditional internist. I wouldn't align myself with an integrative or functional medicine doctor.

I think I love I love all, all of the, you know, it's like everyone has their own lanes. But I do think that internal medicine and that's what I'm here to actually promote that, classic medicine does work, you know, it it does.

You know, systems may be broken, but, medications work. The way we studied in medical school and the way we practice, it works. And so I'm not really here to to do anything differently.

I say I'm here to promote, what I've learned. But I think communication. And I would just say that what led me to leave a hospital, work environment and to do primary care, which essentially it's just a different work setting.

It's like a different set. Like when you're an actor, it's like whether you work on a farm or in a house, you're kind of, like, still working, right? But the the the what?

From Hospitalist to Primary Care

I'd say I've learned is that my role in the system is actually to, to to educate and empower in a way that people feel seen and heard, like human to human.

And I guess no one ever told me another one's coming up right now. But like, no one ever told okay to be a human first as a doctor and as, like a medical student, a resident and, you know, first year attending second year, it's like

there's almost a little bit of a front you have to put up, and you can't really just say, hey, well, this is my first year as an attending, so I don't remember the exact diet you're supposed to be on for diverticulitis.

Like, let me look it up or, or whatever. Like the the the connection, of it. That's really the side of me that I'm developing, as opposed to, you know, just, you know, just whatever.

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Yeah. And that's so great that, you know, I think we all go through that, those developments, those developmental stages we may not be as aware of as going through.

A lot of us go through. We're like, we feel imposter syndrome or we think of changing careers, but it sounds like you're very self-aware of like where you are in each of those, parts of your life.

That's, it's it's part of becoming a doctor. It takes a very long time for us to, become who we are as physicians and, Absolutely. That's that's part of why we develop into who we are, right?

Yeah. I think the turning point for me was actually a personal development course that I took in 2018. It was pretty intense, but it taught me that I'm way more than my identity as a doctor.

And I appreciate you like acknowledging me for the self-awareness, because that is a huge piece. And I think the more aware I am, the more aware people around me can see themselves.

And so that's a huge a huge piece for patient for doctors and patients, because it's not calling it a coach or a therapist or whatever. Like it's I'm still a medical doctor, but the training, the social, the psychosocial aspects of, being a medical doctor, are things that I'm just learning with experience, with time, with other programs, with books, with podcast research.

And there's certain things that like strike a chord, you know, where, that, that. So yeah, I'll just I don't know. Do you have you ever had those moments where you grew as a physician and like, and and just kind of like, oh, that wasn't part of my medical training, but this is part of my human like existence here.

Yeah. There is so much and there's so much that I continue to learn from peers and mentors. And I have new mentors each year as as I grow, I need new mentors to fill in those things that I the areas in which I need to to grow.

So I, I think it's a continuous, growth thing. As a physician, knowing that you're, you're growing as a human being, I'll always I mean, I learn so much from my patients and not just about medicine, but about being a human being.

It's it's pretty amazing. Yeah. Just very, very cool. Yeah. That's awesome. So you're, And you're doing right now you're you're a retired hospitalist as well.

Yes. I'm a I'm a recovering hospitalist is what I tell people. I try I try not to relapse. I, I have very fond memories of, you know, running codes and, you know, it's it's intense.

It's wonderful to be there when people need you the most there. And they're they're having the worst day of your lives. They were diagnosed with cancer in the front lines.

Were treating people when they're dying. It's it's such a cool feeling to be able to help them. But at the same time, it's extremely taxing as a human being to to be in that day in and day out.

So there's not not all hospitals have very long careers. I know some of them do. My career was just a decade long, but that was, long enough. I do miss it, but I think it taught me so much that I can now bring to, my own, private practice now and, tell people, so much I learned so much from my experiences.

I do feel personally, and as physicians, we do have all this experience that no one else in the world does. And when we bring it back to patients, it's like, okay, I know that.

I don't know anything. I know, I know, I don't know everything. I know, I do know something I'm not, you know, as vast as Google. But my experience will, you know, help us in this journey together.

So I hope it totally. Experience translates. Experience translates into good outcomes and good communication. And you know that saying that by my eye, Andrew, like no one will everyone will forget what you said, but they won't remember how you made.

But they'll remember how you made them feel. They'll forget the words, but they'll remember the feeling. And and that's the same thing with the doctor in a patient.

Like the most valuable relationship out there. I mean, I know mothers and kids and that that's a really important relationship. But the relationship you have with someone when your health is breaking down is it's just it's just built on so much trust.

And I don't take that lightly. I know when I don't know, like you're saying, like I know when I don't know. And I'll ask and then we'll get through it.

Whatever it is, we'll get through it together. But also sometimes that leads to like not working together because it's just not there. And there's no right and wrong for that.

It's just like, okay, this wasn't a good fit. So let's, let's, let's find someone who is a good fit for you. I'll help you with that transitioning and all that.

But at the same time, I kind of just know who I am. And that whole phrase of like, physician, heal thyself. I've been on that journey. I'd say, for for a while now.

And so that's created a lot more openings. I'm building a brand as a social media doctor, and I'm building like a whole persona on who I wish I had when I was dealing with the health conditions or my family was dealing with how like, people don't really there's a lot of mistrust out there.

Building Trust Through Communication

And, I don't know if it's distrust or mistrust, whatever it's called, but it's it's like if you're not like neighbors or family friends or like someone's uncle knows some doctor, like, if it's not a community connection, they probably or if you're not referred by someone who had a great outcome, like it's, it's a it's like a steep road to trust.

And, and I just, I just think that there's so much. How do you, how do you like, how do you build trust with someone in such a short period of time? You know, it's it's trust is built consistency over time.

And so fatigue, brain fog, mood swings, weight gain. If you're a woman in your 40s to 70s, you've probably been told that it's just aging. But what if it's not actually healthy? Empty.com.

We look deeper. Hormones, nervous system health, hidden toxicities. You're not broken. You just need a doctor who really listens. There's a truly healthy, ecom book consultation today.

It's time to feel like a real self-care. Yeah. And it's it's it's hard. It is hard for the general public to, trust, what they hear, because they're going to hear ten different things when they're on Facebook.

They're going to hear something from, you know, their best friend who had one experience, something from somebody else that's probably just trying to sell them something.

But since their marketing is really good, they sound like they're a medical expert when they're not. And then they're

hearing something from a physician that just doesn't line up with what they hear elsewhere.

And it's it's really difficult for people to know what to trust. I think, well, I know that one of, my passions is to bring the trust that the public has, and the whole medical system back.

I'm very happy that Google's out there, that people can self-advocate that there's, you know, a lot of people who are training as health coaches that can assist people in many things, but the medical professions of MDS and use it cannot be replaced. By any number of these things.

We probably do need to, evolve as a medical community to better help our patients in what they're going through right now, all these chronic conditions.

It's not okay that we have so many people that are that are, obese and have diabetes and are dying of loneliness. But I'm just. Yeah, I just post. Yeah, absolutely.

Just it's something that as a medical community, we need to, be aware of and and grow towards that, and not just say, hey, the public has a ton of mistrust.

That's their problem, not mine. No, it's it's both of our problems. We need to grow together. And, you know, as you were saying earlier, you're not a functional doctor.

You're not a great doctor, which is makes you very different from most of the people that are on my podcast. Most of us, we, even though we are very proud of our commercial roots, like, I'm an internist, I will tell everybody, first and foremost, I'm an internist, and then I'm anything else, you know, in the medical field.

But I love it that you are 100% dimensional. And you're like, but I still know that this lifestyle stuff is right. So I love it that you all are, even though you don't think that you're, you know, integrative.

You you are, because you're bringing the lifestyle apart into the into. It's it's what it is. It's it's 5050, right? It's just the nuance ness of words.

It's not anything different. Right? It's just it's just labeling and words and boxes. It's like, you know, those artists that are, you know, singers and they go, oh, well, I can't fit my music in a brand.

There's no gene for me. Sounds like, but I'm classic. I'm traditional, I trust medications, I trust the institutions. You know, the guidelines work. Not that they don't.

You know, unfortunately, there are nuances with big systems like the government, like education, like, you know, every large system politic, the health.

It's not that it doesn't work, it's that it's a system wide, large entity. And, you know, I definitely be and one of the people that are more, on the side of caution, you know, I, I, I do see the value of physicians sharing the risks, but I'm not going to hide the benefits by scaring people with the risks.

For example, my grandma was getting a colonoscopy. She was getting a she was getting a colonoscopy, wasn't it? Was like a screening colonoscopy. But, you know, she just so the GI doctor that was doing her scope, at, you know, they my mom took her and he just the way he was like, you might end up with a colostomy bag.

You know, things may not. There is there are risks with colonoscopy, an absolutely genuine, genuine guy like good, good doctor going through the risks.

But like my grandma had prepped, she's in the gown. She's in the, you know, endoscopy suite, and they can't my mom facetimes me and she says, your grandma doesn't want to do it anymore because she doesn't want to end up with a course.

She doesn't want to end up, she doesn't want to die. And I was like, oh my God, let me just, like, talk to her. And I was like, hey, baby, everything's going to be fine, you know?

And I said, mom, do you think the docs around, I could face time with him? And and she did, and I did. I said, I'm an internist, like, primary care. So I'm in the hospital.

Is that so? Instantly that rapport was established. So it's not even just the rapport that patients need to have with the doctors, but the doctors need to have with the patients, like you were saying that I as soon as I shared, we had a common ground of like, hey, no, we get the dip.

But my grandma, she's just old, she's a worrywart, you know, so you know, and my mom said that when he came back in the room, he was all smiles and he was just like a different person.

And he was like, everything's going to be fine. I've never had a complication. I've been doing this for 20 years. I was like, you with that, you know, lead with, everything's going to be okay.

It's not so much that you're promising someone a good outcome, but you're generally affirming their health and their trust and their belief. And I did a lot of work on affirmations. I did a lot of work.

I do believe that Physician, Heal Thyself is a huge, powerful resource that a lot of docs aren't really tapping into. And it's more of a personal growth thing.

Then it's different for everyone, but but just just leading with that. And my grandma was my she was so happy to do it. She was like, okay, let's get this done.

She was prepped and everything and nothing happened. But when we lead from fear mongering, when we lead from risks, when we lead from this, you know, it's terrible.

It's broken. The energy is pessimistic, it's dragging. It's fear based. It's not like open hearted, health based, like love forward, you know, good outcomes.

Let's let's get this done. We're going to get to see it. And so there's some really crappy diseases to have that happening to really young people, people who don't deserve it.

But there's a lot of crappy things happening all over the world. We just can't. It's not going to be helpful to focus on it. Excellent. And so, so you and I are both, like we said, internists, and we feel very strongly about, having these, pillars of what, patients should be doing exercise, nutrition, social connection.

What would your message be to, other physicians who just haven't found her way yet? And, you know, we get so caught up and learning all the medications, the guidelines that we, we kind of forget to, plug back into, you know, how do we counsel our patients with exercise, nutrition, all this stuff?

What would your, message be to physicians who just haven't found a way to, put those two together in their practice? That's awesome. Thank you for asking that. Yeah, yeah.

It's interesting, the the pillars of wellbeing are the pillars of wellness, whatever we call them, they're actually world recognized by the World Health Organization and by Johns Hopkins.

Lifestyle Medicine and the Pillars of Health

So many reputable organizations, Stanford, everyone, everyone has the pillars of wellbeing, right. Or the pillars of, wellness or whatever it is called.

Absolutely. Gravity optimization. And so it's sleep, exercise, nutrition, social connection and mental health or stress management. The last one, of course, there's a six topic, pillar, which is like avoid risky behavior, you know, risky

behavior, like driving really fast without your seatbelt or not wearing sunscreen or kind of, over drinking and smoking those kind of, like, almost like, just basic kind of the invisible sixth pillar that we don't talk about.

But it's important. Yeah. Be safe. Be safe. But, I would say for physicians to heal thyself and therefore and help heal others, it would be really like a responsible place of when I'm sleeping.

Well, when I have a strong foundation for wellbeing, when I have great sleep, consistency and I turn off the lights and turn off the, you know, when I'm focused on my wellbeing, only then can anyone around me, including your patients, be.

There's no such thing as doctor smoking cigarets. Like, come on, that's just not. It's like a thing. But it's not that they are not helping their patients, it's just that there's some deeper work.

Right? And so they're helping, but also while slowly killing themselves, it's a little bit of, oxymoron or a, paradox, a little hypocritical, you know, how can you tell people don't smoke while you're smoking?

It's very basic. You gotta. Walk the walk sometimes. Yeah, I just it's, I mean, most of the time. Yeah. So if so, I would just say, focusing on the pillars ourselves would be the biggest takeaway.

Sleep is the foundation. Exercise regularly, clean, eat clean mostly plants like doesn't have to be. Everything is eat clean. The social connection which I've recently been doing so much research for my social media, I've learned so much creating content.

I'll just say that I it's it's really fun and I enjoy it so much. But social connection women live longer than men statistically, and I think it's because we're community oriented beings.

We're socially connected as women. We face each other when we talk. Jane Fonda says it so well. She says women face each other when we talk. We ask you, how are you doing?

How are things? How, how, how is how are they? How's work? But man, they generally sit side by side. They sit shoulder to shoulder and they watch something.

They watch sports, they watch cars, they watch women, you know, whatever they watching. But they're outwardly faced instead of facing each other. That's generally generically like, that's not everyone.

But, you know, women live longer. And I think it's because we're social beings, we're all social beings, but women are a little more community oriented and generally, the head of social communities.

And then the last pillar is mental stress or mental health. The stress awareness, which is, I'd arguably say, like exercise is the most powerful longevity drug.

Quoted by Peter is here, doctor Peter is here. Yeah. Exercise, most powerful longevity. Sleep is the foundation. And and then mental health and stress management is the invisible one, right.

You can't tangibly say I slept like I'm. It's the invisible pillar. So it's I'd arguably say it's like, if not more important than exercise. It's equally important as exercise because we don't know what we don't know.

And if a lot of people are asking you, hey, are you stressed? Or like, hey, are you a dog? Are good? And you go, yeah, nothing to be stressed about. Like no one died.

But the more people that are asking you, like everything's feedback. So when you can see yourself and other people, you go, why does everyone keep asking me if I'm stressed or if I'm good or if I'm sleeping?

Well, whatever. It's like, it's it's it's a sign is okay, so how am I really doing it? It takes some bravery and courage to really sit down with oneself to say, am I happy, am I work?

Am I doing the things I want to do? I'm spending the time the way I want to spend it. So even at the beginning of this call, when we were getting ready for when we met each other, we just we kind of like we had a little, intimate connection.

Right? We were kind of just like, talked openly, like, what's been happening, how I'm showing up because we could see ourselves in each other. And so I think that connection between doctor and patient is something so valuable that I've tapped in on.

And I can honestly say my job got easier when I harness that skill. That's that's that's amazing. And the way that, that that I assume you practice with as much as I know in the way that I know that we practice in integrative medicine, trying to bring in more, lifestyle factors and work on those pillars is definitely it has to be the future of medicine.

We can't keep going down the road. We've been going down. And with people getting sicker and sicker each year and life expectancy actually dropping right year after year, we need to to turn a corner and, integrate more of these things into more of conventional, medicine.

And so what what do you do for your practice to, to integrate these pillars and help patients, be healthier? I ask a lot of questions. I ask a lot of questions because I, I've also learned that I don't know what I don't know, especially what's important to somebody else.

Like, if they they don't want to talk about their mental health, if they don't want to talk about, you know, I'm not going to like harp on this is the emotional space you need to be in or whatever.

I ask a lot of questions and I ask what their goals are, what their concerns are. A lot of people, when they come into my office, they go, so, you know, you sit whatever, like, hello, how are, you know, blah, blah, blah.

And then and then and then I read a really interesting, statistic that doctors interrupt patients after. I can't remember the number, but it's a ridiculous short amount of time, like.

Yeah, or like three words or something like that. We're like. It's a short amount of time. So yeah. I've heard it too. I'm like, wait, what? Yeah. So I ask a question like, what brings you in?

Or like, what's what can I do for you today or something? Open ended question. And I let them go and I sit and I'm present. And then I'm not typing on my computer or whatever.

I'm making eye contact. I'm listening. I try to keep a neutral pose in my body because body language is so loud. Doctor Monica, it's so loud, right? You can always tell who someone's being by how they're sitting or what they're doing with their hands or their eyes are.

And so I let them go, and I and I do my best to be as neutral. And then when they pause or they stop, or then I'll keep like reiterating the last few words, which is something I learned in acting class.

If you really want someone to open up, you use their being parallel. It's a negotiation tactic too, but you you you say exactly what they are. So the last few words, what they're saying.

So it sounds like you really want to lose weight. And then they go and then they open up even more and then they go, oh my God. Yeah, I've tried like this is and so it's, it's it's just communication styles and techniques.

So to get my patients on the track they want to be on, I ask a lot of questions. And then I do introduce the framework of I just I call it send some CNS, SM, sleep, exercise, nutrition, social connection and mental health center.

I call I and I do introduce that framework, but only if there's an opening. I don't try to bombard them. I bring it up and when I can see someone's eyes light up, they go, oh, I like that.

I that, like, we can work together in that thing. I ask them to choose one pillar and then make one tangible, one tangible commitment. And like I am committed to blank by blank.

There has to be. It has to be time sensitive. There's to be a Smart goal. I don't know, are you familiar with Smart goals? Yeah, yeah, yeah. So, measurable. Yeah.

Yeah. Specific. Measurable. Attainable. Relative and time specific. Exactly. I knew I knew that I just forgot for the letters. You all good? It's it's one of those ones.

And I maybe set it wrong, but it's just like, it's got to be a specific, tangible, actionable result that we can measure that way. Like, you either slept eight hours a night or you didn't.

You know, it's like you either ate Doritos or you didn't, you know, and not that it's right or wrong, but just so we can learn from our, our game, you know, it's basically a game.

And so we play a game of send them and we calculate the did we lose? Did we win. What do we learn. But it does matter whether you win or you loss. I don't believe that.

Like as a you know, when you're coaching a team, you can always learn but but the results do matter. And the results of our life are the amount of money we have in the bank, the amount of health that we have.

Not in a bad way, where if you have bad health and you're a bad person inside, but in a responsible way, where we're living responsibly, like, was I eating, binge drinking, whatever was I you know, or was I living a good, authentic life?

And this is the result? What am I meant to learn from here? Excellent. And I'm sure that your patients love you and are super satisfied with their care.

Practical Patient Education and Self-Advocacy

Because what's better than a doctor that actually listens to your real concerns and gives you a good, very good framework to work with very actionable items.

So I'm sure you have five stars, but what about your own life? Have you felt, your personal satisfaction with your career? Change after you change the way you practice medicine, going from, you know, you and I were both talking about how we loved being hospitalist, but, it's it's a hard lifestyle and not a hospitalist.

Have the best mental health themselves. It's very stressful. How how have you seen that shift now that you practice medicine differently? Yeah. It's huge.

Like I said, it's like it's from when I'm. When I'm healed, when I'm taking care of myself. Then. Then. Yeah, I think, I think your questions like. And thank you for saying that my patients love me, some love me, some don't, because it's not for everyone.

I've also learned. You have to. You have to be. Yeah. There's I've learned that I'm not for everyone. That's like a total. Absolutely. Yeah. What's there?

You have to be legitimate and you have to, set your boundaries and keep them. And not everybody will like that. But, for the patients that are right for you, let's say.

And not everybody can do it for you. Not not everybody. Right. For your practice. So my best, but, you know, it's the same, right? For your practice. I'm sure they they love having a doctor that they're like, this is somebody that I can I can trust.

She's obviously knows her stuff. She's done her work. She's been in school for many years, work in the hospital,

and she's still, you know, very grounded and tell me these things.

So, I, I'm sure that, any patient would prefer to see you than somebody. Who? The physician that just feels out of control, that they don't overwhelm.

Out of control. Yeah. Their own staring at the computer like. Yeah. And I would say the tools that I use, like the AI scribes, they have those if that's a game changing for progress notes. Oh.

Also another thing I love to do is empower people to create a note on their iPhone. And I know everyone has access to their own records through all the portals that we have, but I recommend we all spend so much time on our phones.

So I like for people to open a note on their phone and call it like, you know, Monica's chart or like, and then, you know, they created date updated. Put your care team who's my PCP, who's my, you know, reproductive endocrinologist, who's my GI doc, who's my last seen.

And then, like you know, the to do list right at the top. And then create a little note in the structure the way you and I are familiar with with which means active medications.

12345 the name, the dose, the duration. What I'm taking it for, I think was one of the things I'm passionate about is people knowing what meds they're on and why.

And the dose because there's so much loss. There's just so much loss in translation because it's they're not doctors, they're not nurses, they're not in medical.

But but it is a language that gets they get to be familiar with because it's their, their health. And I want to implore responsibility that it's your health is your responsibility.

And it is a lot. It is a lot. You won't go through it alone. But but you do. You want to know the name of the pill? You're putting it in your mouth every day.

You want to know what the common side effects are. You want to know not so that you can focus on them psychologically, but so you can be empowered. So I feel like I went off on a tangent.

It it's it was exactly. That's all part of the conversation. Definitely. I think it's, it's it's part of the conversation that we're having. What's a better way for us to practice as physicians, as MDS, as internists.

That's better for patients, that's better for us. That's better for the entire health system. For for our country. Like, what's better than having healthier people in our country, right, that aren't going to be admitted to the hospital every time they have a exacerbation?

Yeah, yeah. And then there's some people that just want to go to the urgent care instead of their PCP. You know, they just want it now, you know, and and that's, that's something that, that, that I have feeling.

Yes. Yeah I, I have that to like do I want to wait you know a week and actually my baby or do I want to just go get what I need especially because I'm a physician.

But there is, there is that that timeliness of like the social media era where we're we want things now, they're that. Instant gorgeous now and, and social media and and and shopping online.

You know, you can same day delivery. It's like what. Yeah. Yeah. I mean, how do you talk with your patients when you're, you know, you're you're you're covering a lot of Texas territory.

And so, what are some of the common, I guess, questions you get as an internist and as an integrative functional medicine doctor? Yeah. It's like something that I have to continue to refine every day with how my patient

population, shifts.

So I, I went into the integrative space in 2019 and, I just like from one day to the next, I just stopped my hospital work and I was like, okay, I'm going to open my clinic.

And so I kind of had to learn on the job. But, it's, it's a lot of understanding what what they need first. And that way I can, frame it in a way that they can understand because, sometimes we think people we have preconceived notions as to what people we think people are coming with, what they think they need from us.

But we need to really, be open to understanding where they're at and how we can help them the best. So it's it's, you know, it's it's different every.

Word you say. What are they the top three things that you feel like, oh, this is the same topic or we're talking about the same thing. Yeah, absolutely.

I, I do, have a lot of structured things that I want my patients to understand. I have, you know, my own webinar series and video of libraries because, video library of videos.

Sorry, I said that backwards because education is super important. And and I have a health coach that works with me with every single patient. Because, yeah, the basic, basic things I would say, the basic things that is affecting everybody's health, no matter who you are, is that we are living in a toxic environment.

We put, you know, self care products ourselves. We're eating pesticides, we're bringing in polluted air and all of that does affect our health. We don't know how to measure it very well in the scientific community just yet.

But being aware of that and that increased, load that our cells have to take on with all the, you know, hormone receptors out there. That is something that I talk about with every patient, too, is making sure that your, gut health is as good as possible because, a lot of people are very aware that have have good diets, but you're not just as good as what you eat, what you put on your plate, you're as good as what you absorb.

And if you have bad gut health and you spent $100 at Whole Foods for a meal and you're not gonna absorb it, that that's super important. So I would say that's number two aspect that I focus in a lot on.

And, number three, all the things that are not pills, I think when people see me as an integrative physician, they think that I'm going to take them off their blood pressure medicine and put them on an herb for that.

And that's that's not what integrative medicine is. It's all the other things that keep you from needing a pill in the first place. All the lifestyle modifications and stress management, everything that's, that's, that's not substituting one pill with another.

I love that I know so much more about herbs, and I did when I was just doing conventional medicine now, and I'd like to offer that to my patients. I have a wider toolbox, but again, not everything's a pill.

I think I would be a failure as an integrative doctor if somebody walked in my office with a handful of pharmaceuticals and walked out with the same number of pills, just over-the-counter stuff.

That's herbs. Right? That's that's that's not what we do. We need to find the root causes of stuff and, how people heal so they don't depend on us and on pills.

Yeah, that makes so much sense. I the first one that you mentioned about, the, the toxic environment that we, we live in that was frightening. You know what my question is?

Do you have to because of that, knowing all those things. And that's how we live in this environment. Do you how do you mitigate that for your own life?

Like what do you do you you know, how do you. Yeah, that's like one of like the main things that I educate all my patients on. I give them examples from my own life because I, you know, I, I had to learn this as, you know, as a person growing up in the 80s and 90s, and we were all eating trans fat, and we had no awareness of the types of things that are still in a lot of our products.

And so telling people about, you know, when it's important to eat organic, clean up the dot org, website and at least being aware of which foods are those that are going to contribute more to your health and not contribute to toxic burden.

You know, don't be eating tuna every day because it's going to have mercury in it, no matter where you get that tuna. Being as, aware of the low hanging fruit, are things that not only I, I feel like have changed my health a lot and have really resolved my, you know, fibromyalgia, chronic fatigue, things that I didn't think would ever go away.

And they've gone away completely. And what. Did they what was the change? Was that what was the change that you made? You know, it was a lot of stuff I had to definitely get, you know, on a better sleep schedule.

Not, but reschedule myself, get more exercise and more self-care. Eat better. But one of the main things was, adding less toxins to my body, making sure that my water was, you know, not not drinking out of, like, hot plastic water bottles, which have all those bpas in them, you know, filtering my water.

Personal Health, Toxic Burden, and Takeaways

I have a reverse osmosis system that I drink out of, making sure that I knew which fruits and vegetables needed to be bought organic and which ones didn't make a big difference.

My cosmetics, making sure they didn't have phthalates and parabens in them. That that those basic things were, I think what made the biggest difference when I was in my own health journey.

Do you follow do you follow someone, like, online that was there a doctor that you trust that you go, okay, this one or a few people that you listen to and learn from?

So I think that's really evolved as I've grown, as a child. My mother is a nutritionist, and she, followed Andrew while. And so we always had, you know, his cookbooks and his, media around when I was a child.

And then when I was 100% conventional, I didn't know anything about functional integrative medicine. I didn't do it. I didn't know who Mark Hyman is, which he's a household name in our in our country.

Right. And as I grow more and more in the integrative space, I learn about so many people. A lot of those people are I've learned about them through doctor talks, who's, you know, helping me put together these, podcasts.

I, meet a ton of people in all the conferences that I go to, my integrative medicine conferences. So I actually have a super long list of people who are my peers.

Who are you know, influencers in a way, which I know influencer sounds like, something that just Gen Z does, but but no, I mean, they are really making an impact on our community.

And people listen to them. They give up a ton of free advice for for free. And there's more and more people out there. I think it would be unfair for me to just name 2 or 3 of them, because there's probably 50 of my peers that that are doing this on a regular basis.

And, part of the reason I'm doing this podcast to to also create content for, for people out there and get the word out, because it's obviously something that I'm very passionate about.

I'm so happy to have doctors like, like you that are also in the same space. So yeah, so much. There's so much content out there. It's it's great to know that people can learn and advocate for themselves.

And we're here to to be on that journey with them and be their partners and not their not to be a paternalistic type of, medical care, which I'm sure is the same way that you practice with your pictures.

You want them to be informed and, and to to know what you're telling them. Yeah. Right. So you were just saying they need to know their medications, so I'm sure we're on the same page as all of that.

And it's always, it's always delightful to to be able to talk to other doctors that are, you know, it's refreshing to know that there are people who consider themselves 100% conventional, but are very that they like you, they understand what lifestyle means in our health.

Because not every doctor has taken a step back to, to to realize that that's what they need to be educate their patients in. And I don't like I said, I don't care if you if it's if that doctor is an integrative doctor or functional or whatever you want to call him, if it's a doctor that's educating the person on how to make themselves healthier, that's the type of doctor that we need right now in this country.

And all the specialists, all the subspecialists, do all their wonderful things with their chemo and surgeries. We need all of them. But we as a as a community, let's say we need to continue to, to grow in both places in the very specific treatment that are very academic and very specialized in how to treat the general population with more of, you know, diabetes and all that stuff.

So I love having people like you on my podcast that help me explain all these things to patients. Thank you so much. Before we leave, I do know that patients like or people who listen to the podcast are like, wow, you guys talked about a lot and I love people to take actionable items away with them before they leave.

So if you want to share just three main things, if you're like, okay, people out there, what are the three things that you can take away from what we talked about today? What would what would the three main things that they could do for their health be?

Oh, I guess three points that I wanted people to go home with after or know listen to after. This is your health is your responsibility. And that's not meant to scare you.

Your health is your responsibility because you're the only one who knows how you're feeling and what you're doing and what you're not doing. So that's one take home point.

And then to find a doctor that you trust, that trusts you, that you guys have a great communication. Because if you don't have trust in communication, that's probably not a good fit.

And then three, exercise is the most powerful longevity drug, you know, get out there and get your body moving. Think about your last decade of life and how you want to be living it.

It's 12:00, okay. And think about how you want to be either lifting a suitcase and putting it at the top of an airplane when you're traveling. If traveling is really important to you, think about how you want to pick up a grandkid.

If that's important to you, you know, think about how you want to live the last decade of your life and start preparing for that now. Because no one beats time.

We're all in age, so might as well like have some great goals. Exercise is the most powerful longevity drug. I love that, I love that, I love how aligned we are.

And we just met today, but I think this is the beginning of a good friendship going forward. Thank you so much for being on the podcast, Doctor Khan, and we'll talk very soon.

Thank you. Nice to see you. Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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