Optimal Health & Wellness at Any Age
Guest: Steven Masley, MD, FAHA

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Dr. Mark Menolascino: Welcome to the Women's Heart Health Summit. I'm your host Dr. Mark Menolascino, Director of the Meno Clinic in Jackson Hole, Wyoming. This is your chance to hear from international world experts on how to achieve optimal health, optimal vitality, and to prevent heart disease.

We're joined today by Dr. Steven Masley. Thank you so much for being here, Steven.

Steven Masley: I'm delighted to be with you.

Dr. Mark Menolascino: Well, let me tell our viewers a little bit about you today. Steven Masley, MD is a physician, nutritionist, trained chef, author, and the creator of the Number 1 health program for public television *30 Days to a Younger Heart.* He's a fellow with three prestigious organizations, including the American Heart Association, the American College of Nutrition, and the American Academy of Family Physicians.

His research focuses on the impact of lifestyle choices on heart health, brain function, and aging. He's a best-selling author and has published several books including *Ten Years Younger, The 30-Day Heart Tune-Up, Smart Fat*, all of which are on my shelf right now. And his latest book *The Better Brain Solutions*, plus numerous scientific articles.

His work has been viewed by millions on his *PBS Special*, the Discovery Channel, *The TODAY Show*, and over 600 media interviews. He continues to see patients and publish research from medical clinic in St. Petersburg, Florida and offers weekly blogs on his website drmasley.com. Again, Steven, thank you so much for joining us today.

Steven Masley: Really I'm delighted to have the chance to talk with you.

Dr. Mark Menolascino: So you're someone that I've known for almost a decade now. You're someone I admire, I respect. I've always enjoyed listening to you speak. You're one of the few doctors, Steven, that blends nutrition and medicine at the same time. How did you come up with the right path to put all this together for yourself?

Steven Masley: I think I got frustrated as you can imagine being a regular physician. So if I think back to the 1990s I saw 30 to 35 people a day. I tried my best, but honestly I don't think I really helped transform anyone's life. I saw their acute problems, I refilled their medications, I referred them. But I cannot honestly say despite my best intentions that seeing 35 people a day I made that big a difference. And somehow I got interested in changing that.

And I think there was one day I saw 10 people in the same morning who all had type 2 diabetes and I realized I didn't do anything to fix their Diabetes. I was just focusing on their chief complaint that day. And I said there's got to be a better way. And I started doing group visits.

So I would start taking people who had heart disease or Type 2 Diabetes, which is like the number 1 cause for your heart disease, and I would see them for a 2-hour visit, 20 people at a time. And I'd spend an hour or two talking about lifestyle and how they can use lifestyle to get out of their meds, feel better, and reverse Diabetes and reverse heart disease. And I had really amazing results.

And I think that right there totally changed my career as a physician. When I realized if you give people the tools they can transform their life, they can get off their meds, and just using diet, food, nutrients, exercise, stress management, it's amazing the results you can get.

Dr. Mark Menolascino: I remember the first time we met you told me about your group visits. And I'd work with Dean Ornish and his group visits. And I saw the power through you of what that was doing to transform your clients. Where do you see the whole group visit model going now that we have the

internet with Facebook, with this ability to connect at a higher level? Can we level the two, Steven?

Steven Masley: Well I can. I think you're doing that. I'm trying to do that. It's like having a summit. It's creating an interactive environment for us to talk, share ideas. People to put in comments, ask questions, get answers. I think it's like within in my group one person would dare ask the question that 20 people were thinking. But they all go the answer by hearing that question.

So I'm sure it's going to be much the same with your summit. You're going to have people who are asking a question, it gets answered and everybody gets their needs met that way. So I think it's a lot easier to do today with all the tools we have on the internet than it was in the 90s when it meant having to drive to a clinic, sit in a classroom and do this in a group fashion. I think it's got a lot easier for people to get the tools to make a big difference in their life.

Dr. Mark Menolascino: Well this whole empowering people with information to share knowledge, to help change behavior, and I think we tell people to go exercise. But you're actually healthier if you go exercise with your friend, or with your partner. There's something about the socialness of these lifestyle changes. Do you agree with that?

Steven Masley: Absolutely. And you're more likely to do it because if you go to a 7:00 appointment with your buddy, you're not go to stand him up. They're going to be saying like hey dude, where were you? I was there all by myself. No. You're going to crawl out of bed and you're much more likely to do it. I think it's more fun. You can support each other. There're all sorts of benefit to cooking together, eating together, doing stress management together. All those things go better with a friend.

Dr. Mark Menolascino: Well I grew up in an Italian family around a big round table having dinners. And we talked about the Mediterranean Diet and how healthy that is for people. You really wonder how much the socialization of the dinner experience has the secret sauce to that food plan.

Steven Masley: Well isn't that kind of amazing. Because you're right it's not just Mediterranean food ad Mediterranean spices, but it's actually a leisurely, joyful way of eating that improves your digestion, you're not rushing through a meal. You have wonderful conversation. You laugh. How much is it that it's this delightful leisurely evening over food with family and friends?

I think some of the health benefits clearly come, not just from the nutrient content, but that different way of eating. I wish my patients, who oftentimes

rush through meals, would get better at knowing the joys of cooking together, eating together, and making it a full social event. I completely agree with you.

Dr. Mark Menolascino: Well, Steven, there's many things that impress me about you. And one is how you've waded through the information of nutrition. You did an internship as a cook at the Four Seasons; is that right?

Steven Masley: Yes.

Dr. Mark Menolascino: Can you tell us about it?

Steven Masley: That was back when I was doing group visits. So that takes me clear back to the 90s again.

Dr. Mark Menolascino: A real pioneer.

Steven Masley: Here I'm giving these group classes for these people. And to be honest I gave too much detailed information. How many grams are bad, how many carbs, how much protein, how much fiber? And one of the ladies in the group once took me by the hand and said, "You know what, if you'll just give me a recipe that my husband and I will enjoy eating, it doesn't take me more than 30 minutes more to cook, and I can get the ingredients at my local grocery store, that's all I'll make and that's all I'll eat. I'll promise you forever and ever more."

That was like an ah-ha moment where I went, wow! I need more recipes and they better taste good. So I'd actually done some catering in college and I got paid to cater dinner in college. I wasn't a chef, but I thought okay, I got to take this more seriously. So I actually took a month leave of absence from my clinic, didn't get paid for a month, and worked in a restaurant as a volunteer for a month.

Dr. Mark Menolascino: Absolutely.

Steven Masley: They thought I was kind of crazy but I picked a really good restaurant, one I liked, and I said can I just come in? I've been through formal chef school. And I've worked my but off t o help just get in through the kitchen. But it was a healthy restaurant. I liked the menu. And they encouraged me to apply to the Four Seasons. They go you did a good enough job. And you know more about food than most of us here because I was a nutrition nerd. So they said, "You should apply for a chef mentorship." I said, "Where's the best place to go?" And they said, "Well the Four Seasons, duh."

I applied and I got in. And I spent a year learning how to make. So I will not say everything the Four Seasons is healthy. Of course not, they have indulgent food as well as healthy items, but I think one of their themes was we're going to meet your needs. We will never say no if you make a request. So I realized you could make healthy food taste fantastic and that for the last 30 years I've been working on. And I keep writing recipes in all my books. I always put in 50, 75, up to 100 recipes.

And I'm still working on it now. I'm working on a Mediterranean cookbook. That's my project for this summer is to finish a new cookbook. So I'm still working on how do you make food taste fantastic, easier to prepare with ingredients that you can find, and that your family and friends will love the recipes?

Dr. Mark Menolascino: Well, Steven, that's such a great point. I think we try to make things sometimes too hard for our patients and our clients. And they think it's going to be too hard or not taste good, or not be fun. And you really bring the joy with your passion into this. And that's a premise I hear from you is that it's got to be easy to do, doable and taste good, and you've found some of the secrets to that. That must be really fun for you to keep growing with that.

Steven Masley: And it's focusing on ingredients. I spent this summer in Europe searching and kind of looking at recipes. And what are regional dishes and how to make them? And their ingredients are fantastic. In the US and Canada we've got to get more picky about the ingredients we've got. Because its half the price for far better products they've got in Europe. So we are at a disadvantage; there's no doubt about it.

It doesn't mean we still can't find good food, but it's focusing on what's regional, what's local, what's in season. And it really helps your food taste better if you can find local seasonal food and prepare it, and just have fun with it. And it's so important for our heart. You know women and heart disease it's the number 1 killer for women. I think we can prevent 90% of all heart disease and reverse heart disease for those women that have it, and for me too by the way as you know, by helping people make the right food choices.

Dr. Mark Menolascino: And, Steven, what do you think we did wrong for women and heart disease? Why did they not get the attention of how they present differently, how they need to be assessed a little differently? And when

they have events like a heart attack they just plain show up differently. How did we get so far off do you think?

Steven Masley: You're making a really good point. One I think it was stupid first. I'm sorry to say it that way, but we use to treat women like little men, and they're not. They're hormonally different. Why they have a heart attack is different. Their symptoms are different. So it was just stupid to do studies on men and assume we could apply those results to women. That was dumb.

And I think the whole medical industry back in the 80s and 90s was complicit in that. But I think we've realized is like satins don't work that well on women. They're far less effective. And yes, if you're a guy and you've had a heart attack, and you have high cholesterol, a statin in spite all their side effects has some health benefits. But for women it's far less so. And none of the data have really shown conclusively that for women only statins make a difference.

So for women lifestyle is far more important. They don't just clot like a guy does their arteries might spasm. So they have different symptoms. They have different mechanism for why they get heart disease. And the treatments don't work the same. And I think for women lifestyle really has to be much more important, much greater focus; food, nutrient, fitness, stress management. For women that's the real thing we should be focusing on whether they get any medications or not. I think for all of us it should start with lifestyle, but I think the data for women is it's just absolutely essential.

Dr. Mark Menolascino: And I know for you, Steven, you treat the whole person, the whole woman. So what's good for her heart is good for her brain, it's good for her belly, it's good for her skin, it's good for her hormones. They're so tied together. And the more you work with your clients, and the more you're see this power of nutrition, power of food, and unique as women, do you see even more how that all ties together?

Steven Masley: Absolutely. So in my clinic we measure carotid IMT. It's a measure of artery plaque thickness; basically how old are your arteries? And we've published multiple papers looking on what factors predict are you growing plaque or not? Obviously, as we get older it does. But like the traditional one's cholesterol had very little predicative value for whether you grow plaque or not. And even add less value for women.

Things that really were fiber intake from food. Fish oil, fitness, specific fats like using olive oil and nuts. There were specific lifestyle choices that predict that if you're going fat or not. We published on that. We noticed that your

stress levels make a difference. Food's important. There're specific nutrients like magnesium that were extremely important in predicting shrinking plaque and not growing plaque.

So food, nutrients, fitness. Fitness was actually our most powerful predictor. So it is not how many minutes you do per week it's how fit you are. And stress management. I can't emphasize that enough that if we're stressed out we grow more plaque. And we're not going to get rid of our stress so it's proactively managing it, like mediation or using HeartMath, or some technique to get us calm and lower our cortisol each day.

And when you put all those together it's far more effective than doing one by themselves. So I think the combination of food, nutrients, fitness and stress management combined it has such an amazing benefit and it really can transform someone's life and even shrink their arterial plaque.

Dr. Mark Menolascino: Well I would encourage everybody viewing to stop, rewind the last five minutes, and listen to it again. Because that's really your life in a nutshell is looking at all these different aspects. I've always been impressed, Steven, how you and your clinic are veracious in reading research, you follow the literature, but you also do your own clinical trials. You get your own data. You see what works in your hands. And you have that validation. It's a wisdom of experience that you bring to every patient. And you really do look at the whole person like that.

You mentioned stress management. Dr. Rosen at the Cleveland Clinic Center Wellness he said when they looked at the Cleveland Clinic employees they went after smoking; try to get everybody to stop smoking. He wishes they went after stress management first because he felt like that was what the most important thing is.

You mentioned HeartMath and some other techniques. How do you help guide people into incorporating something stress management into their life?

Steven Masley: Well first if we don't measure it and show people how they do it, often we don't do it. So we measure cholesterol and we put all this emphasis on it. But how do we measure stress? Well in my clinic we've added a couple of tool measurements.

One I do like a DHEA sulfate level to actually look for people with chronic unmanaged stress though levels plummet. And I can actually see physiologically, wow, you've been stressed for some time. But what's really

cool is now we do HeartMath on every patient like a vital sign. I have them hook a little clip on their ear and we look at their heart rate variability. And it should smoothly go up and down as you know. And I give them a heart map score as to, are they able? Do they know how to get calm?

And I was pretty shock after 100 people are looking at the data the relationship between whether they know how to be calm or not and whether they have plaque in their arteries, and what their DHEA hormone levels as they're managing their stress.

Dr. Mark Menolascino: They all pull together.

Steven Masley: And the correlation was really powerful between stress and artery plaque. So and now I use that two-minute session is like a blood pressure. Are you good at it? And if not, anybody that's not good at managing their stress I want them to practice.

And I think given the amazing data is that just 10 minutes a day is really powerful for lowering cortisol and making a difference in your health. It doesn't take hours. You don't have to do it multiple times per day. Even two minutes probably has some benefits. So short regular ability to learn how to get calm I think is essential for stress management. Everyone should know how to get calm. Everybody.

Dr. Mark Menolascino: That's such a great point, Steven. And you mention HeartMath that we use as well. And a lot of people think they know how to relax, but unless you objectively get some biofeedback to measure how well they are they may not be doing it very well. And I think teaching them and giving them the feedback that they actually are in the right response is very powerful.

Steven Masley: I can't agree more. And I'm actually surprised though how many people say, oh I'm good at meditation. But I check and they're like totally in the red. They're agitated when they're trying to meditate. And they're really not successful at all. So it's more than just are you taking the time. It's like exercise. Whether you spend minutes or not the amount of minutes you spend per week did not predict whether you're growing plaque at all; your fitness did.

But similarly, it's not how much time you spend meditating in prayer, it's are you effective at getting calm. And HeartMath is a feedback tool that actually

measures your effectiveness of being calm, and relaxed, and helping manage your stress.

Dr. Mark Menolascino: Well they talk about practice makes perfect. And that may not be true if you're not doing it right, practice can just make it permanent. We've seen the same thing where some people think they're good at it, but when we hook them up they're actually are in the red and they're not very well.

What are some of the other simple things our viewers could do? You talked about exercise and being effective, stress management, and doing it effectively looking at the color and the quality of their meals. How about the woman in Chicago in February? Where does she get the relief nutritionally? Where does she go to find it? It must be so difficult for that person? Any suggestions for her?

Steven Masley: Well February's Heart Month so it's always a good time to think about how to make your heart better, right. So I've tried to make it simple as I said. Fiber, vegetables, fruits, beans and nuts. I don't mean fiber from eating like cereal, and bread, and whole grains. I mean fiber from vegetable, fruit, beans and nuts. I think that was our strongest predictor. So we want fiber.

So we also need healthy fat. I'm not a low-fat advocate. I know there's still people out there, but I think the evidence really doesn't support it. There's good fat, there's bad fat, there's neutral fat. And we want more good fat for our heart. We want more olive oil, we want more nuts. And the data is that if you eat more of those you have less risk for a heart attack and stroke. As an Italian you probably known that your whole life.

And fish, like fatty fish, like wild salmon, sardines, seoul [ph], muscles, those are really good for our heart. We want dark chocolate. Chocolate is really beneficial for your blood pressure, your heart, your brain, and we want more. Not milk chocolate, candy, we want dark chocolates. We want healthy fat. We want fiber.

We also want any inflammatory that comes from herbs and spices. So use more Italian seasoning and herbs like thyme, and oregano, and rosemary. And curry spices are very anti-inflammatory. We definitely want more garlic and more ginger. So more flavor in our food from spice, more healthy fat, more fiber. I think those are like the biggest easy tips I could give that if you're going to eat more of something those would be foods to eat more of.

Dr. Mark Menolascino: Well, I think a lot of people think they're doing it right by eating more fiber with the fiber cereals. That they're getting some fats or diet but they're eating the wrong fats. And so there's so much misinformation out there I feel like a lot of people come to see me. They're trying to do it right but they're just a little bit off track a little. How do you help your clients sort out what they hear; where they go for resources? I know they probably come to you also with a big stack of things right off the internet, and how do you help to guide them get good information besides what you provide for them?

Steven Masley: Well, first would be recipes; giving them good recipes to use. And foods like a top list of foods to eat, foods to avoid. One of the big things I give for foods to avoid is sugar and flour. I mean glycemic load is how high your blood sugar goes up after a serving of food. To me that's a critical measure of your risk for heart disease. Far more important than your cholesterol level is your blood sugar level.

And I think the big things of the things to add, I already mentioned them, fiber, healthy fats, spice and herbs. But things we want to avoid are sugar and flower. So think about anything with sugar or corn syrup, high fructose corn syrup. And flour whether it's whole grain or white flour it has the same sugar response as a bowl of sugar. If you could just make those simple changes I mean that's really powerful and makes a big difference in your life.

Dr. Mark Menolascino: You know, Steven, I've heard in your lectures you talk about a slice of bread is like a handful of sugar, or a slice of bread can act like a can of soda pop. And I think that's something that really shocks people when they find out how their body really responds to these different foods. Do you feel like different people respond differently, as far as a slice of bread may work in one person differently than another person? And how do you personalize those type recommendations for people. I love your absolutes they make sense, but then go in the next step for the nutrition.

Steven Masley: I think I heard you say how do you personalize it? And you're right everyone's different. And some people can handle a slice of bread better than another. But the highest risk would be if your blood sugar's up that bread's really going to be bad for you, and if you're overweight, and if you don't eat fiber.

Truth be told is if you're like an athlete and you're exercising 20 hours a week, you can probably get away with having a little whole grain bread and it's not going to raise your blood sugar. But if you're someone who works at a desk, 50, 60 hours a week, and you're not active, and you don't eat well, that has a

much bigger affect. So the healthier and the more active you are, the more glycemic load you can tolerate safely. And I also think you have to customize it and look at their lab work. If someone has high blood pressure, high triglycerides, high blood sugar, I mean food for them is like a toxic.

Dr. Mark Menolascino: Yes.

Steven Masley: And if you're an athlete and super healthy and you eat really well, can you add a few treats on the side like occasional bread or something, well, yeah. I mean realistically you're right you can't.

Dr. Mark Menolascino: One thing you shared with me one time is that you consider one of your recipes almost like a prescription. That a recipe for a meal is like giving someone a prescription for medication. And I think that that's such a great way to think about food and the way that as a physician you really prescribe food as medicine.

Steven Masley: And you've heard me speak. I've spoken to over 30,000 physicians at various medical meetings; doing conferences for doctors, physicians, nutritionists, pharmacists, dentists. And I think you're quoting me for what I've said.

Dr. Mark Menolascino: I am.

Steven Masley: At the end of the talk you've got to stop just refilling prescriptions and start giving people recipes. Because the recipe is going to help save their life and the prescription is just putting on a band-aid to cover them for the next 30 days. You're making a really strong point. And that's one I've been trying to share nationwide with medical groups is that, yes, for every time you fill out a prescription you should at least be giving one recipe to go along with it. I'm glad to hear you quote one of my theme songs.

Dr. Mark Menolascino: Well, I do give a lot of recipes out, but I'm going to give every single person one recipe from now on. I love that idea. Steven, so many come in and they think it's all about calories in and calories out. If I just count enough coming out, I can have enough coming in. But what I'm hearing from you is that calorie is not a calorie, depending on who it's in and what source it's from. Do you agree with that?

Steven Masley: Yes, totally. It's kind of ridiculous to think 100 calories of broccoli has the same impact as 100 calories from candy. I mean broccoli makes you full and satisfied, it makes your arteries dilate, it helps prevents your cancerous. And 100 calories from candy just makes you hungry. Your

sugar goes up rapidly and it plummets down. Your insulin goes up to drop it and you actually increase your hunger.

So one calorie makes you full and nourishes your body heart and soul and the other calorie is killing you and making you hungry at the same time. So I think the idea of counting calories is just dumb. Let's get over it. And how about the other one? How about you just need more willpower. That's ridiculous. We're not going to be able to overcome hormonal drives and cravings and all of that by counting calories. We've got to be a lot smarter and be a lot more helpful. And help people choose foods that make them full and satisfied, not foods that make them hungry and give them cravings, if they're going to succeed.

Dr. Mark Menolascino: Well, I love how you personalized the whole philosophy of how you see clients. And I think so many people listening have been told by their doctor, well if you're trying to lose weight it's just eat less, exercise more, and everything will magically be better. And I don't care that you're tired all the time, and you don't feel good, and you have brain fog, you have irregular cycles, or your menopause is killing you; I'll see you next year. Just eat better and less in less out.

There's so much medicine going on that doesn't really help people when they see their doctor. How do we as physicians do better? I know you're teaching and you've done tens of thousands, but how for doctors listening or friends of physicians that are listening, how do we help them to be better, Steven?

Steven Masley: We've got to give them the tools to exceed. I just think it's insulting to say someone eat better, exercise more, and use more willpower. That's just rude.

Dr. Mark Menolascino: And it doesn't work.

Steven Masley: We've got to give them tools, like your new book. That's an awesome tool. I love your new book.

Dr. Mark Menolascino: Thank you.

Steven Masley: It gives people the tools on what to do. But the problem is you can't do that in a seven-minute office visit. You can't really transform someone's live. So I think people have to be less dependent on their doctors. They've got to look for tools they can use that are helpful that their needs. They should be customized. They should ring true with them. And you're saying what do we do as medical providers? As medical providers we've got to

give people the tools so they succeed, not flippant advice that doesn't really do them much good.

Dr. Mark Menolascino: You were talking about blood sugar earlier and I think this is a great example. There are these normal ranges of blood sugar. And in medicine we let it trickle up until its 126 and today's 127 we say you probably have Diabetes. We just wait in medicine for the numbers to hit a certain mark and then we do something about it. It's more reactive medicine but you practice proactive medicine. What number for blood sugar should someone look for on their health fair or on their blood test? And then what number should they get worried about it?

Steven Masley: Well, anything over 85 to 90 increases your risk for heart disease. And when you go from 90 to 100 you just increased your risk for Alzheimer's.

Dr. Mark Menolascino: Yes.

Steven Masley: So 100 is a convenient cutoff point for normal on a lab test. But that doesn't make it desirable. On our labs anything over 95 is considered unacceptable. That it might be in the normal lab range but that's based on an average person. Think about it. A third of Americans are obese; actually more than that. And a third are overweight. Only a third have normal weight. And a third of people with normal weight are only normal weight because they have like cancer or something and they've lost weight.

So if most people, three-fourths of people, are really truly overweight it's impossible a blood sugar would be normal in most people. So we have to pick better standards. Functional medicine is how do you improve function. So I'm aiming to improve blood sugar and insulin levels; insulin being the hormone that controls that both so you're at more optimal levels. And that's what we should be looking for is what's optimal for physiologic function not a disease state.

I probably use 110 as a cutoff when I start people on diet. I don't wait to 126. My bottom line is if you can't get your blood sugar below 110 I put you on a diabetic med. And there's no excuse for being at over 90 and absolutely no reason to be over 100.

Dr. Mark Menolascino: Well I think those numbers would surprise a lot of doctors. Because I see the same thing where people have a blood sugar of 100 and they're told that that's okay. But really anything over 90 markedly

increases your heart risk. As you mentioned your brain risk, which I know is one of your current passions. You're already the heart expert now you're becoming the brain expert. I love how you're tying the two together, Steven.

Steven Masley: Well that's really interesting because when we looked at brain function or clinic we showed that if you're growing artery plaque, if you have more plaque in your arteries, those people also had a significant drop in cognizance brain and brain processing speed. And the people who are eating well and shrinking their plague, their brain speed performance goes up.

So they are intimately related. The same lifestyle choices food, nutrient, fitness, stress management that protect your brain, shrink your artery plague. And those that help your artery heart are helping your brain too. And you said like the gut in your bones, I mean even your skin, it's all interconnected.

Dr. Mark Menolascino: Well that's one of the beauties of this functional medicine concept is that you're treating the root cause and the whole person. You talked about averages and I think the current average in America is diabetic and obese. So if your doctor's treating you as average, then I think you need to demand either a different doctor or a different set of standards from your doctor. But average is not our goal we want to all be optimal. What are some of the easy things that some of us could do, Steven, as far as incorporate in our lifestyle before we see the doctor?

Steven Masley: Well if you're relying on your doctor, sadly you know you're going to get at best average. If your health is falling apart that's acceptable in medicine today. I don't even understand it anymore. It's inconceivable to me the standard of care that we are offering people. I really believe that we haven't been focused on function.

But the key is it's not relying on your doctor. Your doctor can be there to help you diagnose cancer, or if you have a heart attack, or if you're in a car wreck. In those situations your doctor can make the difference between life and death. But 99% of the time it's up to us, all your listeners, all of you who are tuned in right now, we're the ones who get to make a difference. We're the ones who get to choose the right food to avoid foods you might be sensitive to. To meet our nutrient need like fish oil, Vitamin D, Vitamin K, magnesium; things that are essential for our heart.

We get to choose to be active and improve our fitness. We need to take more control of our health. And when we do take more control we're going to get better healthcare. My goal is that people don't need their doctors, they don't

need their meds. I'm not against the healthcare that most doctors and pharmaceutical products provide. My goal is that nobody needs that stuff anymore. And I think we can really honest again prevent 90% of heart disease, especially for women. We just have to make better choices.

Dr. Mark Menolascino: Well, I think that's what part of the beauty of your messaging, Steven, is that you're an MD. You're trained in the medical model and if you have pneumonia you'll take an antibiotic because an acute care of the medicine works really quite well but it's this chronic machine that we've developed in medicine to treat chronic illness, to perpetuate chronic illness.

That's really up to the consumer to change. And there's so many resources now for consumers like our conversation here, your book, other things that are on the availability. Do you really see that it's going to be the consumer that helps change the whole healthcare system? And if that's true, it's probably the women that are going to drive this change.

Steven Masley: Oh, absolutely. Women make 70% of healthcare decisions. They decide for their husbands, their kids, their parents. Let's face it, women should be and are actually in charge of healthcare on a daily basis for people at home. And that's what it should be. People should be reading up, informing themselves, making good decisions, and acting on it.

And you don't have to wait for your doctor to decide hey, I should eat better, meet my nutrient needs, be fit, and manage my stress. You can do that on your own and use your doctor for that rare like pneumonia. When actually we can do someone a lot of good if they get pneumonia. But the goal is to keep them healthy enough that they never get pneumonia. Just like they never get heart disease and they never need us. That really should be our goal.

Dr. Mark Menolascino: Well, this is such a beautiful messaging that you have. And I see it every time you speak and in all the works that you write. Like I said, I've got three of your books here on my shelf. Two of them I think are signed by you; thank you very much. Steven, if our viewers wanted to connect with you, how do they find you?

Steven Masley: The best way is go to drmassey.com the website. I've got recipes and blogs and lots of free information. My goal is to help transform people's health. And I really enjoy it. I have so much fun making a difference in people's lives. I'm sure that's what you feel as well. And I'm just so gratified that I'm able to help people and make a difference.

Dr. Mark Menolascino: Well, Steven, one thing I've always respected of the many things is that you walk the walk and talk the talk. You talked about being I think about being in Europe on your sailboat eating all summer. But you're always a student. You're learning more. You're inquisitive. You want to do better for your clients. I think that's something that we need to demand of our colleagues is that doctor's need to take care of themselves as well as take care of their clients.

Steven Masley: You got to walk the talk or you're just totally a hypocrite. So I don't ask my patients to do something I don't do myself. It's just insincere. I think we should be able to show hey, our program works, our patients get better. I love being able to say my average patient is younger, trimmer, fitter, mentally sharper, and they prevent heart disease. And it's good for their romantic function too. Anything that helps your heart helps romantic function for men and women. So it's all up, it's all benefit. Just don't procrastinate. This is your chance, this is your time, make a difference and feel fantastic.

Dr. Mark Menolascino: I was just going to ask you, Steven, what would be your message to everyone viewing. And I think I just heard it is you can make a difference, you can change your life, you can change how you feel, and you just need to find people like Dr. Steven Masley to help you do it.

Steven Masley: Well, absolutely. But here's the challenge that I think we're both dealing with. The average person procrastinates until something bad happens to try to fix it. And that's I think natural human nature. The problem with heart disease, especially for women, is the first sign of heart disease in women is death, a heart attack, a stroke, something really bad happened. Don't wait for something bad to happen. You can feel better immediately. Within a few days you can have more energy, be mentally sharper, feel better, better romantic function, lose weight by following the right steps. My biggest take home message would be this is your chance start today.

Dr. Mark Menolascino: So let's empower everyone viewing to make that decision for themselves and call one person to do it with them.

Steven Masley: Awesome.

Dr. Mark Menolascino: So that'll be our challenge to everybody viewing. And, Dr. Steven Masley, thank you so much. I always appreciate talking with you.

Steven Masley: Mark, thank you so much. I really appreciate the chance to talk with you.

