



- Dr. Drew Sinatra: Every day, we make decisions that impact our health. How do you know if you are making the right decision? Are you shortchanging your health?
- Dr. Steve Sinatra: Today, we'll go over three areas you need to focus on for optimal health. We'll talk about the best foods to eat, but also how diet alone can't provide all the nutrients you need — and where you can get them.
- Dr. Drew Sinatra: We'll discuss the balance of mind, body, and spirit. What kind of self-care do you need every day to be balanced?
- Dr. Steve Sinatra: Finally, we'll get into what you need to know when you go to your doctor. What health tests and screenings are most important? How do you ask for the right thing?
- Dr. Drew Sinatra: All this and more on today's **Be HEALTHistic**.
- 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. And finally, we have more with me, Dr. Drew Sinatra, my dad, Dr. Steve Sinatra, and other health experts at [HealthyDirections.com](http://HealthyDirections.com).
- Dr. Drew Sinatra: Hello everyone, welcome to another episode of **Be HEALTHistic**. Today on the show, my dad and I are going to discuss a topic that's especially important to address right now. Are you shortchanging your health? Are you missing out on opportunities to be as healthy as you can, because you're not making the right lifestyle choices that can optimize your health? Let's dig in and talk about it.
- Dr. Drew Sinatra: My dad and co-host, Dr. Stephen Sinatra, joins me today. Welcome to the show, Dad.
- Dr. Steve Sinatra: Hey, it's good to be here, Drew.



Dr. Drew Sinatra: Well today's going to be all about lifestyle medicine. Things that people can do that are free, at your home — you don't have to spend lots of money to do these things — that can make a huge difference in their health. And I can tell you as an integrative doc, someone who practices functional medicine, naturopathic medicine, I could not practice medicine without what we'll be discussing today, which is lifestyle medicine. It's an integral part of what I do. And I feel like if there's any doctors or practitioners listening that are into functional medicine or naturopathic medicine or integrative medicine, they would agree that is it. This is the main chunk of the medicine that we can help so many people with.

Dr. Steve Sinatra: You're absolutely right, Drew. When it comes to cardiovascular disease, it's all about lifestyle. In other words, what you put in your mouth, how high your blood pressure goes, how much stress you're under. All these aspects are our lifestyle, how much weight you put on. So when I practiced cardiology on a day-to-day basis, it was all about getting people in the right lifestyle to help prevent heart disease. So, we're on the same page.

Dr. Drew Sinatra: And there's no better time than now to start these things. We've got COVID, we're obviously in this long haul with COVID, and we know about the comorbidities making you more susceptible to getting sick and dying from it. So there's no better time than now to talk about these things.

Dr. Steve Sinatra: Correct, correct.

Dr. Drew Sinatra: Well, why don't we jump into diet and nutrient depletions, and go out there first.

Dr. Steve Sinatra: Yeah, I've always been a proponent, as you know, of the low sugary diet, the low carbohydrate diet — especially in COVID. I mean, it just makes sense. And the whole aspects about inflammatory coronary artery disease has to do with inflammation of blood vessels. We all know that. It took us decades to realize that, but the main indicator of inflammation, in other words, the sine qua non of inflammation is blood sugar. In other words, the higher your blood sugar, the more inflammation you get.

Dr. Steve Sinatra: Now look, when I became a doctor years ago, decades ago, we used to think that having a blood sugar less than 100, fasting blood sugar was really good. Guess what happened in the last 10 years? It went down to 90, then down to 80, now it's down to 70. So if you have a fasting blood sugar of 70, that's awesome. So, even in my short term history, four or five decades of medicine, the fasting blood sugar has gone way down. So now, most doctors are on the same page that, really, blood sugar is one of the inflammatory culprits of



coronary artery disease — not the traditional cholesterol hypothesis that we all took the road less traveled on. We all did that one, for sure.

**Dr. Drew Sinatra:** It's so true, Dad, and I think people...they're into this pattern of waking up in the morning, getting their orange juice, getting their pastry, whether that's a donut or a bagel, and that's how they start their day. And now they're just setting themselves up for insulin resistance and high glucose levels and all of that. So, in terms of lifestyle medicine, we can talk about really quickly, what do you do in the morning for high-quality food — protein, good fats? What do you do, Dad, to start your day?

**Dr. Steve Sinatra:** I'm sort of a faster in the morning, but I'll tell you...I used to drink coffee, and then I switched to green tea. I'm into green tea right now, all organic green teas, all of these different varieties. In fact, I've been doing it every morning, and I like green tea because it has so many medicinal properties to it. So, right now my beverage is green tea, I don't know how long that'll last. I do like black tea. And remember, from the Zutphen Elderly study, it was black tea that contained quercetin where it demonstrated longevity in these Dutchmen. And again, I've mentioned this many times before, but when I was a young cardiologist, when I was seeing longevity in Dutchmen above 100 years old, that was pretty cool to see as a young cardiologist. And when they attributed it to quercetin, oh, that was awesome. So I'm all in on quercetin, and you and I love quercetin, it's one of the best bioflavonoids around. And people can get it from onions, green apples, black tea, and also take it as a supplement. So, I just love quercetin.

**Dr. Drew Sinatra:** Yeah, no, I'm with you on that one. So I would say, really quickly, in terms of if people, they wake up, what do they do? I think intermittent fasting, like what you're doing, Dad, is fantastic. I'm doing the exact same thing, as well. I don't do it every morning, I do it probably three or four mornings out of the week. But if I am going to have a breakfast, I certainly don't reach for a bagel or a pastry. I'll have something like some oatmeal with some dried fruit in it, maybe some ground flax seeds sprinkled on top. Or I might have some eggs on a gluten-free piece of toast. But yeah, beginning your day with a healthy meal is really paramount there.

**Dr. Steve Sinatra:** Yeah, one of my favorite...when I do toast, I like to do an avocado toast, with an avocado spread, you add a little olive oil to it. Because remember, it's the fats, it's the fats in that olive oil where you don't elicit the insulin response. So if you combine some healthy fats with some carbohydrate, and if the fats overwhelm the carbohydrate, you get less of an insulin response — because that's what you're really striving for.



Dr. Drew Sinatra: Exactly. Now Dad, you mentioned the whole inflammation starting from sugar, and creating inflammation in the arteries and such. And the same thing can happen in your gut, too, and I want to just briefly address this with our listeners. Make sure that you address food allergies or food sensitivities. Now this could be a gluten intolerance, this can be a dairy intolerance, this could be to eggs, it could be to citrus, it could be to soy, different preservatives in foods. Make sure that you figure out what it is that you're sensitive to, because if you don't remove those sensitivities or allergies, you're going to be introducing a food into your body all the time that's going to be creating inflammation, which can lead to leaky gut, which can lead to systemic issues in the body. So, first and foremost here, we're talking about food, of course — make sure you're not eating something that is not agreeing with you.

Dr. Steve Sinatra: Absolutely. Allergenic foods...and remember, I grew up in that peanut generation, where people unknowingly had peanut allergies and were really being devastated. And I can tell you that, I remember flying on airplanes when they were giving out peanuts, and all of a sudden people were choking and wheezing and stuff like that. So it took years to really get to these allergic ramifications, but you're right on. Aren't there like seven or eight, not taboo foods, but foods that are really allergenic — including chicken. I was surprised to find that one, as well.

Dr. Drew Sinatra: And really, the best way to do this is a food elimination diet, which I think you and I have talked about before. And sometimes people don't want to do that, and I completely understand, it's not an easy thing to do. There are food allergy tests out there, food allergy panels that you can have done via blood. And those can be helpful for identifying those hidden foods, like chicken, like you just mentioned. So there's a couple out there that I use in my practice, not on a regular basis, but certainly for times where we can't figure out if there is a hidden food that they're reacting to. So thanks for bringing that up, Dad.

Dr. Drew Sinatra: Now with certain diets, we can lead to nutrient deficiencies. If people are doing a ketogenic diet, or a paleo diet, or a low histamine diet, or a low oxalate diet, there can be all these nutrient deficiencies that occur. So we want to make sure that we're replenishing the body, making sure that we're not missing something here. When it comes to medications, Dad, let's address that really quickly for our listeners. What are some medications that you want to talk about that lead to nutrient deficiencies?

Dr. Steve Sinatra: Well, one of the ones that comes to my mind, because I dealt with it for years, was young women on birth control pills who were deficient in B vitamins. That was scary stuff, and I saw that. And finally the medical profession got smart. Because remember, for years they didn't recommend vitamin and mineral



supplementation. But pregnant women, they needed folic acid, they needed B vitamin support. And I remember seeing that...and fortunately, when I started to administer vitamins and minerals early, even the pregnant women, given broad vitamin and mineral support, this was a lifesaver for lots of women. Because again, in this day and age, with electromagnetics, and insecticides, and pesticides, and heavy metals in the environment, having a healthy child is really a struggle today. It's a lot more difficult today than it was decades ago.

Dr. Drew Sinatra: Yeah, that's so true. And those birth control pills, too, they deplete vitamin C, magnesium and zinc, as well. Not just the B vitamin. So we've had millions of women on birth control pills.

Dr. Drew Sinatra: Now another medication that people take often is a PPI, which is a proton pump inhibitor. And these are lifesaving medications, in terms of people are having an ulcer, or they're having a really bad heartburn, or they're having gastritis, or dyspepsia, it can certainly just calm down those symptoms and get things under control. However, they're prescribed long-term now. And they're designed to be on a short-term course, but they're given for years and even decades. And I've had people that have been on these medications for 20 years.

Dr. Drew Sinatra: And so now we know from research that if you're on a PPI, which essentially suppresses your endogenous production of hydrochloric acid, you're going to be more susceptible to fractures, or pneumonia, or even clostridium difficile associated diarrhea. So there's lots of long-term ramifications of being on these medications. And these medications, as well, the PPIs, also deplete B vitamins, and vitamin C, and calcium, and magnesium, as well. So if people are on them, we've got to make sure that we're replenishing with a good multivitamin to help those levels.

Dr. Steve Sinatra: Right...and I'm so glad you mentioned magnesium. Drew, as a heart specialist, I am privy to the benefits of magnesium, because I used magnesium in the CCU in my early 30's for horrible refractory, what we call ventricular tachyarrhythmias that were life-threatening. So I grasped the utility of magnesium very early. And let's face it, magnesium has been depleted in the soils for centuries...not centuries, but decades. Centuries ago, the soils were replete with magnesium. But the last, I would say five to six decades, for some reason, magnesium is depleted, and magnesium deficiencies are rampant in the population. Now people don't come in and say, "Oh, we have a magnesium deficiency." They come in with possible arrhythmia, possible high blood pressure. In other words situations like that, or insulin resistance. And I have to tell you that when I was at a CoQ10 meeting, maybe about 12 to 13 years ago, one of the Australian researchers spoke about the benefits of magnesium orotate.



- Dr. Steve Sinatra: And I'll tell you, I was blown away by this. It was amazing. But I can tell you, I am so glad that Healthy Directions took the lead with magnesium, because when you use Krebs cycle magnesium components and combine it with magnesium orotate, now you're getting the magnesium Krebs cycle components that you really need, because it's not just taking...like, Grandma used to give us magnesium oxide and milk of magnesia. I don't know if you remember that, but basically, oxide stimulates the bowel, you don't really absorb it into the bloodstream. So when it comes to magnesium, we need these Krebs cycle components that are vitally important. And I was so glad that the Australians introduced me to orotate over a decade ago.
- Dr. Drew Sinatra: And Dad, do you think most people should be taking magnesium, at this point?
- Dr. Steve Sinatra: I think everybody, I think this is the unsung hero, this is the one mineral that I believe we're all depleted in. Now here's the problem, a lot of doctors check magnesium — but they check it in a serum. In order to be low in a serum, it's got to be drastically low. You must check an RBC, the red blood cell magnesium, to see if you're depleted in magnesium. And if you're depleted in the red blood cells, then you're really depleted in magnesium. No, I take magnesium every night. You know, Drew, I think I mentioned this before on the broadcast. I brush my teeth every night, right, and when I use my water chaser, I swallow two capsules of my broad spectrum magnesium. It's like clockwork, I take it every night before bedtime.
- Dr. Drew Sinatra: Yeah, Dad, I'm the same way. I take a sustained release magnesium at night with some CBD, and I have the best sleep ever. For me, that's my combination.
- Dr. Steve Sinatra: Well, that's one of the aspects of magnesium. Some people...my patients used to tell me that, "Doc, since you put me on magnesium at night, I sleep better."
- Dr. Drew Sinatra: No, it's so true.
- Dr. Steve Sinatra: And with all the electromagnetics, and all of the melatonin depletion from all the EMF in the environment, we need to sleep better. So if magnesium helps these people, so be it.
- Dr. Drew Sinatra: All right, well, we talked about birth control, we talked about PPIs, and lastly, I wanted to mention statins. We've got to talk about statins now and CoQ10 deficiency. So tell us, Dad, how bad is CoQ10 depletion with statins? How bad is that?
- Dr. Steve Sinatra: It's bad, but it didn't come out until the late 1980s. And when I was chief of cardiology at my institution, I used to lecture on statins all the time. I was a



choir boy for statins, because I bought the hook, line, and sinker with the statin story, so to speak. But when this article came out of India showing that statins depleted CoQ10, I go, “Whoa!” I stepped back and I said, “How can that be? How can a pharmaceutical that’s allegedly so good for the heart, deplete the most important, vital nutrient for the heart?” So after that I stopped lecturing for Merck and Pfizer, and basically, I became the choir boy on CoQ10, I really did. And unfortunately, CoQ10 shares the same biochemical pathway as cholesterol. So if you use a cholesterol-killer, you’re going to knock out that pathway.

Dr. Steve Sinatra: And that’s why so many patients...they don’t come into the doctor’s office, Drew, and say, “Oh, doc, I’m having a statin complication.” No, they come in and go, “Doc, I don’t have the energy. I don’t have the bounce in my step. I can’t get out of a chair. I’m weak in my quads. I can’t figure it out. I can’t play doubles tennis anymore.” Those are the complaints I heard. And my first remark was, “By the way, does your internist have you on a statin for your cholesterol?” And 99% of them would say, yes they do. So that’s how I interrogated these people because of their symptoms when they used to share their lifestyle. And again, we started talking about lifestyle. Lifestyle is so important, and that’s why lifestyle is a big aspect of, really, conventional and alternative cardiology.

Dr. Drew Sinatra: Well, let’s move on to more lifestyle medicine here, Dad, and that is the whole mind-body connection piece. And recently, I just sent you this book...

Dr. Steve Sinatra: Oh yeah, *Breath*.

Dr. Drew Sinatra: *Breath*, right, the *Breath* book. I highly recommend everyone watching and listening to this to read this book. It is an amazing, amazing book, because you can take control of your breath. When you take control of your breathing, you can help regulate your blood pressure, you can help regulate your energy levels, your sleep. You can really take control of your physiology and your biology by a simple thing as breathing. So I just completed this book, Dad, and I’ve been recommending it to everyone because this is something that every, single person can start doing right now, which is breathing correctly.

Dr. Steve Sinatra: Drew, I’m so glad that you have the passion for the breath, because maybe when you read this book, you and I should publish an article in *Alternative Medicine*. Because I don’t know if you remember this, but I did alternate nostril breathing, and I was hooked up to a HRV, a heart rate variability monitor, at the same time. And it was amazing how just a few seconds of alternate nostril breathing can regulate your heart rate variability. And to heart specialists like myself, whenever you support heart rate variability, you are supporting your optimum health. Because disturbed heart rate variability from any cause —





whether it's pharmaceutical drugs, whether it's overzealous use of sugars or preservatives, or whatever it is — disturbed heart rate variability is a harbinger for cardiac events. So we have to be really cautious about it, and supporting heart rate variability is really key.

Dr. Drew Sinatra: Yeah, and he talks about heart rate variability in the book, and also, what I found fascinating, Dad, is that you can look at someone like Wim Hof...are you familiar with the Iceman named Wim Hof? Have you heard of him before?

Dr. Steve Sinatra: I've heard of him, yeah.

Dr. Drew Sinatra: The guy is just unbelievable. He's climbed Kilimanjaro in a T-shirt and shorts. He can submerge himself in ice water for an hour and a half — an hour and a half in ice water! — and get out of the water without being hypothermic, without shivering, without feeling cold, because he's able to actually regulate his temperature via his breath. So there's all these, in a way, super human qualities that we can actually develop through the breath. And of course, yogis have been doing this for a long time. You'll read about this shortly, Dad, where they tested a yogi, and he was able to change his temperature, within seconds, from 10 degrees from his finger to his thumb. So there's all these different powers, in a way, that we can actually start to bring about by breathing. And so that's why I'm so passionate about it, because people can take charge of their health via breathing. And I think all of us are not breathing properly, that's just the reality of it these days.

Dr. Steve Sinatra: You know, Drew, I think you should go down to Sivananda and teach down there. I taught down at that yoga institute in the Bahamas for almost a decade, and every morning they do a sot sun. And they do these breathing exercises at six o'clock in the morning and again at 10 o'clock at night, and then they go to bed, and they repeat that process every day throughout the year. So I think the breath is really crucial, and the fact that you stumbled upon this book and now you're practicing these exercises is awesome. You are going to help a lot of our listeners, because the breath is really important, vitally important.

Dr. Drew Sinatra: Yeah, and let me leave with one more thing here, because I know I've been talking a lot about this. But in his summary, he said that the optimal breath is essentially five and a half seconds breathing in, five and a half seconds breathing out, and you repeat that. And so it comes out to be five and a half breaths per minute. So if people can get a timer on their phone, they can set it for five and a half seconds in, five and a half seconds out. And then you do that over a minute, and you should have five and a half breaths per minute. And that's what can really lead to increased heart rate variability, and all the different positive aspects of breathing.





Dr. Steve Sinatra: Now that is a complete antithesis of the Type A personality. Because when I met Meyer Friedman for dinner years ago, and he was the one that wrote the book, *Type A and Your Heart*. I'll never forget it...his research on the breathing patterns in Type A behaviors was "GULP" — in and out so quick. Not five seconds, or anything like that. It was short bursts of activity, in and out. And this was the essence of the Type A behavior pattern, was the forced breathing, and the erratic breathing. Not the synchronous breathing that you're talking about, but the erratic-type breathing. And Meyer Friedman was right on, and this was decades ago. So I'm glad you're bringing it up now, because like anything else, medicine always repeats itself.

Dr. Drew Sinatra: It does, it does.

Dr. Steve Sinatra: Unfortunately, that's what's happened with the flu, I mean with this coronavirus — because it's just like 1918 all over again. I'm reading reports from 1918 because when you read this stuff about 1918, about that flu-like epidemic that devastated the world, it's exactly the same as it is now. It's unbelievable. And these people back in 1918, they were sitting up, they were struggling to breathe, and they were getting a serosanguinous discharge from the lung. Meaning they were getting hemorrhagic lesions in the lung and bleeding from the mouth. So it's amazing, it's taken a hundred years for this virus to re-circulate itself, but history repeats itself again. And that's the way medicine is, over and over again.

Dr. Drew Sinatra: Yeah, that's very true. Now Dad, one more thing for mind-body I wanted to mention is getting out into nature. You and I have talked about this a lot.

Dr. Steve Sinatra: You're a nature guy.

Dr. Drew Sinatra: I love nature, of course. But I was taking a walk the other day, and I realized that when I'm in nature — and I think a lot of people feel this, as well — you're at home, because that's where we came from. We came from nature. So when you're in nature, you're at home and that's when you feel really good. And I encourage people, as a lifestyle medicine, to get out as much as they can. Go for a walk in the neighborhood, go for a walk in the woods. And even...I took a video the other day, which maybe I'll post at some point. I filmed a lake, and there was raindrops coming down on the lake, and that's all you could hear. And that was the most beautiful thing that I'd heard all day, was just the raindrops hitting the lake because it was so quiet, so peaceful. And that's what we need in today's world, we need to be at ease, we need to be calmed down. Our nervous systems are so worked up all the time that we need to go out into nature and just listen, and observe, and be mindful of all these beautiful things around us. So, simple thing that people can do on a daily basis.



- Dr. Steve Sinatra: Yeah, and I can remember you were a young child. We came across a still lake out in, it could have been in BC, or it was perhaps in Montana, you were about five years old. And I took a flat stone, and I skirted that across the lake, and it was bobbling back and forth. And you were mesmerized by all the circles around that stone hitting the water, I'll never forget it. So you were sort of a Jeremiah Johnson when you were five years old, and now you're the same type of guy. You even have the beard...you even look a little bit like Redford, so it's kind of cool.
- Dr. Drew Sinatra: Well, I'm teaching that stuff to my eight-year-old, Kai, Dad.
- Dr. Steve Sinatra: That's good, that's good.
- Dr. Drew Sinatra: Yeah, he's been doing cold immersion with me. So we've been jumping into this cold lake recently and...
- Dr. Steve Sinatra: Oh, you're detoxing the body, huh?
- Dr. Drew Sinatra: Detoxing the body
- Dr. Steve Sinatra: You're doing a lymph detoxification.
- Dr. Drew Sinatra: Actually, while we're on the topic here, cold immersion — let me talk really quickly about it, because this is another lifestyle medicine. What you can do is what I'm doing...you go out, you either take a cold shower in your own home, or if you have access to a lake like I do, you go out, you take a dip in the lake. I've worked myself up to around 90 seconds, so about a minute and a half I stay submerged. And it's cold, there's no question about it, you're uncomfortable when you're in there. But when you get out, your body is starting to work really hard. It's a stress that you were just under, and now the blood's pumping, your limbs pumping, as well.
- Dr. Drew Sinatra: And so you're able to increase circulation throughout your body. It helps with pain, it can help with mood. When I get home at night, I feel amazing, Dad, I got to tell you...just the amount of circulation you feel in your hands, and your toes, and even your brain with cognitive function is unbelievable. So, as long as someone doesn't have a severe cardiac condition where they can't go into extreme temperatures like that, this is generally a safe treatment for people to do. But I think people should experiment a little bit and see how they feel.
- Dr. Steve Sinatra: Well, Drew, remember five years ago, you wrote in our textbook of cardiology. You did the chapter on "A Naturopath's Approach to Cardiovascular Medicine." And one of the things you wrote about was detoxification using hot/cold. And I



have a sauna here in my basement in New England, and whenever I go in the sauna and I'm sweating, the shower is only about three feet away. And what I do is I take a cold shower, and I do what you taught me — cold, warm, cold, warm, I keep doing that back and forth. Because what it does, and you know more about this than I do, I guess it facilitates the lymph flow, because the lymph flow is in the superficial aspects of the body, or along the thoracic duct. And basically the hot/cold is facilitating the lymph, and the lymph is carrying out the toxins of the body. So anybody without a history of heart disease, if they do the hot/cold, they're literally helping to detoxify the body.

Dr. Drew Sinatra: And support the immune system, like you said.

Dr. Steve Sinatra: Exactly, exactly.

Dr. Drew Sinatra: Exactly. Well, Dad, let's move on to certain tests — health screenings that people should have done on a yearly basis. Let's start off with the heart. What should people get done for tests in terms of the heart?

Dr. Steve Sinatra: Oh, I think C-reactive protein is still really cool. It shows that if you do have a possibility of inflammation, because we know that inflammation is a root cause of heart disease. And while I'm on it, I think anybody, any good cardiologist, if they check C-reactive protein, they should look at Lp(a), as well, because that's a pro-inflammatory mediator. It's the real cholesterol story. It's much more common now because of the BioGenome Project — we used to think it was rare, but now it's very, very common. And I like Interleukin 6 (IL-6). In other words, these are pro-inflammatory mediators. And even my colleague, Dr. Nicholas Perricone, who was an NF-kappaB guy, he was the one that really taught me about NF-kappaB decades ago.

Dr. Steve Sinatra: Any of these inflammatory mediators, we can measure. And if you do have them, they do enhance inflammation in the body. And by the way, one of the miracle aspects of CoQ10 is that CoQ10 suppresses these inflammatory mediators. So CoQ10 has enormous utility, not only for the heart, but now I'm reading about more and more papers about the non-cardiac ramifications of CoQ10 — and it's subduing inflammation, in this day and age, is really cool. That's why CoQ10, I think, is going to become more and more mainstream, particularly in this era of inflammation and epidemics, etc, etc.

Dr. Drew Sinatra: Dad, you mentioned IL-6...do you know anything specifically that can help lower that, or is that tied into all the lifestyle stuff that we're discussing today?

Dr. Steve Sinatra: Well, Interleukin 6, it's a pro-inflammatory mediator. So any of the anti-inflammatories would help. Quercetin may help, Omega-3 essential fatty acids,



certainly CoQ10, any of these...nanokinase, lumbrokinase, any of these things can help to assuage these inflammatory mediators. And even niacin. Now niacin is kind of cool because it's a B vitamin, but what niacin can do is it can intersect some of these inflammatory mediators, to a degree. Not as much as maybe lumbrokinase or nanokinase — but niacin has an effect on these, and I've seen it. The only problem with niacin is the flush, a lot of people can't tolerate it. And even in low doses, they get very, very afraid. I've seen panic situations when it gets so hot, they getting burning, and stuff like that. But some people like the hot flush. So I've had some patients in my cardiovascular practice swear by niacin, and other patients they couldn't tolerate it at all. It's an individual thing, that's for sure.

Dr. Drew Sinatra: And is that something that people build up to, or do they always get that flush?

Dr. Steve Sinatra: They can, yes, they can, they have to start at very low doses. And niacin was one of my "go-tos" for lowering Lp(a), or helping to neutralize Lp(a). But again, you had to go to higher and higher doses.

Dr. Drew Sinatra: Got it, got it, okay. Well Dad, in my practice, it's more preventative medicine. I'm not treating patients like you were, in terms of heart attacks and all that kind of stuff. But I like to run a CBC, a comprehensive metabolic panel, thyroid panel, hemoglobin A1C, fasting insulin, ferritin and iron, a hormone panel, depending on what someone's coming in for, depending if it's a female or male, but we'll do an estradiol, progesterone, testosterone, FSH, cortisol, pregnenolone, DHEA. And of course, do a lipid panel with an Lp(a), we'll do a vitamin D, a vitamin B12, including a methylmalonic acid, which is the breakdown product of B12, RBC magnesium, like you mentioned earlier, solanine and zinc. And there's other tests, of course, but that's what I like to have on a yearly basis are those tests, to make sure that we're not missing something and that something's not elevated or low, for that matter.

Dr. Steve Sinatra: You may have mentioned it, but do you also order a fibrinogen?

Dr. Drew Sinatra: On some people, yes. When I suspect that there's a family history of cardiovascular disease or currently I'm suspecting that, I'll do a fibrinogen.

Dr. Steve Sinatra: Yeah, in any post-menopausal woman who smokes, you must get a fibrinogen. Because I saw alarmingly high fibrinogens, and I used to think that one of the reasons why heart attacks went up 400% in post-menopausal women, I used to think, when I was a younger cardiologist, it was estrogen because they lost the "fountain of youth" hormone. But then I realized that the fibrinogens went up, and when the fibrinogens, which causes blood clotting, by the way, the fibrinogens went up because of a lot of smoking, then I put two and two



together, and I realized that fibrinogen and smoking women post-menopausal was really, really bad. And I had to coach these women in either lowering fibrinogen, or better yet, getting them off smoking.

Dr. Drew Sinatra: And Dad, explain to our audience fibrinogen and how that impacts the blood, in terms of making it thick.

Dr. Steve Sinatra: Well, it interacts with fibrin and basically it makes the blood more sludgy. Look, if you cut yourself and you're bleeding, you need this stuff because you want your blood to clot. The problem is, is you don't want your blood to be like red ketchup all the time, sludgy, because of these inflammatory mediators, so to speak. And smoking, because you're not only inhaling carbon monoxide and stuff like that, but there's like 4,000 chemicals in cigarette smoke because of all the insecticides and pesticides. So, this tends to make the blood sludgy, and we know now that it's sludgy blood, or red ketchup blood, that's really the essence of inflammation. And we know that inflammation is the essence of heart disease. So, keeping the blood like red wine is really key. That's why I'm a big proponent of grounding...and again, I like natural blood thinners, so that's really important.

Dr. Drew Sinatra: Exactly, okay. And Dad, before we move over to the **Wellness Wisdom** segment here, is there anything that you want to add into lifestyle medicine that we were talking about today? Preventative medicine, anything else?

Dr. Steve Sinatra: Yeah, we've got to talk about stress. Stress is the number one killer, stress is the elephant in the living room. And especially now, in this day and age, people need to experience their emotions more, they need to cry more, they need to get into their sadness. They just need to really experience what they're feeling, because if you keep stuffing it and stuffing it and stuffing it, it's not good for the heart at all. Remember, the heart is the origin over our total being, so to speak. And the heart will suffer if you betray it. And if you don't tell the heart your truth and you keep betraying it, you keep stuffing the emotions, you're living in denial, so to speak...unfortunately, the heart will come back and get you. That's been my experience.

Dr. Drew Sinatra: So Dad, I think what I like to do...this is hard, right, because how do you get people to express themselves sometimes? That can be a difficult thing. I like to recommend a journal, or we used to call it a diary. But I think that's a great way for people to sit down at night before they go to bed, and write down how they're feeling. What was their day like? What did they experience? What are they feeling in their body at that moment? Because I think it's hard, especially for men, to really feel what they're experiencing. And in an emotional sense, it's hard if they are having anger or frustration in their life, sometimes it's hard to



identify it. And then what do you do when you actually do identify it? It's not an easy thing. So I think journaling is one way for people to just get down how they're feeling on paper, and then we can learn to do things to help with that.

Dr. Steve Sinatra: I agree, I absolutely agree. In fact, that would be my **Wellness Wisdom**.

Dr. Drew Sinatra: All right, I like that. Okay.

Dr. Steve Sinatra: In fact, I would say this...my **Wellness Wisdom** today with you, Drew, is that before you go to bed tonight, write down one thing that you are grateful for before you go to sleep. Or one thing that day that you learned, intrinsically, in your inner being, that you are grateful for.

Dr. Drew Sinatra: Yes...that's beautiful, Dad. That's the gratitude journal.

Dr. Steve Sinatra: The gratitude journal, because whenever you're grateful, what are you doing? You're supporting heart rate variability. Whenever you support heart rate variability, you're optimizing your cardiovascular health. And whenever you're grateful...oh, I got the universal chill on that. Whenever you're grateful, you're in a state of wellbeing and that's...listen, what's the opposite of grateful? Well, it could be panic, it could be depression, it could be anger, it can be any of those negative emotions. So when you're grateful, you're experiencing something that's really full and generous for the heart.

Dr. Drew Sinatra: Yeah, I love it, Dad, I love it.

Dr. Drew Sinatra: Well, for my **Wellness Wisdom**, I'm going to say that...start doing these things right now. What we talked about today, including the breathing piece, you can do it right now after listening or watching this podcast. And the simple thing that my father and I discussed was, hey, the five and a half breaths in, five and a half breaths out. And then you do that five and a half times during a minute. And it's almost like you think about the tide coming in or the tide going out, or a wave coming on to shore and a wave coming out. It's the same kind of motion, you're doing that with your lungs instead of, obviously, water. But that's something that everyone can do today, right now, even in this moment you can start doing while you're listening or watching this, and we know it's good for your health.

Dr. Steve Sinatra: And your heart rate variability!

Dr. Drew Sinatra: And your heart rate variability.

Dr. Steve Sinatra: For sure, for sure.



Dr. Drew Sinatra: Well, Dad, thanks so much for coming on the show today. This was great, I'm so happy we talked about lifestyle medicine, it's such an important piece of people's health.

Dr. Steve Sinatra: Ditto, that was great, Drew.

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. And remember, if you liked what you heard today, and you want to be an active member of the **Be HEALTHistic** community, subscribe to our podcast at **BeHealthisticPodcast.com**, or on Apple podcasts, or wherever you download your favorites. You can also find more great content and information from us and the Healthy Directions team at [HealthyDirections.com](http://HealthyDirections.com).

Dr. Drew Sinatra: I'm Dr. Drew Sinatra

Dr. Steve Sinatra: And I'm Dr. Steve Sinatra

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.