

ADDICTION

SUMMIT



How Stress Pushes You to Addiction

Guest: Mike Mutzel and Noah Thomas

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Dr. Paul Thomas: Welcome to The Addiction Summit day one. I'm Dr. Paul Thomas, your host for The Addiction Summit.

Today's first episode is going to be unique. I'm going to have two guests. You'll normally have one. There's a special reason for this because we're going to delve in in this first session, to some of the factors that lead us into behaviors into addictions. And we're going to have a frank discussion about that. I think you're going to enjoy it.

In the United States of America, more than two million of us have been addicted to opioids. Over 63,000 drug overdose deaths in 2016. That's 174 deaths per day, one death every eight minutes, and 66% of those were from opioids. There are more deaths from opioids than from firearms, homicides, suicides, and motor vehicle accidents combined. Now, two-thirds of us have been overweight and struggling with that issue and food addictions. And while millions of people are struggling with prescription painkillers, heroin, fentanyl, more are hooked on alcohol, sedatives, cigarettes, and technology. We are overwhelmed with stress that's leading us to look for relief.

Now, the Addiction Summit's going to bring you experts, thought leaders, and they're going to share vital yet simple ideas and solutions that will empower

you to take back your health. Children once grew up eating food from the garden, playing with their friends outdoors, and they play until sundown. No concern about their safety. It's a different world, isn't it, for many of us? We will explore the stresses that make us look for relief from food, from destructive behaviors, be it marijuana, alcohol, meth, pain pills, heroin.

The Addiction Summit will help you identify the root causes of your addiction or your substance use or your behavior and what happened to you, help you find approaches to heal depression, anxiety, chronic pain, ADD, ADHD, and so many other chronic things we're now struggling with. We're bringing you support right where you need it, help you know how to eat, what to eat, how to heal, how to get your nutrients, identify and reduce stress, figure out that you need proper and restorative sleep, get you moving again, exercising. We're going to discuss how to heal your gut, the microbiome, what to do about drugs that you might be getting from a doctor and help you rebuild the sense of community.

You can play again. You can eat from the garden once again, develop and regain your enthusiasm for life. Don't miss a single episode if you can help it. I'm going to welcome two guests today and we're going to kick this off in a way—we're not going to see for some of the other episodes, which you are just zooming in on one specific topic.

So I'd like to welcome my first guest.

Mike Mutzel: Good morning, sir. Thanks for coming up.

Dr. Paul: Mike Mutzel.

Mike: Great to be with you.

Dr. Paul: Thank you for joining me for this first episode of the Addiction Summit.

Mike: Very excited. A much-needed conversation.

Dr. Paul: Yeah. Mike is actually a very close friend and that you reached out to me when I published my first book and I was a newbie to this whole world of trying to share information with the world. You're the founder of High Intensity Health?

Mike: Yeah.

Dr. Paul: And this is a company that brings cutting-edge functional medicine, health ideas at the next level.

Mike: Right.

Dr. Paul: You have a huge YouTube following.

Mike: Thank you.

Dr. Paul: And I know you are a master of fitness programs, weight loss, keto. We'll get into all of that.

Mike: Sure.

Dr. Paul: Yeah.

Mike: Yeah.

Dr. Paul: I also want to introduce my partner in this whole venture.

Noah Thomas: Oh, my gosh, it's so nice to see you.

Dr. Paul: This is Bignoknow. Now this guy happens to be my son, so that's why he's so goofy. But, actually, he has his own amazing YouTube channel that deals a lot with mental health issues, addiction issues, fitness issues. But you're going to bring to the table youth. Well, you're both youthful, compared to this old guy. But what we're going to start off with, I think, and just have a free-flowing discussion for our viewers, because so many of us are puzzled about why did we struggle with weight or with addiction.

And could you guys each sort of just maybe start with your story? What was your childhood like? And when did you start maybe choosing drugs or alcohol or behaviors to sort of deal with the stresses of childhood? How about, Mike, why don't you kick us off?

Mike: Yeah. So, my older stepbrother introduced me to drugs and alcohol when I was 9 years old. And at the time, like I had a lot of respect for him, looked up to him. And I thought this was cool, this was novel, and stuff like that. So my adolescence was just like a haze. I don't remember a lot. I had to relearn multiplication tables, ABCs, and all that in high school. And I barely graduated high school.

Dr. Paul: Wow.

Mike: I don't know how I got into college. It was really the will of my dad and like he was really pushing and driving and all that sort of stuff. So I went to Northern Arizona University and then I transferred to Western Washington University. But yeah, so for me though, I kind of hit rock bottom by getting

arrested when I was 15 years old in school. And it was a blessing in disguise. I didn't realize it at the time.

Dr. Paul: Yeah.

Mike: But so, yeah, I went to this Lakeside-Milam treatment center and stuff and realized that, wow, if I continue this behavior, it could lead to something much—because it was just like a little pot here and drug—little and alcohol. You go to a liquor market and stuff like that on the weekend and try to pay someone a little extra to buy you like a Mickey's Ice 40 or Old English 40, stuff like that, right?

Dr. Paul: You never did anything like that, right? Get some older people to buy you something?

Noah: Never. I straight up had a homeless man that I went to every weekend at the same spot. If I got there early enough, he would be functional enough to pick me up some alcohol.

Mike: Yeah.

Dr. Paul: Didn't you get arrested too?

Noah: I sure did. Yeah.

Dr. Paul: That was fun having him brought home by the police in shackles.

Mike: Yeah. But it was a blessing, right? You learn from that. And then so I used fitness as a tool, as accountability partner. I realized that going to the gym hung over or after smoking weed, like I didn't get the results, I didn't have a good workout. So thankfully I had a chiropractor who, at 15, introduced me to fitness and stuff like that, and course corrected. My younger brother, unfortunately, didn't really do that. He continued to use and he, to this day, continues to black out once a week. And it's like it's normal. And he's in commercial real estate.

Dr. Paul: Yeah.

Mike: I mean, he's functioning.

Dr. Paul: Sure.

Mike: But he's really—he hasn't shifted.

Dr. Paul: Yeah.

Mike: And so his brain, I think, is trying to change. So I think it's really important for parents to be aware of this.

Dr. Paul: Yeah.

Mike: Because I had friends in high school, like when I stopped using, friends continue—they continue down that path. And now their lives are in totally different direction than mine. So I think, parents are in denial. They think their kids are not abusing, whatever it is.

Dr. Paul: Yeah.

Mike: Porn, online gambling, like we talked about, the iPhone, like it could be drugs or alcohol or all these other things. It's just behavioral addiction.

Dr. Paul: Yeah.

Mike: So yeah, I think accountability partner is a key. Having a foundation of fitness, I think really, really helps.

Dr. Paul: Yeah.

Mike: Yeah.

Dr. Paul: Ha. So Noah, maybe answer that same question. What in your childhood maybe lead you down that path of trying drugs or alcohol?

Noah: So, I think it's worth saying and being very transparent with the fact that I am presently 11 days sober right now.

Dr. Paul: Wow.

Noah: And it's a big deal to me. It's a big 11 days. And I feel like it's worth mentioning that I'm coming at this from a ton of experience from the sense that I've been trying to get sober and stay sober since I was 19. I was strung together one year, twice.

Dr. Paul: Can you share how old you are?

Noah: I'm 31.

Dr. Paul: That's 12 years.

Noah: That's 12 years of fighting this battle. And then I've strung together two years once, multiple months in between a ton of chaos, wreckage, mental health problems, in between. And so, I think, hindsight being 20/20, when I look back in my childhood, I can start to understand certain reasons that

perhaps I got into alcohol. But quite frankly, I look back, initially, my childhood as being very fun. I grew up in a fun neighborhood. I had supportive parents. I had a lot of friends. I just was having anxiety that I didn't really understand at the time.

And I really did have a cliché and classic experience with alcohol where I tasted it when I was 13 years old. And I thought it was the greatest experience of my entire life. And I can tell you very firmly that I've been chasing that feeling since I was 13 all the way until 31. Now, what's changed is that I've gotten older and I have more things on my plate that I would like to do and things I'd like to accomplish, people I'd like to help and know, marriage, responsibility, and mental health issues. And I always end up getting drawn back to alcohol because it does something for me.

Dr. Paul: Yeah, yeah. I've heard it said that initially your substance use or your behavior is actually the solution for something, right?

Noah: Absolutely.

Dr. Paul: So I know, for me, I didn't notice that I was anxious. I was a very high-functioning successful athlete, student. But I was anxious and I didn't realize it. That's how I was cut out. So when I had alcohol, I had that same 'a-ha, ooh, this is better'.

Noah: Something got better.

Dr. Paul: It was this relief. And then it's like a mal-adaptive thing where you just keep chasing that relief.

Noah: And when then you kind of become numb to the fact that it instantly, in that moment, I definitely didn't realize I would be forfeiting my energy, attention, love, focus instantly in those times of reaching out for it from everything else. I've been cutting myself off from myself, from my friends, from my family, from my personal growth, from my maturity. And I'd be opening up a world of depression potential, anxiety potential, immaturity, lack of understanding how to live life and grow up. It seemed like it was just all good then.

Mike: Yeah.

Noah: It's only when I've gotten older that I've realized that it's been the single greatest struggle of my entire life.

Mike: Yeah.

Dr. Paul: I happen to also be a pediatrician. And in my practice, I've got thousands of teenagers. And I tell them, because I've seen it over and over again, that single decision that you make to do drugs, to chase high, whether it's marijuana, alcohol, or something else or even—so many people are getting addicted to their screens, right, so video gaming. And it's absolutely derailing their lives.

So if you're young enough that you haven't gone too far down that path, just be aware. Parents, I'd like to highlight one other thought, we were driving up and thinking about—because he had a good childhood—I'm his dad—of course, he had a good childhood, right? But we had bad food in the house, right? You were mentioning with chasing that sugar high.

Noah: Sure.

Dr. Paul: We had—

Noah: Anything that stimulate dopamine, I'm on it.

Mike: Yeah.

Dr. Paul: Yeah.

Mike: But we didn't know that back then. In the 90s and so forth, we didn't know. Well, hydrogenated oil science started to come out. But all of the link with MSG and things like that, with food additives, we didn't really know.

Dr. Paul: Right.

Mike: But we too, grew up in Costco stuff, a lot of sugar. And could that have perpetuated this cycle right, where your brain and your cell membranes are not functioning properly, so you're chasing something else.

Dr. Paul: Yeah.

Mike: I think that's a major role.

Dr. Paul: At the cellular level, your cells want to feel better. And then at the whole dopamine level, I mean, food, sugar stimulates dopamine.

Mike: Yeah.

Dr. Paul: When that's not working, well, maybe a little alcohol will stimulate it better. If that's not working, I can assure you meth or heroin is going to really stimulate it better. But no matter what we do to stimulate our dopamine to feel better, when we remove it, we go into that deprivation and withdrawal.

Mike: Yeah.

Dr. Paul: And it's painful.

Mike: Very.

Dr. Paul: It's painful. So you mentioned that exercise has helped you a lot in moving away from that sort of pattern of addictive behaviors in life.

Mike: Right.

Dr. Paul: How about you, Noah? What things have ultimately helped you move away from that? I mean, this is fresh for you, so you can actually—

Noah: Well, it's fresh this time.

Dr. Paul: This time, yes.

Noah: It's fresh this time. I've been in and out of 12-Step Programs. Like I said, I've been able to put together some time. I think what always ends up leading me to at least the initial cry for help is that I can't really look in the mirror so much and I can't see something I enjoy back. I feel like a pain inside, an internal struggle.

And then as I get older, I'm realizing that professional opportunities are slipping through my fingers. Physical opportunities, I'm 31, I'm in my, well, teetering my physical prime and towards the end of that, I can't get much out of myself like that, relationships with my wife. I guess the gravity of the potential consequences and then the progression of my disease, they're going hand in hand.

They're both going up. And I feel myself getting closer and closer to something dangerous and irreparable, which just brings me to fear for start. And then I'm surrounded by people like you. And I get to know people like Mike. And I get to see other successful straight-minded folks attacking their dreams, helping others, helping themselves. And they look fulfilled. They look fulfilled. You can't fake the type of success and fulfillment I see around me. I don't have that. I can see it. I just can't grab it. And it breaks my heart.

Dr. Paul: Yeah.

Noah: And it makes me want something different. But at the end of the day, pure pain, fear, and desperation is what's got me surrendering at this point and praying for daily surrender.

Dr. Paul: You mentioned looking in the mirror. Tell me what you learned one time in treatment about looking in the mirror.

Noah: So 25 years old, I checked myself into treatment, unprovoked from anyone other than knowing people were concerned. My drinking was out of control. It took me into treatment. And one of the things that our counselor had us do was an exercise to find out—for people that might be in denial, people who are being defensive of their addiction issues and the gravity of the situation, which has always been the hardest thing for me to grasp. And only now I'm really putting my hands around just how dangerous this is, how serious this is not just for me, but for other people as the haze clears.

But I digress, she had us go to the bathroom in private, look in the mirror, and say something to the effect, while making eye contact, the challenge was can you look at yourself in the mirror for 30 seconds without blinking and say, "I love you, I appreciate you, and I want you exactly as you are. Nothing needs to change. You're enough right now." And she knew that nobody can look themselves in the mirror living the way we were living and feel proud and feel good about themselves. Not even the rooster outside.

Mike: That's really loud right now.

Dr. Paul: We have a rooster outside.

Noah: But it was a good challenge because it made me breakdown and cry because I'm ashamed of myself.

Dr. Paul: Yeah.

Noah: And my shame—only thing that comforts my shame is my alcohol and/or recovery.

Mike: Yeah.

Dr. Paul: Yeah. When I was in the depths of my drinking, that's exactly what I couldn't do. I couldn't look in the mirror and say, "I love you. I appreciate you, and you're perfect just the way you are." Try it. Try it. If you're watching this and you're wondering if you might have a challenge with something, whether it's a behavior or substance or how you eat or how you live your life, go look in the mirror and do that. And when you can't, it's so revealing that something's got to change.

And that's what this summit is all about, is helping us identify, first of all, what it is we want to change. And then throughout this week, you're going to

get just brilliant idea after idea of things you need to do to start at the core, the foundation of healing from the cellular level.

I want to ask both of you what you would advise people who are unsure about this other than looking in the mirror. Are there other ways people can sort of figure out, “Do I have a problem or do I need to—do I need to worry about the direction my life is taking with regards to food or substances.” Do either of you have a thought about that?

Mike: Yeah. I think, ultimately, just being more mindful and aware. And then realizing that these behaviors, they’re inherently selfish, right? When we think about it, right, spending a lot of time on your phone looking at Instagram, ignoring your family, drinking, smoking, whatever you’re using that’s inherently selfish, right?

I don’t know how to articulate it very well, but you’re kind of just drowning in your own emotions trying—whereas, if you were to help someone, like for example, so I struggled with like on a Friday night I’d like to have some alcohol, right. But if I go to the gym or I help someone and go play with my daughter, that feeling goes away. So if people are struggling like do I have—or if they realize that I'm pathologically or I'm not being—my behavior around us is uncomfortable right now, meaning it’s causing harm to other people and stuff like that.

Dr. Paul: Right.

Mike: Going out and serving someone else in your community. And I think you and I—all three of us do that with our YouTube channels. Part of that, so it’s like I know I can’t drink or smoke or whatever because I have to perform on a video. And if I don’t make that video, these people are not going to benefit. So kind of transforming the mindset a little bit and realizing that like these addictive behaviors are inherently selfish. Not only are you suffering and your family’s suffering, but people that you should be serving and could be serving—

Noah: Right.

Mike: I had this belief that we’re all put on this world to serve other people.

Dr. Paul: Yeah.

Mike: And if we don’t use those gifts, those gifts don’t come to us anymore.

Dr. Paul: Right.

Mike: And the more that we use these and exploit these into the betterment of other people, become better on camera, become a better writer, become a better doctor, become a better teacher, parent, then we get more gifts.

Dr. Paul: Yeah.

Mike: And so I think that's kind of the transition out of this selfish behavior, that's we call addictions, behavioral addictions, whatever.

Dr. Paul: Yeah.

Mike: So that's just one tool that I use to reframe it.

Dr. Paul: Yeah. That's powerful. I happen to attend the 12-Step Program and that's always one of the factors that's really drilled into you is, get out of yourself and give back to somebody, right. Just do for others and you'll see, you'll heal. It's a huge key.

Noah: And I think what popped into my head, and I, of course, have tons of personal experience. But also I have a YouTube channel. I've got at the time of recording this, about 75,000 folks that tune in. We talk about addiction all the time. I know for a lot of people—how about this, when you're living in your truth, you tend to feel good. When you're not living in your truth, even if you're not entirely aware of what that truth is, something tends to be going wrong internally. You just feel it. You just know.

I think to be a little more black and white, if you've ever wondered, do I have a problem with drinking? Do I have a problem with anything, gambling, porn, or whatever? If you're asking yourself, do I have a problem? If you're constantly researching information about it, you might very well have a problem. And it's worth exploring. And perhaps this is too simple but I challenge you to try to just stop. Because there's a solution that's gone around in my head all throughout my 20s, especially since I have attained little bits of success, enough to pad my ego to think that I'm okay, see, I've done this, see, I look okay, workout like a crazy person to maintain that look.

But I challenge you to just try to step away from your thing for 30 full days. Cold turkey. See how it makes you feel. Let's say even if you're able to physically accomplish it, how do you feel? And if you go to pieces, you might have a problem. And the good news is, as it's always been told to me because I've been wounded and then trying to heal the wounded or someone, there's a place, there's people, there's information, there's help waiting for you. You just don't have to live like that anymore. Even if you don't know how you won't, someone will. And that saved my butt a million times.

Dr. Paul: Yeah. Yeah. Get help and stay plugged into this summit because we're going to be bringing tons of information. I wanted to touch on one thing before we release you, Bignoknow.

Noah: Of course.

Dr. Paul: Mental health. It seems to me your channel covers mental health. It started because of mental health, right, in a sense.

Noah: Absolutely, depression and anxiety.

Dr. Paul: If you go to some of his original videos, he was dying. I mean, as his parent, I was scared for his life. And he created an authentic channel with total transparency about how he was feeling. So if you struggle with any kind of mental health issues, there's a huge resource, you won't feel alone. But just give your insight into how mental health plays into all of this, if you might.

Noah: Well, I think mental health ends up being the anchor that sort of like embodies why I was running to substance, running to alcohol. I've got issues that need to be dealt with the right way. And when I don't, when I can't, when I won't, I have to do something. And I think that is sort of the name of the game for me in my 20s is that I feel anxious. I feel hopeless. I feel depressed. I don't know how to get out. I don't believe. I'll be able to get out but I'm the devil you know. I know alcohol works for what it works for.

Dr. Paul: Dopamine boost, momentarily.

Noah: As completely—as paradoxically as it works, as much of a lie as it is, I know it. It is a safety net that continues to drag me lower and lower. And the help it gives me gets smaller and smaller. But I just feel like—and mental health is one of those things that needs all your attention, mentally, emotionally, and physically. And then it also comes to being in a space of believing and being able to identify what people have gone before you and not deciding that you can't as to why you would choose to fight things the right way with the right resources as opposed to take what seems like the easier path out, which ultimately will lead to far more suffering and pain. It's an absolute anomaly that I've been stuck in a loop for so long.

Dr. Paul: Yeah.

Noah: One thing that popped in my head, I want to quickly add.

Dr. Paul: Yes.

Noah: For whatever it's worth, so I've been producing interviews for this summit, right?

Dr. Paul: Right.

Noah: We've done a few.

Dr. Paul: Right.

Noah: Well, I was at the San Diego Addiction Conference producing a couple interviews, my first weekend of trying to get sober. And I never would have thought in the past of getting 10 days or even four days is a big deal. But I haven't been able to string any days together for two and a half years and I was dying inside. And I started to physically have issues and drinking and driving, having marital issues, my life was falling apart.

The start of this summit—this is not a random plug, it's actually the truth—is a big reason I have 11 days sober now, which means so much to me. Because I would have thought that when I'm ready to get sober, I'll just stop. And I just couldn't. So that's four months trying to get sober. And my drinking got worse. And my depression got worse. My panic got worse. My behavior got worse. So the summit, already, for how—coincidentally, this helped save my life.

Mike: That's awesome. Congrats.

Dr. Paul: Yeah. I watched him transform as he's behind the camera filming a couple of our interviews, which by the way a couple of times just about had me in tears. There is some amazing stuff coming for you, guys, incredible stuff.

Well, Bignoknow, thank you. You and I could go on for several sessions. I want to give Mike an opportunity. So I just wanted to thank you so much.

Noah: Yeah. Thank you for letting me jump in.

Dr. Paul: And feel free to take a look at his channel, Bignoknow, on YouTube, as it just keeps on giving.

Mike: It's an awesome channel, guys. I learned a lot.

Dr. Paul: It's just his heart and he's—

Noah: I serve things raw. That's one thing I can do.

Dr. Paul: I don't know how he does it. It's just completely raw. It's completely raw. But it's real. And this is a transformation in just 10 days that I have never seen such a rapid transformation. And it can be yours too.

Noah: I'm desperate, I'm afraid, and I'm willing.

Dr. Paul: There you go. You have to have willingness, right? And then you got to plug in. And then if it's a substance use issue, you have to stop that substance use and plug right into some support systems. So you're not just out there willing it with willpower alone but you've got a network of safety for you.

Noah: One day at a time. Thanks, guys.

Mike: Brilliant.

Dr. Paul: Thank you. All right, Mike. So—

Mike: We're back.

Dr. Paul: Now, it's your turn to—I want to really pick your brain about some of the things where I know you have amazing expertise. Let's start with how we eat.

Mike: Yeah.

Dr. Paul: I know you've written a book on this. I actually used to have quite a lot of belly fat. And your book's about that. But I know I'm not alone. And folks who struggle with their weight—and there's so much more than just weight loss, right?

Mike: Sure.

Dr. Paul: It's all about health. But let's hear what some of your wisdom that you've kind of gathered over the years.

Mike: Yeah, there are so many things we could talk about. The microbiome, food choices, exercise, sleep, stress reduction, those are kind of the big ones, and environmental toxin exposure.

Dr. Paul: Did you write my book?

Mike: We're talking about the same sort of—

Dr. Paul: I wrote *The Addiction Spectrum* and you just rattled off some of the key points that are throughout that book. I interrupted you, I'm sorry.

Mike: No, no, it's good. Yeah, these are all these environmental factors. But think at the end of the day, a lot of us just have emotional challenges and subclinical food addictions or other addictions that are preventing us from doing the things we want. That's why I love the theme of this summit.

So just being aware of mindful eating. And I think that's where the ketogenic diet can come in because it really helps restore those food cues. A lot of us are eating when we're not hungry. We've been told that we should eat every two to three hours because that's what stouts your metabolism, as if it were a fire, which of course it's not. Our bodies are not internal combustion engines like cars. They're much more complex. So I'm a huge fan of using a ketogenic diet or a low-carb diet and/or intermittent fasting or time-restricted feeding, just really compressing that feeding window, so you're fasting longer than you're eating.

So let's say for example, one simple—super simple, I mean, anyone can do this right now, is just eat when it's sunny out or it's daylight. And then stop eating when the sun goes down, right? And so, that feeding window will stretch during the summer as normally humans would do. We would forage and hunt because we're safer when it's light out. So that's a super simple strategy, even if you don't change your diet, keep your carb intake the same as it was, just compress that feeding window. That will restore what we call metabolic flexibility.

Dr. Paul: Yeah.

Mike: Make us more insulin sensitive.

Dr. Paul: Yeah.

Mike: And it will help with addictions and all that. So that's a cool thing about—go ahead.

Dr. Paul: So this time-restricted feeding is a concept I actually heard you speak about first. And I've tried it. I've been fighting with weight loss for decades. And I used the single most important thing that helped me.

Mike: Yeah.

Dr. Paul: So compress your eating in six to eight hours. Some people do it in the four hours. You're eating between 2 PM and 6 PM or 8 PM or whatever. But doing that, whether you call it intermittent fasting or time-restricted, then there's a whole period of the day when your body is actually turning to its fat to get its energy.

Mike: Right.

Dr. Paul: And you're not busy metabolizing food and releasing toxins. So it's actually a cleansing technique as well.

Mike: Yeah. Well, all those signs. And you're not getting the blood sugar ebbs and flows and so when your blood sugar crashes, of course, your counter-regulatory hormones, cortisol, epinephrine, norepinephrine, are going to kick in. Those will not only force you to eat unhealthy foods, but may increase your chances of like doing online gambling, porn, alcohol, whatever, because they're—

Dr. Paul: You're irritable.

Mike: Yeah. And so I think, having even more blood sugar cues allows us, irrespective of our willpower and things like that, to make better, like, being present or aware of our choices. So we realize like, wow, I do have this propensity to want to drink alcohol or have too many cupcakes right now. But I'm not going to do that because I'm more aware. Just being aware of things is a great first step.

Dr. Paul: Yeah.

Mike: So yeah, that's a great, I mean, like you said, just compressing that feeding window. So trying to go for that eight hours so like you start eating maybe at noon and then you cut off at 8 PM. That's very doable for a lot of people.

Dr. Paul: Yeah. I was raised where breakfast was the most important meal of the day, at least so I was taught. And there are cultures where that's not really the case.

Mike: Right.

Dr. Paul: They eat later in the day and they're very healthy. You threw out a lot of terms in the beginning. I want you to sort of address them for our audience. Not everybody is familiar what it means to have a keto diet. I know that's one of your areas of expertise. Could you explain that?

Mike: Yeah. The biology is really unique. And a lot of people that have had traditional medical training like your self were taught that ketosis is kind of bad because it was kind of obfuscated with diabetic ketoacidosis, which is very high glucose and ketones together, which is very dangerous. But when we compress our feeding window, when we exercise, when we reduce our dietary carbohydrates, our blood sugar drops. And then a couple hormones increase.

One of them is glucagon increases. Insulin goes down. That recipe kind of tells our liver to start manufacturing these ketones. They come from either our diet or our body fat.

Okay. So when insulin is low, there's a hormone sensitive lipase. Not to get too complex, but it's key that you drop insulin low. It will snip out body fat and that will be sent to your liver and manufactured into this ketone, which is kind of like a time-released fatty acid molecule, if you will. It can penetrate the brain where it does a lot of cool biology in the context of addictions that we can talk about. It affects the GABA to glutamine ratio, which is very important for seizure control. But also just having a more even mental state can change brain chemistry in that regard. So I like it for—just personally, that's why I like the ketogenic diet. Not for weight loss. But it is very effective for that.

Dr. Paul: It works for that. Yeah.

Mike: But I don't personally have an issue. I have an issue with being impulsive, anger, anxiety, things like that. So I want to quell that with diet.

Dr. Paul: Yeah.

Mike: So yeah, the recipe, low blood sugar, low blood insulin, high glucagon. And I want to stress glucagon because that's a hormone that doesn't get a lot traction.

Dr. Paul: Yeah.

Mike: We talk about insulin, of course, all the time.

Dr. Paul: Yeah. We never hear about glucagon, unless you're diabetic.

Mike: Yeah. And then the GLP-1, there's different drugs and stuff. So protein is effective. And that's why I love to throw that in there. And protein increases glucagon as does exercise and fasting.

Dr. Paul: Yeah.

Mike: Anyways, this liver—so the point is, ketones are made in the liver. And that's where liver health comes in. So a lot of people say, 'I tried keto, it didn't work'. Well, have you run your liver enzymes, looked at your ALT, GGT, and AST, or do you have hepatitis? Are you drinking? If you're drinking a lot of alcohol, the liver is already burdened, maybe it's not going to have the bandwidth to then take on the sort of job of making ketones. So it's a whole body approach. It's not just "Oh, I'm going to continue doing all the bad stuff

that I'm doing but just drop the carbohydrates and increase the fat.” That doesn't always work.

Dr. Paul: Yeah.

Mike: So I'd like to throw that in there. I know it's a little more complex than people will generally talk about. But it's a holistic approach.

Dr. Paul: Yeah. Understanding that science is good, if you want to know that what you're doing makes sense scientifically. You and I are at the Thought Leaders Symposium where—I don't know if you attended that session where a doctor from California presented how ketosis was creating a stimulation of the bone marrow to release stem cells. And then these stem cells can then, those are the cells in your body that will become any. And he actually showed data where diabetics, type 1 diabetics, starting making insulin.

Mike: Wow.

Dr. Paul: Who weren't making insulin before. There have been some other studies that showed the brain can actually lay down new cells, which we often thought we're stuck with what we have.

Mike: Yeah.

Dr. Paul: If you've been in addiction and you've trashed your brain, you don't have to think it's all over because you can start healing at the cellular level starting with nutrition.

Mike: It's so key.

Dr. Paul: Yeah.

Mike: Nutrition and then exercise, learning an instrument, I think that really helped me during my youth. I picked up the guitar when I was having this pot-infused haze. And it really helped me relearn all this biochemistry and stuff like that, that I didn't have as a little kid because I was just on the streets skateboarding and doing silly stuff.

Dr. Paul: Yeah.

Mike: Yeah, novelty is good but nutrition is the foundation, like you said.

Dr. Paul: Yeah. So one other aspect I wanted to ask you because you're—I'm going to say you're my keto-go-to guy.

Mike: Sure.

Dr. Paul: A lot of people think that keto means you don't eat vegetables, right?

Mike: Yeah.

Dr. Paul: So you're just eating meat and fat.

Mike: Right.

Dr. Paul: Is that true?

Mike: That's not true. I mean, you can be a keto-vegan, a keto-vegetarian. So again, when we characterize what ketosis is and define it, it's a blood millimolar level of the compound betahydroxybutirate, which our liver makes. By the way, we can navigate into the microbiome. So your microbiome, short-chain fatty acids, when you eat vegetables, function very similarly in the body to betahydroxybutirate. So there are some overlap with the ketogenic diet and the healthy microbiome. But anyway, yeah, I think if you Google "ketogenic diet", the foods you're going to see are cheese, ham, bacon, and all that, because they're low carb, high fat. But a lot of us have enough body fat.

Dr. Paul: Yeah.

Mike: So really—and ketones are made from lipolysing, splitting up body fats. So I think we've kind of—a lot of people overdo the fat, to be totally fair.

Dr. Paul: Yeah.

Mike: And so if you have some moderate protein, some healthy carbs, and even, I mean, yeah, moderate amounts of fat, avocado, coconut, sprouted and soaked nuts and seeds, like those are my go-to.

Dr. Paul: Yeah.

Mike: I mean, I do love butter and animal fats in moderation. But a lot of research shows that a diet high in animal fat—again, I'm not anti-fat, but just hear me out.

Dr. Paul: Right.

Mike: That can actually cause light intestinal permeability and increase what's called the translocation or the transfer of bacterial fragments called endotoxin. And as a doctor, sepsis, septic shock, which is fatal, if we were to perforate our bowel from the laceration or wound, car wreck, we would get sepsis from endotoxin leaking from our gut into our body, in our bloodstream.

Well, a lot of us have low-grade mild sepsis all the time from eating processed food, from eating too high animal fats without phytonutrients like rosemary, garlic, ginger and a healthy diet. So all these people are like, 'yeah, I'm keto, because I went to Wendy's and just took the bun off the burger and put bacon on'. And they're kind of missing the point of this holistic healthier—

Dr. Paul: So we need, in addition to those macronutrients, which are your carbs and your protein and your fat, we need nutrients.

Mike: Totally. And those phytonutrients are key.

Dr. Paul: And phyto means...

Mike: Phyto, color, I believe. It's light.

Dr. Paul: Or plant.

Mike: Or maybe plant.

Dr. Paul: Is it color? One of those.

Mike: I'm probably wrong. You're probably right.

Dr. Paul: No, anyway, there's hundreds, I understand.

Mike: Yes.

Dr. Paul: Phytonutrients that come from plants that are vital for our health.

Mike: Key, yeah.

Dr. Paul: You're not going to probably get those at a fast-food restaurant.

Mike: Probably not. If you do, I mean, I want to know what restaurant that is. We'll recommend it.

Dr. Paul: Right.

Mike: Yeah. But this is key too, for anyone that has suffered from opiate addiction, which I know you treat, or alcoholism because those compounds, opiates and alcohol, affect the microbiome, affect the integrity of that. And phytonutrients come in and they can help with that with minimizing the damage to the barrier. For example, there's one clinical study, I think at Boston University, and they had individuals drink alcohol to the point, I think it was the blood level was 2, like they got pretty drunk. I think five shots of alcohol. And they tested their blood alcohol levels and it correlated a parallel increase of blood endotoxin. Again, endotoxin is what we have when we have

septic shock. And they correlated—the feelings of hangover was directly correlated with the inflammatory marker TNF alpha, that is induced when we leak this gut bacterial fragment into our gut.

Dr. Paul: Wow.

Mike: So you're like, well, is a hang—because there are hangover remedies at Chevron, right, and Shell gas stations. They are like electrolyte-based. But really it speaks to this idea that a hangover is really pro-inflammatory.

Dr. Paul: Yeah.

Mike: Probably from the gut damage. We're translocating crossing these little microbe fragments called endotoxin that are lining up our immune system and causing our brain to be inflamed.

Dr. Paul: Yeah.

Mike: What's interesting about that is they had a subset of that research at Boston University, these college kids drink a little bit of orange juice with vodka. And again, I'm not promoting sugar from orange juice. But the polyphenols that we just spoke about, the flavonoids from the orange juice, mitigated that endotoxin crossing and mitigated the hangover.

Dr. Paul: Ha, interesting.

Mike: It's crazy.

Dr. Paul: Yeah. Hydration helps for sure as well.

Mike: Yeah.

Dr. Paul: So phytonutrients, those plant-based nutrients, we need those. You mentioned biome and microbiome. It's something I speak about in my book and got others in this summit we're going to be talking about it. What are the practical ways though because a lot of our viewers, you hear this term microbiome. And you're 'what are they talking about?' I'm trying to figure out if I'm drinking too much or how to stop using my heroin or opiates or whatever. What's the microbiome got to do with me?

Mike: Yeah.

Dr. Paul: Right? How do people transition into doing the right thing with regards to their microbiome?

Mike: It's a beautiful question and one that we really should emphasize more because oftentimes supplements come up, probiotics, and all that, which those can help. But first things first, fermented foods. You go to Korea, you go to Japan, before and after every meal we're having kimchi and sauerkraut. Right now, I think a lot of us don't do that. We didn't grow up with that. So adding fermented foods back into the mix.

We mentioned a little bit earlier about gardening. Getting closer to our food and just the process of buying from a local farmer, buying from a farmer's market or growing it in your backyard, you're going to expose yourself to microorganisms that are beneficial.

Dr. Paul: Yeah.

Mike: And then eating healthy, real, whole food. The color rich, so I like to focus on reds from raspberries and organic red bell peppers, oranges, orange colors, purple from blueberries and things like that. And then cook with a lot of spices, so turmeric, rosemary, ginger, garlic. These are all things that cultures throughout the world use to make food taste better.

Dr. Paul: Right.

Mike: And how many people, they start to cook healthy, like this tastes like crap, because they're cooking chicken breast in water. It's going to taste not very good.

Dr. Paul: Yeah.

Mike: So just infusing all those phytonutrients can be like a great first step. Because they're fermented by our gut microbiome just like fiber is.

Dr. Paul: Yeah.

Mike: And they can increase these levels of beneficial short-chain fatty acids, one of which is butyric acid. We talked about the ketogenic diet, the main metabolite called betahydroxybutyrate, that kind of defines if you're in ketosis or not, is very structurally similar and kind of cross talks and interconverts from butyric acid. So that's where a healthy microbiome was synergistic with that low-carb, high-fat burning state as well.

Dr. Paul: Yeah. And a healthy gut, I've often heard, is synonymous with a healthy brain or at least there's a gut-brain connection.

Mike: So key. Yeah, a lot of research is coming out about that. And as a pediatrician, I mean, and parent, you know this, when your kid is unhappy

and they can't talk, right, and they're like, 'what's going on with my kid?' And they're constipated and they have a bowel movement and their mood totally changes.

Dr. Paul: Changes, yeah.

Mike: That, to me, was like, I've read this gut-brain research for a while and I'm like, "Yeah, yeah, yeah. It sounds cool." But I don't know if I believe it. And that like solidified it for me.

Dr. Paul: Yeah. Having a good bowel movement is important. Parents with new babies, right, I mean, they so get that.

Mike: Yeah.

Dr. Paul: They so get that. Yeah.

Mike: Drugs and alcohol totally affect your bowel movements, right?

Dr. Paul: Yes.

Mike: I mean, especially opioids are very constipating.

Dr. Paul: Yeah.

Mike: Yeah, just being aware of this, realizing like how it's not only affecting your brain these medications or drugs or whatever or late night watching TV or being on your phone all night is going to affect your whole Circadian rhythm, which affects your bowel movements too. So all these behavior addictions can be, I think, traced back at some level to the gut.

Dr. Paul: Yeah, wow. You want to have good bowel movements, folks. My son always talks about that. You can't chime in right here.

So what do you think we should kind of leave our viewers from this first session, as sort of a wrap-up of the keys that you would like to impart from your wisdom as a nutritional expert and all the research you've done in the health world and then tie it in with addiction?

Mike: Yeah, it's a great point. Well, I mean, I too suffered from addictions and things like that, like we talked about in the last interview. My older stepbrother exposed me to alcohol and drugs at a very early age. And my life could have had a totally different turn for the worst. My accountability partner was the gym. So that may not be for everyone else. You can turn to yoga. You can turn to art.

But without an accountability partner of sorts, and that can be AA, that can be a YouTube channel, which is now my accountability partner, but my viewers don't really know it, right. So I think that's really important for anyone, whether it's food addiction, porn, gambling, iPhone addiction, a lot of us are on social media for hours a day, we need an accountability partner.

And so like the question that Noah said, have you ever asked yourself do I have a problem here and then you tried to stop whatever that is and you can't, then you need an accountability partner for that behavior.

Dr. Paul: Yes.

Mike: And that's a good thing.

Dr. Paul: Absolute great thing.

Mike: A lot of successful business people, they had mentors. They had coaches. They had partners.

Dr. Paul: Yeah.

Mike: So look at this, spend a little money there, do what you can, read some books. I like people, wherever they are in their journey, to start a social media account, start an Instagram account, and make the private public, okay. Right now, I'm going to stop, drinking, day one. So you know what, even if three people see that, you know that they're holding you accountable.

Dr. Paul: Yeah.

Mike: And that's going to make it much easier. So I did like a dry January two years ago. I'll drink like maybe three glasses of wine a week, like I really try and minimize it. I do like the wine and all that sort of stuff. But like I've had like wine every day, like during the holidays. And like last year, I said, January 1st, I'm going to do a dry January. And I remember like it was Friday, first weekend too, and I'm like I can just have a little wine. But it was my Instagram post that made me realize like I can't.

Dr. Paul: So you'll be accountable.

Mike: I'm incongruent if I—so that's key.

Dr. Paul: That is key. So we've touched on, folks, just to sum it up here, real food. Real food. Make sure you're not getting too much processed foods.

Mike: Yeah.

Dr. Paul: Anything that spikes your insulin is going to maybe temporarily give you a dopamine rush. But then you're going to crash. You're going to be irritable. And you just jump in if I'm leaving things off here. So real food, we've got the importance of getting your nutrients, your phytonutrients, so just plants.

Mike: Yeah.

Dr. Paul: Plants, plants, plants and fermented foods.

Mike: Key.

Dr. Paul: Stress reduction, I think we've touched on briefly. But when we started off talking about the things that lead us to look for relief, we're stressed out in some way.

Mike: Yeah.

Dr. Paul: So find ways to do that. An importance for that is getting enough sleep, you mentioned, and exercise.

Mike: Exercise is key.

Dr. Paul: And then the biome and then getting around the supportive people, that's the accountability partner idea. And if I hang around folks who are way overweight and not eating right and then don't exercise, that's probably what I'm going to do.

Mike: Right, key point.

Dr. Paul: So we want to hang around the people who are doing the things we want to be doing, right?

Mike: Yeah.

Dr. Paul: And somebody that will actually be by our side as we walk this journey back to health.

Mike: Yeah. I mean, a lot of people, if you reach out, they'll help you.

Dr. Paul: Yeah.

Mike: I think a lot of us, if we're not as fit as someone at the gym, we feel like they're not going to talk to us. "That person has his major business and I'm just getting started. They're not going to talk to us." And a lot of people that have had success in different domains, they feel this need to give back. So

don't be afraid to reach out to someone, just because they're where you want to be and you're not there yet. Like I have people that reach out to me all the time for different things. And I want to give back. I mean, that's part of this whole journey. So don't be intimidated by that. I think a lot of people are just mentally scared that if they approach someone, they're going to be ignored. But that's often not the case.

Dr. Paul: Yeah.

Mike: And one thing that's key here is not only just a good night sleep, getting off your devices before bed. A lot of people have the phone in the room, TV in the room, that's a big no-no in terms of sleep quality.

Dr. Paul: Right.

Mike: The practice—I don't know if we've talked about it yet, but mouth taping, so taping your mouth shut before getting—so it sounds a little out there but this can be really—

Dr. Paul: Yeah. You mentioned it once before, I can't imagine that because I have claustrophobia, so the thought of—and I have sometimes a congested nose. But, what are you actually doing?

Mike: Yeah, so the biology is unique. So you're really calming down that stress response. So a lot of us, the sleep psychology and biology is really interesting. When we're in our deep phases of sleep, our muscles in our body temporarily paralyzes. It's kind of like if your garbage disposal is clogged, you're not going to stick your hand in there when it's on, you're going to turn it off, right?

So the body turns things off so it can repair quickly. And that turning off is paralyzing certain muscle groups, which turns out your tongue gets paralyzed. Now, if you're breathing through your mouth while you're sleeping, your tongue is paralyzed then guess what, you're not going to be able to get your breath. So then what happens in the—your adrenal glands say, something is going on here, we're going upregulate cortisol. So people will oftentimes have sleep apnea as a spectrum, have sleep disorder breathing, and they don't know it.

Dr. Paul: They don't even know it.

Mike: So they wake up. They crave caffeine, alcohol, opiates. Their willpower is burnt out so they—

Dr. Paul: Not really getting deep, restorative sleep.

Mike: Exactly. So mouth taping could—

Dr. Paul: Do you tape your mouth at night?

Mike: I've been doing it every night since 2015.

Dr. Paul: No way.

Mike: A dentist—

Dr. Paul: Duct tape?

Mike: No, not duct tape. There are two. You can do 3M Micropore tape.

Dr. Paul: Okay.

Mike: Which you know about. You can buy it at any Walgreens or Rite Aid. Or a SomniFix is the product. It's made for humans. It's got a little pierce—I'll give you and Noah a sample when you leave.

Dr. Paul: Okay.

Mike: That can be key. Because poor sleep can totally affect your can totally affect your will power later in the day.

Dr. Paul: Yeah, when I've had a good night sleep, like last night I did, I was so excited for the day. I was going to get to see you and I had energy. Yesterday, I didn't have a good night sleep. I was dragging.

Mike: Yeah.

Dr. Paul: It makes a world of difference.

Mike: Totally.

Dr. Paul: Yeah. So get your sleep, folks. And parting words for our audience. These are folks who are either wondering if they've got a challenge with addiction, they know they've got a problem with substance use or behaviors, or they've got loved ones who they're really worried about. Do you have any final thoughts you'd like to share with our audience?

Mike: Yeah, final thoughts. We kind of talked about, I feel like we're all in this planet to serve other people. And whatever the addiction is, it's inherently kind of selfish. So if we ever find ourselves getting drawn into that, think of some way where we can serve others. And that could be taking your kid out to the park. That can be walking the dog. That can be donating money. That can be donating your time. Because that's going to help, that's going to give you

that same biochemical push that the drugs, alcohol, porn, gambling would give you anyway.

Dr. Paul: Amazing.

Mike: So why not do that in a more natural way? And then you'll feel good about it. Then you'll realize that "Wow, my head is clear when I do that, I feel good, I didn't need the alcohol, I didn't need the drugs or whatever." So that's just a tactic that I use.

Dr. Paul: Yeah.

Mike: When I crave anything—or go for a walk, take some deep breaths, just do something to pattern interrupt. And I think, again, everyone's biology is different. Neurochemistry is different. We're all predisposed to things more or less than others. But just pattern interruption when you feel that temptation, I think, is key.

Dr. Paul: That's key. Folks you can volunteer somewhere, you can, if you get to a 12 -Step meeting or a smart recovery meeting, you can volunteer to setup the chairs, make the coffee, be a greeter. As you said, walk the dog, go outside with your kids to the park, help your spouse, your loved one, your partner. Get out of yourself, do something. And little by little you'll just feel your life starting to turn around and get the energy to what to make a difference. And it comes back to you. I really appreciate your time.

Mike: Awesome, this was so much fun. My pleasure.

Dr. Paul: Thank you so much, Mike.

Mike: This was great. Thank you.

Dr. Paul: Awesome. Take care. Thanks for watching.