



Dr. Drew Sinatra: Hey, everyone, welcome to **Be HEALTHistic**. Today on the show, my dad and I are bringing you another episode in our *Pulse Check* series, where we discuss trending health topics and share with our listeners what you should know right now. This time we're talking about new articles and studies that reveal even more good news about some of our favorite health choices — like drinking tea, and eating lots of fruits and vegetables, and listening to good music.

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.

Dr. Drew Sinatra: Well, my dad just moved to Florida — he's back down there again and his connection isn't the best, although we can still hear him. So without further ado, let's jump right into the conversation, Dad.

Dr. Steve Sinatra: It's good to be here, Drew. It's good to be back in Florida, I'll tell you that...

Dr. Drew Sinatra: I bet it is.

Dr. Steve Sinatra: I was at the beach this morning and was grounding the whole time, and it's awesome. I forgot how great it is down here, I really did.

Dr. Drew Sinatra: Oh, you got your sunshine and your vitamin D now, too, so there's another plus.

Dr. Steve Sinatra: Right, exactly.

Dr. Drew Sinatra: All right, for our first topic, we're going to be talking about a beverage by the way, Dad, which is the second most consumed beverage in the world behind water, and that is tea. And we talked a lot about tea in terms of the cardioprotective benefits, might have some anti-cancer properties to it, we know it's an antioxidant, it's got these polyphenols in it. Today, specifically,



we're going to talking about these compounds called catechins, which are under that polyphenol umbrella, and we're going to discuss how drinking tea may actually help lower your blood pressure.

Dr. Drew Sinatra: So, were you surprised to hear about this, Dad?

Dr. Steve Sinatra: No, not really, because remember in previous broadcasts I talked about the Zutphen Elderly Study, and that was a black tea. And when I was working in the cardiac catheterization lab decades ago, I came across a paper on green tea, and green tea is the one beverage in Japan that if the Japanese had more than five cups of green tea a day, Drew, one to five cups of tea, they did not develop coronary artery disease. And this was a big cardiac cast study of over 500 patients, and they looked at all these participants, whether they drink sake, or beer, or wine, or soda, or green tea, or black tea. It was green tea only that stood out in preventing atherosclerosis. So, I'm all in when it comes to green tea.

Dr. Drew Sinatra: Well, it's fantastic. I mean, let's give the listeners a little background on these catechins. So there's two catechins in particular that are going to help activate this protein, which I'll mention. One is called epicatechin gallate, that's ECG, and the other is epigallocatechin-3-gallate, which is EGCG, which our listeners might be familiar with. Some supplements out there actually contain EGCG in it. Now these particular catechins have been shown to activate this particular protein KCNQ5, which is involved in a potassium ion flow. So what they found is that these catechins in the green tea, when you consume it, they can activate this protein, this KCNQ5, which then allows more potassium in and out of cells, which therefore has the effect on blood vessels to relax, and then hence lower blood pressure.

Dr. Steve Sinatra: That's right, that's the biochemistry and physiology, Drew. Well said.

Dr. Drew Sinatra: Yeah, and I think this is pretty neat for our listeners to know, too, is that when you ferment tea — so, a lot of oolong tea or black tea is fermented — that's when the oxidation of these catechins actually occurs, which then leads to a higher concentration of them. So I always tell my patients, if you're going to drink tea, you got to drink it properly. So you can either buy it in a bagged form, from wherever it is. In this study, they actually used Trader Joe's tea. But you can also buy it in loose form, which is what I recommend, because I find that you can get a really high-quality tea in a loose herb form. And when you steep it, you want to make sure you're following the directions in terms of temperature. So for example, green tea, you never want to pour boiling water on green tea. It's going to ruin it, it's going to make it taste bitter, it's not going to taste good at all. So make sure you're following the directions on terms of what temperature to pour the water on. If it's going to be green tea, black tea, oolong



tea — they all have different temperatures you want to use. And also the amount of time that you're steeping it. Because if you steep it too long, you're going to have a lot of those bitter qualities come out, and then you're not going to enjoy drinking it.

Dr. Steve Sinatra: No, I agree. In fact, there was an APRN woman that was that Dr. Lee Cowden's conference with me sitting in the first row, and we became really good friends, and she's good friends with Jan. For a Christmas present, she sent me Churchill's Teas from, I think they're from Kentucky, or Ohio. But this is about 20 different varietals of green tea, Drew. And it's amazing, they have so many different constituents inside the green tea. And again, after reading that study on green tea...in fact, I had a green tea this morning. And the only caveat, well, it's not really a caveat. You're absolutely right, sometimes if you boil the water too long, in fact, maybe this is the reason why it tastes a little bitter, maybe this is the reason why you just brought it up. But if you do a boil of water and the green tea does taste a little bitter, what I add to it is a little bit of maple syrup, like a half a teaspoon.

Dr. Steve Sinatra: And again, it's not fructose, or sucrose...it's maple syrup, it's a natural sugar, it's got some other compounds in it that are really good. But a lot of people will not drink green tea because they do boil the water, it does taste bitter. So the point I want to make is don't boil the water, bring it to near boiling, let it steep. And if it's still not right, try a little bit of maple syrup, and it might be the perfect AM beverage if you can do those considerations, like I just mentioned. Because I think the maple syrup makes a big difference. But I'm going to take your advice and only go to the water maybe 185 to maybe 200 degrees, don't boil it. That's all.

Dr. Drew Sinatra: Yeah, and a lot of kettles you can buy out there that actually have the temperatures on them. So when you're boiling water, and then it has a coffee setting, and then it has a black tea setting, a green tea setting, even a white tea setting. Actually, Jan, in fact, bought me one of those around eight years ago, so we've been using that every single day since, so I've got to thank her.

Dr. Steve Sinatra: All right, I'll tell her after the broadcast.

Dr. Drew Sinatra: No, Dad, I found this pretty interesting because I thought that coffee would have been the second most consumed beverage in the world. But in fact it was tea, and I want to bring this up because I think tea is not really big in North America. It's maybe perhaps third or fourth in line, right? I think it's water, coffee, and then tea or perhaps something else. My brother-in-law's wife, Lindsey, I'd love to have her on the show, Dad. She does a tea ceremony, and what it is, is she brings her tea set, and we have meditation cushions set up, she



plays some music in the background, she lights some incense, and for about 45 minutes she does multiple pourings of these different black and oolong teas. And it's absolutely amazing, because you really get into this ceremony around tea that we don't have. I think we're so used to just making our tea, getting our caffeine fix, and then going about doing our work. But there's a really deep connection that you can form with tea, and I think a ceremony is a great place to do it. And perhaps we'll have her on the show and go over the ceremony...but it's a wonderful way to really be with your community, your friends, your family, drink some tea, and feel good afterward.

- Dr. Steve Sinatra: Well said. And maybe the real purpose of this broadcast is to get people to consider drinking tea, whether it's green tea or black tea. I agree with you, I think green tea or black tea are much better than coffee as a beverage in the morning.
- Dr. Drew Sinatra: Absolutely, okay.
- Dr. Steve Sinatra: You get just so much more polyphenols, bioflavonoids, etc, etc with teas. No doubt about it.
- Dr. Drew Sinatra: Okay. Well, the takeaway here is if you drink some tea, you might have a blood pressure lowering effect.
- Dr. Drew Sinatra: Okay, topic number two is going to be all about fruits and vegetables, something that you and I speak about all the time on the show. And this is a really cool finding, Dad. Basically, they looked at...there was over 100,000 people that they had in this long cohort study. It was over 20, 30 years, according to two different studies. So with these 100,000 people, this is what they found. This is going to blow your mind. If you compare those who consumed two servings of fruit and vegetables per day, those who consumed five servings of fruit and vegetables per day had a 13% lower risk of death from all causes, a 12% lower risk of death from cardiovascular disease, including heart disease and stroke, a 10% lower risk of death from cancer, and a 35% lower risk of death from a respiratory disease, such as COPD. Now that's huge...you're going from eating two fruits and vegetables per day to five servings of fruits and vegetables per day, and we have that lowering of a risk of mortality. That's fantastic.
- Dr. Steve Sinatra: Yeah, and the gold standard is 12. If you can get to 10 to 12, that's what you really want to do. That's why I make that special salad of mine five to seven days a week. I talked about it on previous broadcasts, but I think that salad...and again, I had it last night because I just got to Florida, we couldn't go shopping, we brought some salad fixings on the plane. And I have to tell you, it was just, it's just awesome. Especially when you combine your salads with a little bit of



onions containing quercetin, certainly avocado, which supports the production of glutathione. If you can add glutathione and avocado to the salad with blackberries, raspberries, strawberries, any fruits, and then use some kale, and cabbage, and carrots. Oh my gosh, it's so easy and it's so good for you. I'm all in on it.

Dr. Drew Sinatra: Yeah, and Dad, I wanted to give our listeners and viewers an understanding of what is a serving of a fruit and vegetable? Because it can be a little confusing. Now, here's some ideas. One cup of raw vegetables is one serving. A half cup of cooked vegetables, whether you roast them, or steam them, that's considered one serving. Two cups of leafy greens, so for example, you mentioned your salad. If you have four cups of lettuce in there, and four cups of spinach, you're going to have tons of servings of vegetables, right there. Also, if you consume two medium-sized whole vegetables, like two carrots, or two stalks of celery, that's considered one serving of vegetable. And lastly, if you eat a whole vegetable, like a bell pepper, for example.

Dr. Drew Sinatra: So, I think, we hear this all the time, get your servings of fruits and vegetables in, but really having an understanding of what is a serving size of a vegetable is really important. The same thing goes for fruits, too. Think of it as a handful, if you eat a handful of strawberries, that's like a serving size. If you have a cup of blueberries, that's a serving size of blueberries.

Dr. Steve Sinatra: Well said.

Dr. Drew Sinatra: And...

Dr. Steve Sinatra: There's...

Dr. Drew Sinatra: Oh, go ahead.

Dr. Steve Sinatra: Deanna Minich — remember, we talked about the colors of the rainbow? So for our listeners, what's really simple is the more colorful your fruits and vegetables, and if you could eat them raw in a salad, the better you are.

Dr. Drew Sinatra: Absolutely, I completely agree with that. And I wanted to share my top three tips, Dad, for getting more vegetables into people. And this is this — for breakfast, you can do a smoothie. Right? And in that smoothie, you throw a handful of spinach in there, you might throw half an avocado in there, and of course, you want to add some fruit in there, as well. Maybe some frozen berries, maybe half a banana. So that's a great way to up your fruit and vegetable content really quickly in the morning. Now another idea for breakfast would be something I learned from you, is making an omelet. So you can sauté



your onion, you sauté some spinach, maybe throw some mushrooms in there, maybe some cut-up fennel, throw it in your omelet, eat that thing. You've probably got around two, three servings right there of vegetables.

Dr. Drew Sinatra: And then, what we always do, and I think I learned this from you, Dad, is steaming. Super simple, right? You set your pot up on the stove, put some water in there, heat it up, boil it. You add your broccoli, you add your cauliflower, whatever it is you want to steam. Steam it lightly, right? You don't want to over steam things, right? But just lightly enough that it becomes soft in your mouth. That's a great way to consume more vegetables.

Dr. Drew Sinatra: And then my last tip is roasting vegetables. And this is what we always do, we put things on a big pan in the oven with some parchment paper on it, and we roast sweet potatoes, and we roast cauliflower, and broccoli, and fennel, and all these sorts of vegetables. It's a great way to consume it. And then once they're out, you drizzle some olive oil on top, some salt and pepper, and you're golden.

Dr. Steve Sinatra: I love it, Drew.

Dr. Drew Sinatra: Before we move on to the next topic, Dad, one more thing I just thought of, too. Especially for kids, right? For parents out there that have kids, if you want to increase their vegetable intake, you cut up some vegetables on the table — whether it's some broccoli, or some cauliflower, some celery, some carrots, bell peppers — and just have a good dip. Whether it's a hummus dip, or a bean dip, or other kind of favorite dip you want to use. But when our kids are hungry, and just so starving, and they just want to eat anything in front of them, throw some vegetables down there with a good dip, and you're good to go.

Dr. Steve Sinatra: Well said, son.

Dr. Drew Sinatra: Okay. Oh, go ahead?

Dr. Steve Sinatra: Hunger drives, it drives like crazy. So when your kids are hungry, they'll eat anything.

Dr. Drew Sinatra: They'll eat anything, so put the vegetables in front of them.

Dr. Drew Sinatra: Okay, for topic number three, we're going to talk about something that you and I have talked a lot about, Dad, and that is Lp(a), lipoprotein (a). And the research is just coming out more and more about how this is really a pro-inflammatory, LDL-like particle, essentially, that has essentially sticky properties, and it's very bad for the endothelium lining of our blood vessels. So it's really not good, and



we're finding that it can definitely increase your risk of heart disease. So let's talk about today a little bit about Lp(a).

Dr. Steve Sinatra: Sure. I mean, it's one of my favorite topics because when I came across this article by Gaziano et al. from the Massachusetts General Group, it's in 1998. Again, I was a practicing cardiologist, reading the literature all the time, and it blew me away, Drew, because they stated that this was, in their opinion, the number one risk factor. Now around that time, when I wrote my book, *Reverse Heart Disease Now* with Dr. Jim Roberts, we were looking at the toxic blood syndrome. In other words, we were looking at fibrinogen, Lp(a), homocysteine — all those disastrous situations you have in your blood that really pose as inflammation, because inflammation is the root cause of heart disease. So when we came across this data on Lp(a), I started to check it more and more in my patients, and I was amazed, Drew. It is a risk factor, there's no doubt about it.

Dr. Steve Sinatra: And then when the BioGenome Project came out around that same time, but it takes 20 years for the information to really get through to medical literature, etc, etc. Now, with the BioGenome Project, we realized that Lp(a) is inherited more and more, and it occurs as a spontaneous mutation, as well, in the genetic code. So now it behooves every internist and cardiologist on the planet when they're screening people for cardiovascular disease, get a Lp(a). Because the good news is you can neutralize it, and you can neutralize it with nutraceutical support. So that's the really good news.

Dr. Drew Sinatra: So you're recommending that everyone get tested for it.

Dr. Steve Sinatra: Yes, absolutely. Everybody has HDL, LDL...look, that's fine. But if you really want to get into the prevention of coronary artery disease, you've got to test Lp(a). No question about it.

Dr. Drew Sinatra: Got it. And in terms of lowering it, Dad, I know there's some newer medications out there. There's some injections actually that can help lower it. What else can people look for in terms of lowering of Lp(a)?

Dr. Steve Sinatra: Well, the easiest thing is niacin, the problem is people can't tolerate niacin because of the flush. But some people can, and I remember in my practice, I would warn them about the flush. And they would start off at 100 milligrams, go to 250, go to 500, go to 1,000. And lots of times, that neutralized Lp(a). A mere thousand milligrams of niacin. But again, there's...one of my favorite supplements at Healthy Directions was nattokinase. I absolutely loved it, because nattokinase would help to...not only to get rid of the toxic effects of Lp(a), but sometimes in some patients, it would lower the Lp(a) number. Now lumbrokinase was much better at lowering the Lp(a) number. But nattokinase



worked on the blood coagulation effects, we call it thrombosis, and it worked as an anti-inflammatory effect.

Dr. Steve Sinatra: So like you said, Lp(a) is highly thrombotic. It means it causes blood clotting, it's highly inflammatory. So nattokinase sort of rebuffed those two complications, and my patients did much better. So you can use lumbrokinase from Canada, and the term is Boluoke.

Dr. Drew Sinatra: Boluoke, correct.

Dr. Steve Sinatra: That's really good. I mean, that's, oh my God, because that's fibrinolytic. That just thins the blood. I mean, I love lumbrokinase. But again, you know, we talked about hormonal replacement therapy, remember? If a male takes testosterone, that lowers Lp(a). If a female takes estrogen, that has an impact on Lp(a). So there's a lot of things that can affect it. So if you have a high number, it's not a death sentence, remember that. That's the point I want to get to our listeners today, that there are a lot of ways to skin this cat of having a high Lp(a).

Dr. Drew Sinatra: And Dad, would you say that Lp(a) is more important to measure and monitor than something like LDL? Or would you say they're about equal?

Dr. Steve Sinatra: Oh, I think so. I absolutely think so. I mean, because like I said, the problem why the public doesn't understand or fathom Lp(a) is that the doctors aren't educated in it, because there's no pharmaceutical drugs that can lower it. Now, statins can make it worse, statins can drive up Lp(a).

Dr. Drew Sinatra: That's what I've heard.

Dr. Steve Sinatra: And one of the things about statins, what they can do, is they can cause coronary calcification. One of the reasons is that since it can drive up Lp(a), and Lp(a) is so pro-inflammatory, that could be an aspect of it. But remember, if I put anybody on a statin, I would always check for Lp(a), just to make sure that they didn't have a high Lp(a), as well.

Dr. Drew Sinatra: Okay. So the takeaway here, Dad, is that you want to have your Lp(a) tested, at least once in your life, maybe some other times, to monitor if it's going down or not. And ways to lower it would include something like niacin, something like lumbrokinase, nattokinase. And obviously working on other inflammation pathways in your body, making sure you're eating a good diet, exercise, etc. But those three things mainly are going to help lower it.

Dr. Steve Sinatra: Oh yeah. And my go-to favorite, coenzyme Q10. There's lots of papers now in the literature on coenzyme Q10 having a favorable impact on Lp(a).



Dr. Drew Sinatra: There you have it.

Dr. Steve Sinatra: So that's great. I mean, when I saw that...in fact, one of the first papers that I saw that in was in your, that cardiologist friend of yours, that's a naturopath.

Dr. Drew Sinatra: Oh, Decker, yes, Weiss, yeah.

Dr. Steve Sinatra: He wrote about that. And I checked his references, his references were right on.

Dr. Drew Sinatra: Fantastic.

Dr. Steve Sinatra: One thing about me, Drew, is when I read things in the literature, I'll take it in and I'll say, "Well, that's great." But I'll always go to the references, just to make sure the author represented the reference well, and didn't stretch the reference out, you know what I mean?

Dr. Drew Sinatra: Well, that applies to all information coming to us these days — you need to look up the source, because the source gets distorted a lot.

Dr. Steve Sinatra: You have to...you know, one third of the medical literature, one third, even in a best journals of the world, is fraudulent stuff.

Dr. Drew Sinatra: It's biased, there's money behind it. Yes, I can completely agree. Completely agree. Okay Dad, anything else you want to leave our listeners with Lp(a)? Or are we all set?

Dr. Steve Sinatra: We're all set, we're all set. And remember, CoQ10 is really my go-to supplement. And again, there's plenty of other supplements you can use that we mentioned, and your doctor can check it. If the number's going down, that's what you want.

Dr. Drew Sinatra: Okay, wonderful.

Dr. Drew Sinatra: All right, for topic number four, we're going to talk about music, Dad, right? And so we, I think everyone knows...

Dr. Steve Sinatra: They must be privy to all the stuff you've done!

Dr. Drew Sinatra: Well, you know, I think this is the most intuitive for our listeners right now, because who out there has gone for a workout with some amazing music on, and you feel like you can just hit your workout so much harder, right? You just feel like you can just push through. And other times in your life, if you're trying to go to bed at night, you might put some like relaxing, calming music on. Or



maybe when you're studying, you might put some ambient type music on in the background to help you kind of just focus on what's in front of you. So, I think, people listening have obviously used music as therapy, as medicine in a way, to help move certain things.

Dr. Drew Sinatra: And so, I was really happy to see this study that came out, that just proved all these things that I just said in terms of people that do high intensity exercise, where they listen to motivational music, they feel like they can sort of, like, push through a lot easier. And they actually feel like their workouts are simpler, they don't have to exert themselves as much as they did without music. So I'm all about music, Dad, I think it's fantastic as a therapy. And I know recently you did a TV program on this, is that right?

Dr. Steve Sinatra: Yeah, it was with Barry Goldstein, and he's worked with Dr. Avram with Healthy Directions. And this was phenomenal, because when I wrote my book *Heartbreak and Heart Disease* years ago, and I was at a psychotherapy training program, I came across some interesting stuff about music. And here it is in a nutshell — when a mother is carrying a fetus, and usually a mother's heartbeat can go between 60 and 120, I mean, usually. And since 60 to 120 encompasses a lot of musical scores — and you're a musician, I mean, you know this better than I do. But basically there are certain musical recordings, like the Brandenburg Concerto, for example, or Rival, or The Planets, Gustav's The Planets. So in other words, these forms of classical music, they have beats between 60 and 120.

Dr. Steve Sinatra: Now, this is what I read about years ago, and I wrote about it in my books. If a mother is pregnant and she's carrying her fetus, right? And if she listens to music, or if she's into music, and she delivers her baby, right? And if the baby is sort of drawn to certain types of music, it might be because of the experience in utero. In other words, the mother's heartbeat is going between 60 and 120, or most people's heartbeats go between that. I mean, 72 was sort of quote-unquote "average." But if in utero, the infant is sort of hearing this, issues and protoplasm of the mother, when the baby is born, that infant may be attracted to certain types of music. And this is what I said on his show. And wouldn't you know it that the producer, the woman who interviewed me, was the product of two musicians.

Dr. Drew Sinatra: Beautiful.

Dr. Steve Sinatra: Two classical musicians, both her mother and her father. And she said to me, "Is that the reason why I absolutely love hearing my parents play music? Is that the reason?" And I go, "Yes, that's the reason!" In other words, it brought back a pleasant experience while she was being in the womb.



- Dr. Drew Sinatra: Yeah.
- Dr. Steve Sinatra: Think about that, that's incredible. Absolutely incredible. So I just feel that anybody, if they're pregnant and if they like to listen to classical music, please do it. Because those overtones are being assimilated by your growing baby, it's just great stuff.
- Dr. Drew Sinatra: That is great stuff, Dad. Thanks for sharing that, I like that story.
- Dr. Drew Sinatra: One piece of the research that I found really interesting was that they found that if you wake up your alarm clock with a pleasant tone, instead of that (Drew makes beeping noises), you actually wake up with less grogginess and you have more alertness. And I thought that that was really cool, because gosh, for how many years, Dad, did we all use those terrible alarms that were just...all of a sudden, you have this massive cortisol surge in your body and adrenaline is pumping through your veins when you don't need to have that. You can have some just calming, relaxing music in the morning to wake you up, instead of the jarring alarm.
- Dr. Steve Sinatra: Drew, you're absolutely right. When I used to take call every other night for years as an emergency room CCU, ICU cardiologist, that phone would ring nonstop in the middle of the night. I got to tell you. And you're right, you get jarred from sleep, and it took me years to really trust going back to sleep once I finally got away from those early midnight, late midnight, early AM phone calls. Because it does jar you, and it does make a difference, I mean, it really does. So our takeaway here for our listeners are basically is this, or our takeaways are, is — if you're attracted to a certain piece of classical music, that might be an earlier reminder of a pleasant experience of you in your mom's womb. So I want to put that out to our listeners.
- Dr. Drew Sinatra: Absolutely, yeah. I mean, if you want to use music for whatever it is — studying, exercise, relaxing, waking up in the morning — use it, because music's fantastic.
- Dr. Steve Sinatra: It is. And by the way, the rock music, or that rap music, what's the music where it's really...
- Dr. Drew Sinatra: Heavy metal type stuff?
- Dr. Steve Sinatra: Yeah, the heavy metal music, had a negative impact on your autonomic nervous system, as opposed to classical music having a positive impact. So.
- Dr. Drew Sinatra: That makes sense.



Dr. Steve Sinatra: That's another takeaway.

Dr. Drew Sinatra: Before we wrap up the show today, we're going to share a little **Wellness Wisdom** with you. One of the other trending items that we came across with something that we talk a lot about in the show, and that is how the overabundance of air pollution we all live with impacts our health. Now according to a new Stanford-led study from this past February, children exposed to air pollution — such as wildfire smoke and car exhaust — for as little as one day may be doomed to have higher rates of heart disease and other ailments in adulthood. As a dad who just had his third child, this is very disconcerting to me, and something that I obviously want to protect my children. And you and I have talked a lot about detoxification, Dad, and hydration, to be lowering our toxic load in our bodies. So let's each of us share one piece of our advice with our listeners about how to rid our bodies, and our children's bodies, of these toxins. You go first.

Dr. Steve Sinatra: Oh, any toxin? I mean, oh my gosh, I mean, I think the best way to detox...I don't know if you can do this with your kids, but I love the sauna. I just absolutely love the sauna. You know, I think you can bring young children into a sauna, especially if you sit them with you.

Dr. Drew Sinatra: You can.

Dr. Steve Sinatra: My God, when I was in Scandinavia and in Italy, I remember being in saunas with, you know, younger children. But they weren't alone, they were always with parents. And I think if you can teach children that sweating is a healthy thing, really healthy for the body, that's really good. The other thing that children really gravitate to, Drew, and I know your own children did this, and this is probably what are you going to say, I don't know. But the trampoline, you know, the bouncing on the trampoline...

Dr. Drew Sinatra: Lymphatics.

Dr. Steve Sinatra: ...detoxes the lymphatic system. So these little trampolines are about three feet across, you know, some of them are bigger, where if you could rebound a little bit, this is moving the lymph in your body. And when you're doing this, this is awesome for facilitating a lot of that stuck garbage, you know, chemicals, petrochemicals, even mercury. I mean, all this stuff that's in our lymph, as well as our subcutaneous tissues. So, sorry I gave a second pearl...maybe it was your pearl, I don't know.

Dr. Drew Sinatra: No, I think two pearls is great. And I want to comment on your first pearl, Dad, the sauna. You're right, I mean, I've gotten Kai into it, my nine-year-old son, and



Luca's just getting involved in it, and he's five and a half. But it takes a little getting used to, a lot of the kids don't like the heat. But if you do get them used to it from a young age, they do really enjoy it. And I've had fantastic times in the sauna with Kai, I get to bond with him there, actually. So, you get the bonding effect and also the detox effect.

- Dr. Drew Sinatra: Now, for my **Wellness Wisdom** piece, I wanted to mention air purifiers, something that you and I have talked a lot about, as well. But you can filter out some of that particulate matter, really good for the wildfire smoke that occurs on a yearly basis now in California. And it can also take away VOCs, and it really cleans up the air, makes it smell better, and I think it's a great way to reduce that toxic burden from the air we breathe.
- Dr. Steve Sinatra: Yes, well said. A lot of good information for our listeners today, I'll tell you that.
- Dr. Drew Sinatra: Absolutely.
- Dr. Steve Sinatra: And a lot of this stuff you won't be able to read in books, either. This is good stuff.
- 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 like 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.
- Dr. Drew Sinatra: Well, thanks so much everyone for joining us. 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.