



Dr. Drew Sinatra: Hi, folks. Welcome to a very special episode of **Be HEALTHistic**. Recently, my dad and I did a Facebook Live “Ask the Doctors” event to answer the questions that our audience had about stress and health. We’re sharing that here, so that you can get all the benefits of this valuable information. Let us know what you think about this Q and A by sending us an email at **Podcasts@HealthyDirections.com**. If you like it, we’ll make sure we do more of these, and invite you to ask your questions.

Narrator: Welcome to **Be HEALTHistic**, the podcast that’s more than just health and wellness information — it’s here to help you explore your options across traditional and natural medicine, so that you can make informed decisions for you and your family. This podcast illuminates the whole story about holistic health by providing access to the expertise of Drs. Steve and Drew Sinatra, who together have decades of integrative health experience. **Be HEALTHistic** is powered by our friends at Healthy Directions. Now, let’s join our hosts.

Dr. Drew Sinatra: Hi folks...if you like what you hear today and you want to listen to future conversations on all things integrative and holistic health, subscribe to our podcast at **BeHealthisticPodcast.com**. Also, check out and subscribe to the Healthy Directions YouTube channel, which features video versions of our episodes, plus extra videos you won’t want to miss. Finally, we have more with me, Dr. Drew Sinatra, my dad, Dr. Steve Sinatra, and other health experts at HealthyDirections.com.

Dr. Drew Sinatra: All right, welcome everyone to this live Facebook event with my father and I. It’s the “Ask the Doctors” series, where you submit your questions and we provide some answers for you.

Dr. Drew Sinatra: Today’s topic is going to be all about maintaining a healthy mind, body, and spirit during this unprecedented time. And we’re going to be talking about all sorts of things today from immune health, to cardiovascular health, to certain foods you can eat to help support your immune system during this season. So lots we’re going to be discussing here.

Dr. Drew Sinatra: Now Dad, we’ve had lots of questions about immune health during the winter months coming up. What are your “go-tos” for supporting the immune system?

Dr. Steve Sinatra: Well, if you look at diet, foods, I’m a big proponent of onions. Again, because of the quercetin factor. Quercetin is even in the news these days, it’s incredible. Certainly garlic, remember during World War II, garlic was Russian penicillin. I mean, it kills bacteria, viruses, microbes, even parasites. So I would say choosing foods like avocados, artichoke — artichoke supports liver function. And then a whole host of supplements you can use to support immune function, whether



it's vitamin C, ashwagandha, vitamin D. We've had talks on vitamin D. Omega-3 essential fatty acids. So the list goes on and on, but the key here is less sugar, we're all in agreement about that. Foods to support the immune system, and targeted nutritional supplements to also support the immune system.

Dr. Steve Sinatra: Because I have to tell you, after studying this COVID and the immune system situation over the last, oh my gosh, six or seven months — it looks like that the immune system is a key right here. I mean, let's face it...why are the elderly and compromised people — whether it's cancer, heart disease, neurodegenerative disease — why are these people the first to succumb to viruses? Whether it's a SARS virus, or a Coxsackievirus, or any virus — it's because their immune system is compromised. So the key, going forward, is to support the immune system.

Dr. Drew Sinatra: Yeah. And Dad, I want to echo exactly what you said there, with all the supplements and everything. And I don't want us to forget either about the basics of just immune health, which is proper sleep, right? A clean diet, it's exercising, doing some form of stress reduction practice in your life, because all of these pillars, so to speak, are really going to help support your overall health and your immune health. So, I think sometimes people like to reach for the vitamin C or the vitamin D, but also there's things just right now you can do, which is like, go for a walk in the woods, or making sure you get a good night's sleep to make sure your immune system is primed up and ready to go.

Dr. Steve Sinatra: Yeah, absolutely. You're really big on walking in the woods. I mean, you're a wilderness guy, so that's really good. Drew, another thing I want to mention is that, you know I've been a CoQ10 guy for like 30, almost 40 years. I have to prepare a lecture for the A4M and I have to actually submit my slides this Friday. The literature on Coenzyme Q10 is exploding. I mean, exploding.

Dr. Steve Sinatra: Endothelial cell dysfunction is one of the parameters where the ACE-2 receptor locks in with the virus and blah, blah, blah. But it causes endothelial cell dysfunction, and then all of a sudden, everything breaks down. You get clotting in the lung, and you get clots in the brain, and this and that. But the best supplements, the best supplement, is Coenzyme Q10 in supporting endothelial cell function. I mean, think about that.

Dr. Drew Sinatra: It makes sense.

Dr. Steve Sinatra: I got 40 years of experience in it, and again, while I'm preparing for this lecture, I am amazed. I am absolutely amazed at all the literature and the double blind trials going on Coenzyme Q10, even as we talk right now.



- Dr. Drew Sinatra: Dad, is there an age group that you recommend people start taking CoQ10 at? I'm just curious.
- Dr. Steve Sinatra: Well, I gave it to you as a young child. But I would say from 20 years old and on up. One thing about CoQ10, the younger you are, the more you make of it in the body. It's only when you get into the 80's. I had a discussion with Karl Folkers — I don't know if you know who Karl Folkers was, he was the father of Coenzyme Q10. In fact, I gave him the Infinity Award in front of an audience of 5,000 at the A4M meeting about 20 years ago. Coenzyme Q10 is one of those miracle nutrients that just supports everything in the body. But the problem is as we age, it's not made effectively in the body. I remember talking to Folkers, I couldn't understand why more women had heart failure in the eighth decade of life than men? I couldn't figure it out as a cardiologist.
- Dr. Steve Sinatra: So I asked him and he said to me, we're on the telephone, he goes, "You should know the answer to that question. You're a board certified cardiologist, how dare you? You should know that answer." I said, "Unfortunately, Dr. Folkers, I don't know." You know what he said to me? He said, "A woman's liver does not make Coenzyme Q10 efficiently when she's 80, as opposed to a man's liver. That's why there's more heart failure in women." He spit that out like it was nothing. I said, "Okay, I got it." You know what I mean?
- Dr. Drew Sinatra: Oh, that's amazing. That's great.
- Dr. Steve Sinatra: So anyway, for any women listening who are 80 and above, Coenzyme Q10 is a must for you.
- Dr. Drew Sinatra: Well, this kind of leads into our next question, Dad, which a lot of people are asking about — blood pressure, and how their blood pressure is higher these days because of stress. We know that CoQ10 can have a little bit of a mild effect on lowering blood pressure. What are you recommending for people during these times of high stress and it affecting their blood pressure?
- Dr. Steve Sinatra: Well, the most important thing that I can say is that when you're under stress, your autonomic nervous system is going to discharge a lot of adrenaline, noradrenaline, it's going to cause blood pressure to go up, heart rate possibly to go up. It may create fear and panic, which are very undesirable emotions to have. So going forward, I think the best thing is to have your feelings. In other words, if you're feeling depressed, which a lot of us are because we're indoors, we can't go outside. Now mandates may come in, a national mandate on the mask, or not going to restaurants. It could get worse before it gets better. So my plea to our listeners is whatever emotion you're feeling, just feel it. If it's anger,



get angry. Don't go into rage though, rage is uncontrolled anger. That is not okay.

Dr. Steve Sinatra: But having your anger out...and the opposite of anger is sadness. So I would tell our listeners that if you're depressed, cry it out. Please cry, have your emotions out. It's better having the emotion out, than stifling the emotion and having a stroke or a heart attack. And that's what we're seeing right now during these situations — whether it's war time, or whether it's social unrest, or whatever it is. When unemployment goes up, for example, we get more heart attacks. I mean, more depression. So my plea here is have the emotions out. It's very, very important to experience the emotion. Don't stifle it, because then it can go to the heart or the central nervous system, and that can cause injury.

Dr. Drew Sinatra: Yeah, and I think we'll get into this later, too, Dad, during this show today and that's...you got to work on things in your life that are bringing in lots of stress. Whether it is watching the news and seeing how many new cases there are and all these new mandates that might be put in, it's fear-inducing. And what I've been telling my patients lately is to take a break. Take a break from listening to the media, watching the media, being on Facebook and such, where you're just hearing all this negative stuff, and you're seeing lots of fighting between your friends and such. Spend the time with yourself. If you want to do more self-care, now is the time to do it. I mean, this is the time to really focus on your health like you've never focused on it before.

Dr. Drew Sinatra: Whether that is your mental health, right? Whether it is, sort of, working through the depression or the anxiety that you're feeling, whether it's the extra pounds that you may have put on during coronavirus time, whether it's a condition that you've had, like diabetes or cardiovascular disease, right? I mean, we've been talking about this for the last eight months. There's no better time than now to start working on these things, right? To boost your body up, to put your body in a better state.

Dr. Steve Sinatra: Exactly.

Dr. Drew Sinatra: I interviewed Dr. (Jennifer) Hartstein on Friday for a podcast, and we were talking all about self-care, and how that should not be a selfish thing that people do. If you want to go out and take a walk in the woods with one of your good friends, and tell him exactly how you're feeling about how angry you are, or how depressed you are — do that. That is not a selfish thing, to go out and spend time with yourself and with a friend of yours or whoever it may be, to get stuff off your chest. Like you were saying, because these emotions can be so toxic for your body.



Dr. Steve Sinatra: Absolutely. Drew, the most important thing is telling the truth, and you mentioned it. When you're with a friend, or if you're with a spouse, or if you're communicating with a child, always tell the truth. When you tell a truth, the autonomic nervous system knows it's the truth, and you won't get a blip. In other words, the only people that I know that can defy a lie detector test are psychopaths, who actually believe their own lies. Telling the truth is so important, especially in a pandemic like this. Remember this, life is full of risks. I mean, as a heart specialist, I can tell you that life is full of risks, and we're in a pandemic right now...and I remember talking to Raj Chopra from Tishcon, and he's been indoors for eight months. The reason being, he's compromised with his immune system, and he just had his 80th birthday.

Dr. Steve Sinatra: He's a brilliant pharmacologist, there's no doubt about it. And the reason why he's staying indoors is because he's afraid of getting the virus. Now, the counterpart of that is, he's 80, he has to take care of himself. He knows his comorbidities, he knows where he lies. But again, let's go back five, six decades. Getting outdoors is important, and basically assuming some risk is okay. That's what I want to get to our viewers. You can fortify your immune system, and still take some risks at the same time. Life is full of risks, as a heart specialist, you can take that one to the bank. But again, if you lock yourself up in jail, and wearing a mask all the time, and basically not going anywhere, you're not really living.

Dr. Drew Sinatra: Dad, I think that's the biggest thing I've heard all day. I mean, that's huge right there, what you just said, because I'm so on board with that, because I do feel that too many people are living in fear these days, right? They're letting fear dominate them. You got to live your life, you really have to live your life. I've seen, I've heard all these stories of people that have not left their homes in eight months, and I feel like that's tragic, that's absolutely tragic. You can be very safe by going outside and walking around.

Dr. Drew Sinatra: We'll probably come and circle back around to, kind of, these things we're talking about right now. But I wanted to get to a listener question that's asked all the time, and I've heard you speak about this probably two dozen times in my life — but I always like that you say it again over and over again so that we all remember. And that's about statins, Dad, and when our statins most effective in people. I mean, what age group are we talking about? Are we talking about primary prevention, secondary prevention — let's go over really when statins work the best.

Dr. Steve Sinatra: Well, I wrote the book, *The Great Cholesterol Myth*, with Jonny Bowden, and I spent years writing the book, studying statins with 20 or 30 years beforehand. Remember, I was a choir boy on statins, I used to speak for American Pfizer 25



years ago, I really believed that statins when they first came out. Until I had to do an editorial for a journal, and they asked me to write this editorial, and I looked at statins from both sides — the dangerous side and the supportive side. Here's the bottom line: statins are cholesterol killers, there's no doubt about it. But I don't believe that cholesterol is the prime factor in atherosclerosis, I think sugar is. Sugar is the enemy, cholesterol is not. Now, there's a small particle in cholesterol, we call it LP(a). This is a very, very small particle, it's very inflammatory. It's also thrombogenic, meaning that it causes blood clotting. This particle is really the real cholesterol story. The problem is, is that statins can make it worse because it's a very, very small particle.

Dr. Steve Sinatra: Now, do statins have any play in prevention, or do they have play...suppose you're a 45 year old guy and you've had a heart attack, or suppose you're 50 and you had a family history of sudden death in a young father or a mother. You have a little coronary calcification, you have some risk factors...will a low dose statin help an aging male? Absolutely, absolutely. But it's not for cholesterol lowering, Drew. Remember, statins have pleiotropic effects, they can thin the blood, for example. Look, in this day and age of infections, and EMF, and WiFi, etc., we have red ketchup blood. We got to make our blood thinner. We got to make it more like red wine, so to speak.

Dr. Steve Sinatra: And that's what statins do, it has an antithrombotic effect, a blood thinning effect, and this antioxidant effect. So if you're a young male with coronary artery disease, I like a low dose statin with a lot of Coenzyme Q10, to support the side effects.

Dr. Drew Sinatra: When you're saying low dose, Dad, is that really half a typical dose of Lipitor, or something like that?

Dr. Steve Sinatra: Five to 10 milligrams — not 40 to 80 milligrams, like a lot of my colleagues use. But five to 10 milligrams is more than enough when it comes to a statin.

Dr. Drew Sinatra: The great thing about that is you still get the potential positive effects, but you don't get the amount of side effects as you would with the higher dose.

Dr. Steve Sinatra: Correct, absolutely. Again, always chase with Coenzyme Q10, because remember Coenzyme Q10 shares the same biochemical pathway as cholesterol. So if you have knock out cholesterol, you driving Coenzyme Q10 levels even lower.

Dr. Drew Sinatra: And Dad, with females versus males here — what's the difference there, in terms of statin recommendations?



Dr. Steve Sinatra: I'm not a big fan of statins in females, I've just seen too many side-effects. And there's way more side effects in the female, as opposed to the male. That's why gender-specific medicine, when it comes to cardiovascular disease, is going to be very important within the next decade. But if you're a woman who has progressive coronary artery disease, you've had angioplasty and a stent put in, you had bypass surgery, you had a re-bypass, yet you still have high inflammatory cholesterol — I would use a low dose statin in that situation. Especially if she's going downhill, despite any of the therapeutic maneuvers — a healthy diet, less sugars, more antioxidants, more CoQ10, more Omega-3s — and she's still going downhill, then I would use the low dose statin.

Dr. Drew Sinatra: Great. Dad, have you seen anything else mitigate the effects of muscle pain, or that muscle weakness that people get with statins? Is there anything that you've used before that would help with that? Or do you really just lower the dose and if that doesn't help with it, well then maybe statins just aren't for this person.

Dr. Steve Sinatra: Yeah, I lower the dose, and I certainly give Omega-3s as an anti-inflammatory and magnesium. I found that magnesium helps many of the musculoskeletal side effects that statins pose. It's interesting, most people are deficient in magnesium anyway, so it makes sense. I take magnesium every day, and I'll tell you when I fly fish, or when I'm walking in the surf, or I'm walking the beach for exercise, I always take extra magnesium. And I also like the d-ribose as well, because in my age group, muscle cramping can be problematic. And those two supplements actually ease, not only the vasculature, but the vasospasm and also the muscular spasm you get with either over-exercise, or sometimes simple walking.

Dr. Drew Sinatra: Yeah, okay. Well, let's take some questions here from our audience. This is from Eileen Waits — what are the best vitamins and herbs that you can take for a healthy heart, if you have a pacemaker?

Dr. Steve Sinatra: Well, if you have a pacemaker, that's not going to make much of a difference. I mean, certainly, I like the "awesome foursome" in anybody with any cardiac condition. And just to review, the awesome foursome is d-ribose, Coenzyme Q10, magnesium, and carnitine. Carnitine is something you can take less of. Remember this, there's very few foods that contain carnitine, and the body makes carnitine, our kidneys make carnitine, right? If you eat a lot of lamb, for example, or a lot of beef, you'll probably get sufficient quantities of carnitine. But if you're a vegetarian, you're not going to get the carnitine. Same thing is true of Coenzyme Q10 — vegetarians, characteristically, have lower Coenzyme Q10 levels in their bloodstream, and I've tested this.



Dr. Steve Sinatra: When I was practicing cardiology on a day-to-day basis, seeing 40 to 60 patients a day, and a lot of these patients were on CoQ10. Drew, I tested hundreds and hundreds of their bloods, looking at CoQ10 blood levels. I mean, I was sending these bloods out, and this was like 20 years ago. I have to tell you, I was amazed about how many people had low blood levels of Coenzyme Q10, and when I look at the literature now, showing that more cancers, more heart disease, is being incriminated because of low levels of this precious nutrient. It gets me thinking into my mind that this nutrient needs to be supplemented, especially in this day and age, by just about anyone over the age of 20.

Dr. Drew Sinatra: Got it, got it. Okay, well, here's a question, this is from Asa Rraf. "My family stays quarantined, except to exercise outdoors and purchase groceries, about once a week. Of course, masked. Still my anxiety is pretty high, a little help."

Dr. Steve Sinatra: Well, I think we answered that question.

Dr. Drew Sinatra: We did.

Dr. Steve Sinatra: Again, I think you got to give yourself a little more freedom. You really do. When it comes to social isolation, masks, not getting out of the house. Remember your Achilles' heel on this, is your rigidity. If you become sold on this, and you become very rigid in your ways, and you're following this to the key...you don't want to be self-destructive, while trying to be productive.

Dr. Drew Sinatra: Yeah, and I'll say this too, Dad. If Asa was right in front of me, I would ask her — what is your anxiety about? What is the fear that you're experiencing, is it the fear of getting COVID? Is it the fear of having something happen to your body post-COVID? Is it bringing COVID to another family member of yours, right? Perhaps you've got an older parent or grandparents or something like that. I mean, those are all valid concerns, of course. But like you said, there has to be some level of freedom here in your life, because if you're quarantining yourself, when you're not sick, that to me isn't right. You're supposed to quarantine the ill, that's traditionally how we've done it. We've quarantined the ill.

Dr. Steve Sinatra: Exactly.

Dr. Drew Sinatra: We have not quarantined the healthy ones. So, there comes a time and a place for this, but I see too many people living in fear these days, and staying way too many hours in their home without getting outdoors. I feel like it's not good. It's not good long-term, it's not good short-term, either.



Dr. Steve Sinatra: Drew, let me say it this way. I've been a board-certified cardiologist for almost 50 years, and I've seen epidemics come and go. Flu-like illnesses in my 30's, 40's, 50's, and I'll never forget it...and I mentioned this before on broadcast. When any flu comes into this country...the influenza season, people do die. And influenza can cause myocarditis, which means inflammation of the heart. I have seen people on ventilators, on respirators, on oxygen therapy. I've seen people develop heart failure from these respiratory viruses, and they've been here for decades. Will they get worse? Probably. Probably because there's so many people doing experiments with man-made viruses, and accidents may happen in laboratories, and certainly any of these situations can occur, but viruses are here.

Dr. Steve Sinatra: And if we look at the COVID virus, who's it affecting? It's affecting people in the 80 and above age group. Your immune system is in decline, and all these comorbidities — whether it's heart failure, high blood pressure, diabetes, overweight status, cancer — and the list goes on and on and on. So, social isolation is important for the people who have the more comorbidities, and the aged. This is where the social isolation may offer some protection. Will it offer protection for a 10-year-old child? I don't think so, I don't think so.

Dr. Drew Sinatra: Well, one more thing Dad, before we leave this topic here, because I do feel like it's such an important topic these days is, I would recommend that people look into the Great Barrington Declaration. This was written in early October, by many different Oxford and Harvard and Yale scientists and researchers and PhDs. And our colleague, Dr. David Katz, who we've had on the podcast before, was one of the original signers of this declaration. What it talks about is we need to take a very systematic approach to how we protect the elderly and the immunocompromised, and those that are more susceptible, like you were saying, 80 plus in getting really sick and perhaps dying from this virus. Instead of us shutting down the economy over and over and over again, which is affecting generations ahead of us, right? We focus on certain tactics to help protect those that are most immunocompromised.

Dr. Drew Sinatra: All right, moving on. Now, we're going to take some live questions here from our audience, let's see what we have here. This is from Kathy Lomotan. "Now that I don't have to get up and go into the office, I find myself not moving as much — bed, to office, to kitchen. And the darkness at 5:00 PM doesn't help. Do you have any favorite exercises or activities to keep me strong and healthy?"

Dr. Steve Sinatra: Well, a lot of things you could do on that. I think walking is the best form of exercise. I remember I had Tony Little up at my hospital about 25 years ago, and actually, you met Tony, you know.



Dr. Drew Sinatra: I remember him.

Dr. Steve Sinatra: I took him to the cardiac rehab center, and stuff like that. And he asked me, because he was a big exercise guy and had a lot of machines and weights and stuff like that. But he asked me what the best forms of exercise were, and I said, dancing and walking, hands down. I mean, there's no doubt about it. So I would say, Kathy, turn the music on in your home and do a little dancing, move your hips, move your legs, move your arms. Do little Tai Chi exercises, mold the energy, form the energy, push the energy out, bring it into your heart. There's so many things you can do. And again, if there's young kids in the house and I — I saw a little video you did, dancing with the kids on the little trampoline.

Dr. Drew Sinatra: Get them involved.

Dr. Steve Sinatra: Again, you can turn this pandemic into a reframe and show your kids that you're not in fear, and you're dancing on your trampoline, or you're doing some exercises in the home, or you're going out for a walk. When I was living in Florida, a few weeks ago, people were riding bicycles in my neighborhood like it was crazy. I mean, I've never seen so many bicycles. What a great reframe! Bicycle riding is a great reframe of getting outdoors. But again, that's Florida, Kathy's living in Washington right now, where it's a little bit colder. Again, I'm in new England right now and I'm going out for walks. Although I had to quarantine, because I just came up from Florida. But still, I'm walking around the yard and stuff like that, and raking the leaves, and playing with the cars, and having fun.

Dr. Drew Sinatra: There you go, there you go. And I'll add to that, Kathy, that I've been doing this online yoga program, it's called Glo. I have no affiliation with them or anything, but I found them online and what I like about this program is that you can do yoga, you can do fitness classes, you can do Pilates, they have meditation exercises on there. You can set your time limit, you can even do a five minute, a 10 minute, 15, 20, 30, 45, 60, or even longer minute session. So you get to choose what timeframe you want to use for that, and also what program you want to use, whether it's Pilates or meditation. So I wake up around 7:00 AM and I'll do, typically, like a half an hour yoga or Pilates thing before my kids wake up. And that to me is just great, because you just set the date straight right there, with getting some exercise, moving your body around.

Dr. Drew Sinatra: Then if you've got a five, 10 minute break in the middle of the day, set it up again and do some quick exercises where you work on your shoulders, your neck, your lower body. And I feel like that's just a great way to move your body. Yeah.



Dr. Drew Sinatra: All right, let's take another question here, this is from Paula. "My dad's recovering from COVID right now. I was glad to see her recommended vitamin C and D for him, but she only recommended 2000 IU. I thought that that was too low." Okay, what Paula is saying here is that I'm assuming that her doctor recommended vitamin C and vitamin D, but they were a little bit on the lower end of normal, at 2000 IUs.

Dr. Steve Sinatra: You know, Drew, at least 2000 IUs of vitamin D is something. I would recommend up to 5,000 a day and I don't think people will get into trouble, especially with the winter months coming on. I take 5,000 a day. If you're really concerned about your vitamin D level, if you've been on vitamin D supplementation for a long time, you can certainly get a blood level.

Dr. Drew Sinatra: Yeah, well said. Let's get another question here from our audience, this is from Jeff. "I'm finding myself stress eating more than ever during the pandemic, and I'm worried about putting back on unhealthy weight. Any thoughts on what I should eat that is healthy and maybe lower my stress levels?"

Dr. Steve Sinatra: Well, I would tell Jeff, again, more fruits and vegetables. Certainly any vegetable at this time would be good. Remember, a lot of these vegetables have phytochemicals, or phytonutrients in them that help fight viruses. Again, we talked about onions and garlic. Avocados, I think, are fantastic. Artichokes for the liver. I mean, these are things that I tend to eat every day, and I think it's really important. The worst thing that I think people are putting into their mouths right now is sugar. These carbohydrates, dense carbohydrate meals...you know, carbohydrates are transferred to sugar. And remember, if the sugar is not metabolized efficiently, if you're locked indoors, if you can't...see, if you're outside, if you have a high carbohydrate meal and if you go for a walk, right? That exercise of a walk is going to...when that sugar is converted with insulin, it gets driven into the cell, because the exercise helps the insulin drive the sugar into the cell.

Dr. Steve Sinatra: But if you're stuck at home and you're not doing anything, you're sort of a zombie, and you're going from bed to chair, or going to the TV, you're reading a book. You're not exercising, so you're not driving the insulin into that cell, or that sugar into that cell, and what happens is the excess calories are not burned because you're not exercising. Guess what happens, they're stored as fat. So I would tell Jeff, less sugar, a little more exercise, a little more healthier eating, less carbohydrate.

Dr. Drew Sinatra: Yeah. And if there was one particular diet that I'd recommend, Dad, it'd be something like a Paleo-type diet to Jeff, because I feel like in times like this, higher protein can be a little bit more helpful. Not only in the sense of it'll help



satiate you and get you full, but also because when you have protein, it supports your adrenal glands and your whole HPA function, sorry...HPA axis function. And when you do that, you're going to support your blood sugars even better, too, because your adrenals are inherently involved in blood sugar regulation. So I do recommend during these times to kind of reach for a little bit of a higher protein food. I mean, if you're into meat, you can do that. Of course, there's certain snacks you can make that have high protein in them. And stay away from the really higher carbohydrate, higher sugar foods, which are ultimately, like my Dad said, going to lead to more insulin production and weight gain and all that. So, higher protein, medium fat, lower carb. Yeah.

Dr. Drew Sinatra: Okay, let's see if we have another question here from our audience. This is from Corrine. "Please, what's the best thing for ARVD cardiomyopathy? Here in London, the cardiologists are not helping."

Dr. Steve Sinatra: ARVD. I'm trying to think what...ARVD cardiomyopathy...

Dr. Drew Sinatra: I'm going to look that one up, Dad.

Dr. Steve Sinatra: That's an acronym I haven't heard before.

Dr. Drew Sinatra: A rare form of cardiomyopathy in which the heart muscle of the right ventricle is replaced by fat or by fibrous tissue. It's arrhythmogenic right ventricular dysplasia.

Dr. Steve Sinatra: Boy, I'll tell you, I have never seen that before as a heart specialist. But I'm sure it happens, it's probably very rare. Again, things that I would use in any type of cardiomyopathy would be the "awesome foursome," including ribose, magnesium, CoQ10, a low dose carnitine. I just feel in any muscle where you have the muscle involved of the heart...remember this, Drew, the awesome foursome is driving our stem cells in a preferential direction, I firmly believe this. It's come out of the stem cell revolution, because I've had so many patients with "dead hearts" from massive heart attacks, even my pediatric population. Drew, I've had patients come in with their children, crying in my office, and they can't find heart transplants for their children. I tell you, I've had so many saves.

Dr. Steve Sinatra: And if people dispute this, they can always go to Amazon.com and look up my book on metabolic cardiology, and look at the testimonials from all these people who had heart failure, and people looking for hearts, where they couldn't find a heart. But they went on the awesome foursome, and they had a resurrection in their life. This gives me great joy, because something is working here and I believe it's through the exosomes, the messages of the body, they're talking to our intrinsic stem cells and are actually resurrecting new heart cells. And that



came out of the nuclear testing of the atomic bombs, where we can tell the age through carbon-14 testing, the age of our cells.

Dr. Steve Sinatra: Remember, we replace our mucus membranes in our nose every two to three days, our GI tract every 24 to 72 hours, our red blood cells are replaced every 120 days. So why can't we replace heart cells? We can, we can. We replace liver cells, we replace them all. All people have to do is basically believe...first of all, make sure that belief is up here, and support your body with good nutritional supports and a healthy diet going forward.

Dr. Drew Sinatra: Well, Dad, I didn't know about that potential to increase the body's own production of stem cells there, or at least push them in that direction, that's great.

Dr. Steve Sinatra: Read the article in *Science*; it was in 2009 about stem cell renewal. When *The New England Journal* came out with an editorial on this and it was favorable, I was absolutely shocked, because usually *The New England Journal* is a very, very conservative. When the editorial was favorable, then the same group of researchers out of Sweden recapitulated their data in a 2018 publication, which came out like nine years later, which documented what they first reproduced nine years before. So, I think the awesome foursome is rejuvenating our own intrinsic stem cells to build new tissue into our heart cells.

Dr. Drew Sinatra: Okay, okay. All right, let's take another question here from our audience. This is from Nisha. "What can you do to keep cholesterol at bay when you're breastfeeding?"

Dr. Steve Sinatra: Interesting, interesting question. First of all, I don't mind young children getting cholesterol, cholesterol does a lot of good things for the body. So if she's worried about transferring in the mother's milk...mother's milk has a lot good stuff to it. I like mother's milk — but remember the mother, if she is going to breastfeed, needs to detoxify her body. Because what's good in mother's milk is equally as bad, because a lot of toxins that the mother takes in can be concentrated in breast milk, as well. So breast milk can be a double-edged sword — but if the mother does some detoxification prior to breastfeeding her body, at least the breast milk will be, certainly, even much, much better than it normally is.

Dr. Drew Sinatra: Got it, got it, okay. All right, let's see here for another question. This is from Elaine. "What is the maximum of CoQ10 one can take? For me, CoQ10 has been paradise. I take 300 milligrams and adding pomegranate extract brought my high blood pressure to equilibrium." So what do you think, Dad, about that in terms of CoQ10 as a high dose?



Dr. Steve Sinatra: Yeah, I mean, 300 milligrams is a good dose. I take about 200 milligrams a day, I don't have any high blood pressure or any illnesses that I know about, but just because of my age, I take 200 milligrams. 300 milligrams is fine, and the research on CoQ10 and high blood pressure is still solid. And I do like pomegranate, pomegranate is an interesting nutraceutical. It can prevent the oxidation of LDL. You can get a little plaque regression with pomegranate, I've seen that. I'm a big fan of pomegranate, and I take it myself sometimes. I also like beet juice, I'm a big fan of beet juice because of the nitric oxide.

Dr. Drew Sinatra: Nitric oxide, yeah. Well, Dad, the season right now for pomegranates is in. So those of you listening that you want to eat some pomegranates, go out and buy some because they're delicious this year, let me tell you. Well, basically every single night we open up a pomegranate, and our kids, they take their shirts off and we go to the dinner table, and we all eat pomegranate for about half an hour, it's awesome.

Dr. Drew Sinatra: Okay, this is from John Murphy. What do you think of nitric oxide supplements? Well, there we go, leading in.

Dr. Steve Sinatra: That's moving in. We should tell our audience that this is totally by chance, by the way. You can take nitric oxide supplements. You can get nitric oxide in a lot of natural foods, even migratory salmon can support nitric oxide. Even astaxanthin, which is an incredible antioxidant. But nitric oxide, you can get naturally in the diet. And if you want to eat a lot of beets, that's fine with me. Foods that contain nitric oxide, that are broken down to the nitric oxide, I'm all in. Remember this, now, there's no panaceas in medicine. Years ago, there were some articles that came out where people were going against nitric oxide. I mean, that's the way it is in medicine. It's not a panacea, some of my colleagues feel like overzealous use of nitric oxide could have a downside. But again, for now, if you want to take a little nitric oxide supplements, or get it naturally from foods, that's okay with me.

Dr. Drew Sinatra: Got it. And Dad, I remembered the question I was going to ask you. It was referenced to that CoQ10 question previously, was that I remember studies back on CoQ10 and Parkinson's being around, is it 600 milligrams or 1200 milligrams per day?

Dr. Steve Sinatra: Higher, yeah. Actually, they were using it in Huntington's chorea, they were using up to two grams of CoQ10. But in Parkinson's, yeah, CoQ10...in fact, there is a paper I just came across it as I'm preparing this lecture for the A4M, there was a nice paper on CoQ10 and Parkinson's disease. Any neurodegenerative disease, I would certainly take CoQ10 — and if you want to go higher doses, 300, 500 milligrams, 600, certainly you can go higher.



Dr. Drew Sinatra: Okay. All right, let's post another question here from our audience. This is from Kathy. "Ever since we turned back the clock and it's getting dark so much earlier now, I'm starting to experience SAD, which is seasonal affective disorder. And the pandemic situation isn't helping. What do you recommend to help combat this?"

Dr. Steve Sinatra: Well, Kathy, you can always go to the hot lights of yesteryear. The bright lights that you can bring in to your house, these are natural lighting where you can look into a light for basically a half hour or so, while you're working on the computer, you can have a light shine on your face. I have a light here, but it just went on the blink. My video lighting, I don't know why, but maybe I can show it in the picture here, if I bring it down. It's a ring. You see that?

Dr. Drew Sinatra: Yeah, I can see that.

Dr. Steve Sinatra: Maybe I can turn it. Basically, this is my media light, and it just went on the blink. But whenever I'm doing media and this light is on my face, I always say to myself, "Oh, I'm getting nice light energy, I'm taking it in through the eyes." And some people...think about sun gazing, for example. Now, Kathy, what you can do is if you can go out for a walk, as the sun is going down, you can just open your eyes and look into the sunlight as it's going down, for only 30 seconds to a minute as the sun's going down. That's sun gazing, and you're going to get some natural light that I think, even though it's a short term, will help to ameliorate SAD. So I'm all in on that.

Dr. Drew Sinatra: Exactly. And Kathy, if you can see mine here, I've got my little happy light. Let's see if I can bring it into view.

Dr. Steve Sinatra: Oh, it's a happy light. That's the right...keep coming, Drew. I can't see it.

Dr. Drew Sinatra: You can see it, there it is.

Dr. Steve Sinatra: Happy light, that's what it is.

Dr. Drew Sinatra: Very bright, but I have it on right now, and I do this every single day for at least a half an hour, sometimes upwards of an hour.

Dr. Steve Sinatra: Well, Drew, where are you're living right now, what time is it getting dark, about 4:00 PM?

Dr. Drew Sinatra: Too early, yes, it gets dark a little too early these days. It's around 4:30. I'm certainly susceptible to getting SAD in the wintertime and I've been using this. I take high dose vitamin D — and for me, I'm currently taking 10,000 units a day,



but I am measuring my vitamin D making sure that my calcium levels aren't too high. And I do live in a very, very, very rainy area right now, which is in the Vancouver Canada area. So 10,000 units per day is okay, for me, at this point.

Dr. Steve Sinatra: I'm glad you mentioned that. What are the some of the contraindications for taking very high dose vitamin D? Certainly renal insufficiency, renal failure. So if our listeners have kidney disease, be careful, talk to your doctor. And the other is, it's rare, but hyperparathyroidism. In other words, if you have an overactive hyperparathyroid gland, where you can drive up that calcium —because my wife Jane had that. She had a small adenoma and we...

Dr. Drew Sinatra: I remember that.

Dr. Steve Sinatra: ...went to the Tampa hospital and get it resected. So if you have high calcium from any cause, certainly like a tumor, you don't want to take high dose vitamin D at the same time.

Dr. Drew Sinatra: It's really a seasonal thing, too, for me. I'm not going to take this high of a dose during the spring, summer and fall, but it's really the winter months that I will take this high of a dose.

Dr. Drew Sinatra: Now also for SAD, Dad, what I like to recommend to people is that they get outside and get out into nature, whatever kind of exposure they can get. Even if it's raining out — like for instance yesterday, pouring down rain, absolutely just pouring down rain. Our whole family went out to this little lake around us and we walked around it and got completely soaked, but for that hour long period, we were outdoors and it felt great to breathe some fresh air and to feel the rain against your face. And getting outside, even when it is snowing or raining or it's just not great weather out, is really helpful for helping with SAD.

Dr. Drew Sinatra: Kathy, of course you probably know this, but exercise has been shown to really boost the mood, right? You can sort of boost certain neurotransmitters that way, and you can really feel good afterward. Those are like those endorphins that you get after exercise that make you feel good. So whether it's going to be exercise in your home or outside, I recommend doing it on a daily basis to help with that endorphin release and your good mood.

Dr. Drew Sinatra: And then healthy eating...I mean, this goes back to everything we've been talking about today. It's healthy sleep, it's healthy eating, it's balancing out the amount of media that you're watching, or these emotions that you may be experiencing right now, whether it is anxiety or fear or anger. So everything that we talked about today actually goes into this question here, because you need



to be supporting all systems in the body when treating seasonal affective disorder.

Dr. Drew Sinatra: We talked about the vitamin D, the lights — those all matter of course, but really it's everything that you're doing that's going to help with this, as well.

Dr. Steve Sinatra: Hey, Drew, you just touched up on something that I think is important. Remember when you were 10 years old and we took a canoe trip from the tip of the Connecticut river up into Canada, and we canoed down the Connecticut River, and we fished at various parts on the Connecticut River, and you caught that huge fish in Vermont, and stuff like that. I think...you are an outdoorsman, there's no doubt about it. You've done wilderness trainings, you've lived outdoors, you've done sweat lodges with the great-grandson of Sitting Bull, Walking Bull. I mean, you've done all this stuff and you're such a blessing, not only to me, because I think as a dad I took you outdoors a lot — but you're doing it with your children. To bring your children into the rain, and to show them that there's nothing wrong with the rain, you know what I mean? You're outdoors...and that is good parenting, because remember, children will follow what you do.

Dr. Drew Sinatra: Yeah.

Dr. Steve Sinatra: Since you've taken them outdoors, and you're taking them fishing, and you're taking them camping, and you're not afraid of the rain, and stuff like that. Your children are going to grow up with that inculcation of the information that you transferred to them, because you did it, and now they are going to do it, and they're going to do it for their children, as well. So good job, son.

Dr. Drew Sinatra: That's touching, Dad, it's touching as you say that. Look, you'd be even more proud, guess what we did about four or five days ago? We went up to Whistler when it was snowing, and I took the kids sledding!

Dr. Steve Sinatra: That's great.

Dr. Drew Sinatra: I mean, as a kid that's all I did, I sledded in Vermont all the time. I actually got on the sled and went down, and I realized I'm 40 years old, so it's a little different now. But anyhow, thanks for that.

Dr. Drew Sinatra: Well, let's see why don't we take a couple more questions here, and let's see where we're at here. This is from Rania. "What should I do if CoQ10 gives me anxiety?"



Dr. Steve Sinatra: Oh, great question. Take less of it, Rania. Just take less. In other words, remember this, CoQ10 is an energy supporting phytonutrient. And what I found in my practice of cardiology is some patients couldn't take a standard 30 or 60 or 100 milligram dose, it was too much for them. In other words, why don't you build up your CoQ10 blood level by eating more migratory salmon, for example, or more sardines, which are loaded with CoQ10. Or more animal product, like beef, for example, or free-range bison, or something like that. Because what I found is people who had low levels of CoQ10, and I gave them a standard dose of CoQ10, some would get palpitations, some would have too much energy, some couldn't sleep, some would be jittery.

Dr. Steve Sinatra: So your question is well-placed — just take maybe a 10 milligram dose if you can find it, or just eat foods that have a lot of CoQ10. I remember treating a rabbi 30 years ago, he was only 90 pounds and he had severe cardiomyopathy. I could not give him a standard 30 milligram dose, because he was telling me, "Doctor, doctor, I'm jittery. I'm jittery, I can't sleep. blah, blah, blah." I treated him with Nova Scotia lox, and he was awesome. After six months, where his wife fed him a diet more endowed with Coenzyme Q10, I was able to put them on a supplement, and he felt so much better and he didn't have the side effects of CoQ10. So, thanks for asking that question, because it's not only you, it happens to about 3% of the population taking CoQ10.

Dr. Drew Sinatra: I wonder too, Dad, what if she were to take some magnesium, or maybe some l-theanine, some GABA, some CBD, perhaps, to help with that anxiety. I don't know if that would help?

Dr. Steve Sinatra: Any of that would help. Any of that...

Dr. Drew Sinatra: Do a little testing on your own, we'll say that. Okay, let's do one more question here from our audience. This is from Carol. "Can 10,000 units of vitamin D raise your coronary calcium?"

Dr. Steve Sinatra: Great question. At that level, if you are taking in a lot of extra calcium at the same time, remember, the recommendations of doctors of yesteryear was that if you were a post-menopausal woman, you need about 1500 milligrams of calcium, if you were premenopausal, it was 1000. That was old science folks, that's old science...you don't need that much calcium. So if you're a woman of yesteryear taking in a lot of calcium, and now you're a doubling down or tripling down on vitamin D — yes, I have a feeling coronary calcification of the smaller vessels in your heart could be problematic. So when it comes to calcium, less is more. You have to keep up with the science, and that was the science of five to 10 years ago, but it's not the science of today.



- Dr. Drew Sinatra: Dad, sorry, one more question here about CoQ10, while we're on the subject, and it's from Ian. "I have read CoQ10 is difficult to absorb, any tips on getting more into your cells?"
- Dr. Steve Sinatra: The secret with CoQ10 is you take it with a meal, and allegedly the fat-soluble meals are good. In other words, you could take CoQ10 with olive oil, for example. I have a lot of my colleagues who take CoQ10 with a couple of tablespoons of olive oil because of the PREDIMED study, showing that olive oil help us to improve longevity, reduce heart disease, reduce cancer, reduce Parkinson's disease, reduce diabetes, etc. So I just feel that when it comes to Coenzyme Q10, the ubiquinone/ubiquinol is a no-brainer. Either, or is fine. Start with smaller doses, you can take in more fat to see if you can improve the blood level. And then always go on and how you're feeling, and if you're in doubt, you can always get a blood level and see where you lie.
- Dr. Drew Sinatra: Okay, okay.
- Dr. Steve Sinatra: Remember, the normal blood level is 0.6 UGs to about 0.8 UGs per ML. When it comes to heart failure, I like two and a half. At least two and a half, which could be four to five times blood level.
- Dr. Drew Sinatra: How long does it take for blood levels to rise?
- Dr. Steve Sinatra: Three weeks.
- Dr. Drew Sinatra: Three weeks.
- Dr. Steve Sinatra: Yeah, minimum of three weeks. After three to four weeks, you can get a blood level and see where you lie.
- Dr. Drew Sinatra: Great, okay. Well, Dad, this has just been an awesome "Ask the Doctors" series here. I had a lot of fun today. Did you?
- Dr. Steve Sinatra: Oh yeah, this is great. Like I said, I love talking about CoQ10, and again, we're doing this textbook in cardiology that's coming out in 2022. Like I said, at the beginning of the show, these CoQ10 articles are flooding the literature right now. It's just amazing.
- Dr. Drew Sinatra: That's great, that's great. Well, thank you so much, everyone, for tuning in today, we loved all your questions and we look forward to doing this again.
- Dr. Drew Sinatra: That's our show for today, folks. If you have a question or an idea for a show topic, please send us an email or share a post with us on Facebook. Remember,



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Dr. Drew Sinatra: I'm Dr. Drew Sinatra, and this is **Be HEALTHistic**.

Narrator: Thanks for listening to **Be HEALTHistic**, powered by our friends at Healthy Directions, with Drs. Drew and Steve Sinatra. See you next time.