

EPISODE 35

“RB: No what matter you believe in or want to do ultimately with your medical career, about 50% of what you learn in med school is wrong and the problem is you don’t know which 50% and that’s what we were told by our professors at Columbia.”

One of the other doctors in our practice said it really well. He said, “You can’t exercise your way out of it” you can’t exercise your way out of weight gain and so I see a lot of people really struggling and they’re just working out in these crazy long classes and then they’re exhausted and dehydrated and tired so then they eat too many carbs and their cortisol is high all day anyway and then they go to this crazy class and it’s even higher so therefore, their blood sugar spike that they’re gaining weight and they’re hitting this wall and they’re hitting this wall and sometimes I joke with them. But I say look around the room next time you go to that spin classes. Is anybody skinny, but the teacher? Uh-uh, no one.”

[INTRO MESSAGE]

[00:00:56.1] AS: You know battling food and your body doesn’t work. You want to love and accept yourself. And because you’re insatiable, you want results too. And wouldn’t you know, you bring the same intensity to your life, wanting to maximize your time, potential, and experiences you have here on this beautiful and wondrous planet Earth.

Fair warning, it will be a rollercoaster. But for those insatiable, that’s your prime time to thrive. We’re here to say “YES!” to the hunger of wanting it all. I’m your co-host, Ali Shapiro, a health coach who helps people end the losing battle of dieting and find a truce with food.

[00:01:37.4] JB: And I’m Juliet Burgh, nutritionist, fitness expert, and a co-owner of Unite Fitness Studio Franchise.

[INTRODUCTION]

[00:01:45.8] AS: Hello Insatiable listeners, welcome to episode 35 with Dr. Robin Berzin. Today was one of my most favorite episodes where we had Robin come on and talk about what is

functional medicine. She is a summa cum laude graduate at the University of Pennsylvania undergrad and then Robin went to medical school at Columbia University. She's also a certified yoga instructor and meditation teacher and has formally studied Ayurveda.

Recently though, she is the founder of Parsley Health, which is changing the way that medicine is practiced, and one of my favorite episodes, did I mention that? You're going to learn about today what is functional medicine and how is it's philosophy designed to maximize your health? What are the three ways you can implement functional medicine into your life today and that are free? And Robin's approach to weight loss and how calories are absorbed differently based on this one factor in your body, you're going to love this episode.

[TRUCE WITH FOOD MESSAGE]

[00:02:43.8] AS: Hello Insatiable listeners. Ali here. If you tune in here, you'll get that diets are a losing battle but are you equally afraid if you give up, you'll blow up? Fortunately, there's a better way. It's called a Truce with Food. Because here's what you already know, when you struggle with food, you struggle with life. As Candice from Pennsylvania, a past Truce with Food participant said, "Truce with Food is not just a plan but a lifesaving journey."

So here's what we do in the program, which starts mid-September and as you'll hear on today's episode about functional medicine, we use functional medicine principles to figure out what food combinations work for you in Truce With Food. So we'll do that and we stop the sabotage cycle and we get to the root of bad eating. Get the first lesson free and find out what is the better diet for weight loss; vegetarian, Mediterranean or Paleo? Log onto alishapiro.com and find out.

[INTERVIEW]

[00:03:42.8] AS: Great, so we are here today with Dr. Robin Berzin who has a very unusual path. She was a yoga teacher who found her way to medical school and wanting to go to medical school so that she could study functional medicine. Welcome Robin.

[00:03:58.4] RB: Thank you. Thank you so much for having me.

[00:04:00.8] AS: Yeah, thanks for being here. I cannot wait for the listeners today to hear about Parsley Heath, what you're doing. But first, let's back up because most people that we meet in the alternative or holistic or integrative health space, there are doctors who are like, "I can't do this anymore. I'm becoming a yoga teacher," and you actually had the reverse calling or path. So tell us how that happened.

[00:04:22.4] RB: Yeah, it was crazy. I was working in my first job in New York after college and I never would have thought of myself as someone who would be a doctor. I didn't think of myself as a science or math person. I was more of a writer and an English major type and I was actually working at the United States Attorney's Office prosecuting Martha Stewart in the securities fraud unit and other securities fraud cases and I remember thinking, "You know gosh, I really glad somebody's prosecute securities fraud, because that should definitely happen of course, but I don't think that person should be me."

To be honest with you, I was ditching work a lot because I was just utterly bored and I found this tiny little yoga studio downtown in the financial district which was literary, this was right after 9/11. So it was just sort of coming back and started going to yoga and had this really clear epiphany one day in the yoga class that I have been living my life with a huge wall, disconnecting my head from my body, my mind from my body and that I don't know why I had the following thought but I did.

I realized that that's probably driving so many of the chronic diseases of today and that if we could get people to crack through that wall for themselves that we would probably naturally fix a lot of those problems and so that sent me down this total rabbit hole to a new job. I quit my job, I went to NYU to work at psych research at their medical center there, wanting to just get my foot in the door and understand whether or not I even wanted to be in health care or medicine.

So that was a great experience and then once I was there, I said, "Yeah, I want to do this," and so I actually had then to apply to a post-back pre-med program and go back to school for a year back in my undergraduate in Philadelphia to take things like bio and chem and physics and all those science and math classes that I had never taken because I wasn't a math person. So I had the pain later and then went off to medical school. So yeah, I had definitely a reverse trajectory maybe.

[00:06:25.3] AS: Yeah and so you said that were you aware of functional medicine or was it just the philosophy was more aligned? We call it functional medicine and maybe we should explain to everyone how you see that.

[00:06:36.1] RB: Functional medicine is a wonky term. Definitely, if you're listening out there and you haven't heard it, you're not alone. My early interest was in I guess this idea of holistic medicine or integrative medicine or combining east and west. I don't think I really knew. I just knew that that's what resonated with me and that's why I wanted to go to medical school and along the way, I ended up meeting Dr. Mark Hyman who's the chairman of the Institute for Functional Medicine.

He actually sent me their textbook and I learned about the field of functional medicine, which I loved because it's the best of both worlds. It's not saying "we're just food and herbs", it's not saying "we're just drugs and procedures", it's saying we should have all of those things and we should use best practices from around the world to get you to your optimal health and you're optimal health outcome, whether you're just optimizing and preventing something or whether you're actually healing from a pretty serious disease.

And so I always explain functional medicine like this, the sort of quick and dirty way, if you're not sleeping your regular doctor will give you Ambien and if you're not sleeping your integrative eastern-western doctor might give you an herb but if you're not sleeping, your functional medicine doctor will ask, "Well why are you not sleeping? What is the root cause? Is it because you are looking at your phone too late at night? Is it because you're anxious? Is it because your body is inflamed and you're eating the wrong food? Is it because your cortisol is high at night? Is it because you're deficient in magnesium?"

So we want to get to the why and we want to get to the real cause of the problem and I think that approach just so appealed to me because it let me bring together my passion for yoga and ultimately my passion for meditation and good healthy food with a really solid foundation in conventional medicine, which I went on to get at Columbia.

[00:08:20.0] JB: I was going to say, how is that going to traditional medical school getting through all of that knowing that, not that you're going to throw away a lot of what you're learning necessarily because you need to have the foundation but just knowing that that's not the route that you want to go. So how was that for you going through the process knowing that you wanted to take a really different route than they offer?

[00:08:40.7] RB: It was tough. It was definitely tough. I absolutely had to keep the dream alive because when you're in that culture, you can get brainwashed really quickly and I definitely stood out. One of my friends in med school, he always jokingly called me yoga but his nickname was pizza and so I thought I'd rather be yoga than pizza and he's still a good friend today. He has a really successful health tech start up, so go figure where we all end up.

But I loved Columbia and I loved my friends, I love the challenge of it and I also was very clear and I'm glad I was clear about this that while I was at that point, a yoga teacher and a meditation teacher, not that those aren't enough but they weren't enough for me. I always knew that I wanted to be a leader in this field and I wanted to have the highest level foundation in medicine that I could so that no one could ever say to me, "Well, that's just a bunch of BS, there's no proof in that. There's no science behind that."

And that was really important to me, and so for me, it was really important to me to go to a great med school which I did luckily enough, and it was important to me to have the full package of that training. So med school's tough no matter what you end up wanting to do with it and I think for me, it was awesome.

[00:09:56.0] AS: I think also too though, to me, the people that I admire the most and Robin, I met Robin about a year and a half ago and I was just instantly impressed with you. I knew you knew your stuff and the people that I admire the most really do — are willing to look at those different opinions because they are not so afraid, "Well, my beliefs might be shattered. Let me actually look at this and see. These people aren't making this up either," and I think medicine is so much more complex than any of us want to admit whether whatever side you're on.

[00:10:24.6] RB: Absolutely. No matter what you believe in or want to do ultimately with your medical career, about 50% of what you'll learn in med school is wrong and the problem is you don't know which 50% and that's what we were told by our professors at Columbia.

[00:10:38.3] JB: At least they were clear about it.

[00:10:39.4] AS: Yeah.

[00:10:39.6] RB: There were clear about it and they also — new information could take as long as 17 or 18 years to make its way into medical education and so even all of the amazing information that we now know in the past few years, thanks to the National Institute of Health, which is a very reputable and conventional organization, it's going to take 10 more years to make its way into medical thinking let alone medical education.

And so what I also love about functional medicine is that we are taking this research that's coming out about the microbiome, about nutrition and we are taking all this awesome information and we're incorporating it in real time. We're not waiting, and the reason that we can do that is because we're not debating between drug X which helps you 10% of the time and kills you 2% of the time and drug Y which helps you maybe 15% of time and kills you 3% of the time. That's that choice that you're making often in conventional medicine for a treatment.

But in functional medicine, we're using diet, we're using specific nutrition protocols, supplements, changes in lifestyle. We're also using drugs sometimes but we're using this panoply of amazing therapies that aren't going to kill you. At minimum, they'll make you stronger and make your life better and at maximum, they can often cure your disease and so because of that, we're able to incorporate a cutting edge testing and information much more quickly than even the amazing people at Columbia where I trained.

[00:12:10.2] JB: Now you yourself have had experience working with functional medicine doctors, is that part of the reason why you wanted to do this or you knew that before you had even experienced Mark Hyman or anyone else?

[00:12:23.9] RB: Yeah, way before I met Mark, the reason I went to medical school is that I wanted to practice this kind of medicine and I actually had a really funny job. You do your post back and then you have this year where you are applying to med school. So you have to interview and it takes forever and then you hope and pray and wring your hands and wait to get in and during that whole year, you need a job.

So I needed a job and I ended up cold e-mailing Dr. Mehmet Oz, having no idea who he was, at Columbia because he ran some integrative medicine studies out of the cardiac surgery department at Columbia and I just said to him, “You know, I’m in Philly, I want to go back to New York, I’m looking for a research job at integrative medicine, this is my passion,” and sent him my resume and ended up calling me like two days later and saying, “I’m about to launch this radio show with Oprah, I need a producer on the ground with me in New York. Your background, you’re like a writer background but you’re also going to medical school so you can do medical research and background research, would you want to do this?” And I was like, “Who is this person?”

[0:13:21.2] JB: Oprah, what?

[0:13:24.5] RB: He’s like, “You know, you probably seen me on Oprah,” and I’m like, “I am 24, I don’t watch Oprah. Like what are you talking about? I haven’t watched Oprah since I was like 10 years old.” At that time, I love Oprah, but I just didn’t know what he was talking about or really who he was, he was already famous then but not the way that he is today.

So I ended up being the associate producer for his radio show for a year and then that’s when I met Mark and Dr. Frank Lipman and all of these amazing leaders in integrative and functional medicine. I think that was what solidified for me, “Oh wow, you can train as a doctor and get out and somewhere on the other side you can do this for real and it’s like a real thing.” But my passion and the reason I even quit my job at the US attorney’s office to go back and get my post back premed classes done was because I wanted to do this medicine.

[0:14:10.3] JB: How serendipitous is that though that you ended up on that show like that’s wild.

[0:14:16.0] AS: First Martha Stewart, you're like meant for the spotlight Robin.

[0:14:21.2] RB: I know, you know what's hilarious about that? I was speaking at a big event last year called summit at seam and she was one of the headliners and it just so happened that my talk, because there was such a big like multi thousands of people at this event that there was multiple things going on at any given time. She had the big room where like a thousand people could go but the other couple of thousand people had to have other stuff to do so there was lots of other talks and my talk was at the same exact time as hers at this event last year and it was like, "Martha and Robin again."

[0:14:52.5] JB: Here we go, at it again.

[0:14:55.1] RB: This time she wins but...

[0:14:57.2] AS: I would have gone to your talk. So one of the things that you were talking about is you can incorporate research in real time and that's one of the things that struck me so much when you were on the panel at the functional forum that I was at, was all this people were talking about how they wanted to setup their practice and what's the best way and kind of taking it, looking at the doctor's perspective and you're like, "I'd really recommend looking at it from a user experience perspective," meaning for the listeners out there, let's think about the patient first, right?

Because a lot of the healthcare system these days is basically setup like an org chart for the hospital right? Which may seem like just a geographic issue or a pain in the ass billing issue but that lens on medicine, you know really influences everything of how you look at things. So when a patient comes to Parsley Health, which is based in New York but you — once you go to New York once and visit with Robin then you can be virtual.

What is it like from the day they walk in? Because I love on your website it says, "Imagine a world where going to the doctor was enjoyable," imagine that. You have — "data drives your diagnosis, you walk out with prescriptions for medication and meditation," and I think people will be floored if their doctor actually function like that. Take us through what it's like to be a patient at Parsley?

[0:16:17.0] RB: Yeah, well thank you for bringing that up because we are constantly trying to even improve what we're doing but I just basically thought when I start at Parsley health, how should medicine be? Unfortunately, conventional medicine's amazing and I never liked to slam it because all my great friends from Columbia and Saini where I trained are awesome and they're great doctors and they're doing great work in the world but the way that medicine is structured and setup today is very legacy based and it's all based around the fact that at the end of the day, you're not really directly paying for your healthcare, the insurance company is.

So your healthcare is organized and delivered to you in a way that they can bill for to the insurance. So it's all setup for the eye balls of what we call, in healthcare speak, "the payer" and the payer is the insurance company and so what's really neat, and good and bad, about functional medicine is that because the insurance companies don't recognize functional medicine yet, although parsley health is changing that and the Cleveland clinic is changing that so that's going to change. But to date, I think it's a really interesting opportunity for us because we are direct to consumer and by direct to consumer, I mean, because you're paying for your care, we can optimize that care for you.

So I sat down and was basically like, how do we create a healthcare experience, a primary care, functional medicine based experience that's awesome? So in my mind then, it should work the same way your iPhone works, it should work the same way that Uber works, it should work the same way as Seamless works. Why shouldn't we have technology that's just as seamless and beautiful and user friendly that allows you to do real world things? I use Uber as an example or Seamless as an example because those are tech platforms, right? They're like online platforms but they allow you to do real things in the real world; get a car and go somewhere with somebody driving you or get food delivered to your home by some human.

So there's still that real world experiential component and Parsley is the same way. We don't have a phone number, there's all of our communication is online, you go to our website, you sign up, you register for a membership, once you're a member, you get access to our scheduling system, you schedule your own visit online there's no calling a secretary and being like, "Well, does Wednesday work at two and no? Okay, what about Thursday at 4? No?"

[0:18:36.0] AS: Or leave a voicemail and some of them...

[0:18:37.7] RB: Or leave a voicemail and someone to call you back in like seven days, who needs that? Why can't you just schedule online? Come on, it's like the genius bar. You schedule your first visit online — I'm very impatient person which generally works to my favor, sometimes against me. But we schedule online and then you can come in for your first visit. If you're in New York or California resident right now, your first visit can be totally over video, we're talking on Skype right now, we have a more secure version of Skype for healthcare that we use or it can be in person.

And so our members will come and we're the first ever medical practice and weed work, there's this beautiful lobby with marble tables and coffee and tea and drinks. They check in at the front desk and a lot of people haven't been to our office before, sitting there like, "Am I in the right place? This just feels like I'm somewhere for a meeting," which is exactly what I want them to think and then...

[0:19:26.8] AS: "Should my blood pressure already be rising?"

[0:19:30.1] RB: "No, I don't feel like I'm in a doctor's office at all," and then they come back and we have a set of private offices that we work where the total privacy and a beautiful offices that look and feel nothing like a medical space and it's just like having another meeting that you might have from work, except that it's with your doctor to talk about your health.

After your first doctor's, you're then set on this awesome trajectory. So you have a yearlong membership, we don't do one time consultations. I don't believe, one visit isn't going to fix you so why should I — I don't want you to pay me for one visit, I want you to pay us to get better. We include five annual doctor visits and unlimited health coaching with our expert health coaches as part of your membership.

Because I believe that health coaching is part of the medicine and that if I give you a perfect plan as your doctor and you go home and don't do any of it, well then it wasn't the perfect plan and what's the point? We want you to work with a health coach who can help you actually do that plan.

After your first doctor's, your health coach reaches out to you. You guys have your first visit, you can go over the whole plan, you make sure you understand it, usually from there you're getting some testing, you can do that testing at home usually, we have kits that you take home for some of our fancy pants test as I call them.

[0:20:41.9] AS: That's one thing I wanted to ask you is like, for our listeners, what do you test for that their conventional doctor is not testing for?

[0:20:49.4] RB: A lot. So we have a bunch of proprietary blood work panels that we order but you can get them done at your regular lab like your Quest or your LabCorp or your bio reference near you. We order a lot more test than a regular doctor does usually, especially at the beginning and we look at thyroid markers that usually doctors will wait and skip, we look at nutrient deficiencies, we look at hormone balances, we look at inflammation levels, we look at the cholesterol in a much more in depth way.

We look at gluten sensitivity, food sensitivities, your micro biome, your cortisol levels and then sometimes even more sort of cool specialty fancy pants test that are specific to the person. We look at genetics, and so our goal is not to overwhelm you with testing, all of the fancy testing is totally optional. We're very budget conscious at Parsley so sometimes people complain about functional medicine because they feel like, "I went and I spent a bazillion dollars on testing and I don't know what any of it means and why did I do that," and we won't let that happen at Parsley.

We really hone in on the test that you feel comfortable paying for and that you feel like we together feel like are going to be the most beneficial for you. That's the beauty of a membership, you don't have to do every test day one, you can do some later if we put you on a three month protocol to healing and you do awesome on it but we don't need that fancy test anymore and if you do three months and we feel like, "Ah, we're hitting a wall, and we need some more in depth information," then we can always do that test later. We test for a lot.

[0:22:19.3] AS: Well, in one thing too that really struck me and I felt like my social justice heart like rang out when you were saying you know, the elephant in the room is that many functional medicine doctors can't even afford their own care and part of Parsley is like, it's not — the

membership is not that expensive, that's what I think is so wonderful, is it around like \$2,000 for the year? A little even less right?

[0:22:41.6] RB: Yeah, it's a little less, it's 149 a month so it's like your gym membership. I guess the fancier gym but definitely most are — 149 times 12 is 1,788 and most doctors like me are a thousand plus for your first visit. A lot of people go see a doctor and they have this great encounter for a first visit and it's like, "Well I'm not going back there because this is going to be another thousand dollars or \$500 and so I just felt like I was working at an amazing practice in New York City, one that I respect and love immensely but I couldn't afford my own care there based on what I was paid and I was like, "This is a joke," and none of my friends can afford it either. How can we do something to make this a little bit more affordable?

[0:23:28.3] AS: Yeah,

[0:23:31.0] RB: Yeah, sirens of New York City if we want to wait a second we can...

[0:23:35.1] JB: Comforting to me, it reminds me of my childhood, lulls me to sleep.

[0:23:41.3] AS: One other question, I just have so many for you — how do you test the gut microbiome? Because I know we talked about it a lot on the podcast and I'm always asking my clients about their poop and bloating and other signs of food sensitivity and stuff but I'm curious what test you use for that?

[0:23:58.6] RB: We have a few different test that we use to look at the gut, we have a poop test, the famous poop test, that's a three day poop test that looks at your pancreatic functions, your digestive function, it looks an inflammatory marker, it looks at your bacteria breakdown, it looks for parasites, it looks for yeast overgrowth.

For some people it can be super helpful, we also have a breath test that looks at overgrowth of bacteria and the upper intestine. That's a different problem. So sometimes we forget that we have an upper gut and a lower gut and we got to look at them separately and then we have a cool test that's a pee test that looks at your leaky gut or intestinal permeability, which for some people can be a cause and a driver of food sensitivities and inflammation in the body and we

really make — a lot of times we'll start with one of those, maybe two of those depending on somebody's history and will get other ones only as we need them.

[0:24:54.3] AS: Yeah, do you find, we've had some people on our podcast too are really adamant that weight loss is about, how many calories you burn, that deficit and even after saying, "Well there's so much emerging research on the gut micro biome about how the health of that often determines how you compute calories or are you absorbing the calories. So I'm curious what you think about weight loss. Maybe I should even back up, why do people typically come to Parsley? Do they just one to be more proactive or are they more type A?"

[0:25:24.7] JB: What you said there's a common thread of people who are coming with certain symptoms and then they're thinking functional medicine is probably a really great route for me to go?

[0:25:39.0] RB: Yeah, I would say that most people have something that they're looking to deal with or fix. We do have a few of the, I call them "The optimizers", the quantified self-types who are like, "I am perfectly healthy and there's nothing wrong with me and I just want to be here to learn more about myself and get cool test." We have a few of those people and they're awesome, they're super fun to work with.

But most people have some issue and I would say the three biggest areas are digestive health, chronic gas bloating, constipation, diarrhea, acid reflux, diseases ulcerative colitis and crones, we have a big group of immune dysfunction, whether it's asthma or Hashimoto thyroiditis or auto immune disease where they're being told by conventional medicine that they're going to have to take immunosuppressive drugs for life.

I had a patient, 24 years old, she had a rare autoimmune disease call the shuts vasculitis and she has ulcers from her mouth like all the way down her esophagus and she had waking and she had acne and her body was so inflamed, this poor girl. The rheumatologist, one of the top rheumatologist, I think at Cornell here in the city had fired her as a patient because his drugs weren't working. The reason the drugs weren't working is because we weren't getting to the root cause of her problem.

So she came to Parsley and we immediately put her on an elimination diet, we cut out gluten and dairy and sugar from her diet. We did a three month gut healing protocol to shift her gut microbiome and heal leaky gut, we used some supplements to lower inflammation, no drugs and she came back for her first follow up at six weeks and I really wasn't expecting much of a change because she has such a severe disease and with autoimmune disease like that, lupus and MS and rheumatoid arthritis and all these things, sometimes it can take a really long time, functional medicine is slow medicine, it's not a quick fix and that's deliberate.

So she came back at six weeks and I was kind of almost nervous, I hope she's better but she might not be and I'm prepared for that, we're going to have to keep going. She was 90% better at six weeks. This disease she'd had for her entire life and literally when her mom, her mom is a patient now and her mom comes to my office and still cries because she's like, you gave me and my daughter back.

[0:27:54.4] AS: I'm about to cry. For someone to be in that much pain and the doctor just like — this is kind of like with diets, similar vein. It's like, people think, "Oh my body's not working on the diet." Trying to adapt the wrong way.

[0:28:06.0] RB: Yeah, Hormone imbalance I guess is the third big area that people come to us and that can include weight gain it can clear problems with your periods, we have a big fertility crew. Hormones are such a huge issue and people aren't going to go to their primary care doctors, primary care doctors don't have any solutions, women see their OBGYN for five minutes a year, "Oh you're having a problem here, here's the birth control pill," and they don't have any outlet and so functional medicine and Parsley really is a great outlet for women to work on hormone issues and solve them from the ground up as opposed to just taking the birth control pill to cover them up.

[0:28:45.8] AS: Yeah, oh my god, it's just so amazing. I think what's so challenging is to realize, this is actually when you were talking about wanting to go to like the best medical school, that's why I went to get my masters in coaching at Penn. I was like, "I want people to understand the value of coaching like so much that they can't dispute it." What I found in my own research is that, a big challenge is the amount of agency we know we have in life meaning knowing really how much control over our health right?

Like your patient who she's been going to this doctor because she thinks he has the answers and there was so much that she could be doing and I think so many of us, even those of us in this space don't even realize the full power that we have over our health. It's just — I mean even your story, do you care to share about healing from cervical cancer with meditation? That's wild.

[0:29:36.0] RB: Yeah, along the way I've been very, knock on wood, very lucky, very healthy and for the most part. I have a couple of health stories that have been solved by functional medicine. One is I developed like horrible cystic acne in medical school, I had never had bad skin before, I was in my mid-20's, I didn't know why. The dermatologist put me on all of this drugs and we're shooting cortisone shots into my zits and giving me scars, it was terrible.

Fast forward, learning more about functional medicine, I realize that during a highly stressful time I had developed food sensitivities to gluten and dairy and when I cut out those foods, my skin completely cleared up and so it's just again, as durum and skin stuff is another big area, eczema psoriasis where people are just put on this creams and all these drugs that just have nothing to do with the root cause of the actual problem.

Towards the end of medical school, HPV is the virus that causes cervical cancer for most people. Millions of women in the United States and even a majority of women at this point have been exposed to it. I had had HPV, it hadn't been a problem but you know, you're a med student, you're working crazy hours, my third year and I had been I guess stressed and also probably not — I wasn't supplementing so I wasn't taking in enough folic acid and so one of those little cervical cancer, mini lesions that everybody often gets and go away, actually progressed and it progressed to something called CIN3, which with glandular involvement.

That just meant that I was going to have to have a minor surgery but a surgery none the less to remove this tissue because it extended past where they could just scrape it off or watch and wait. That was really scary to me because while I felt confident that luckily my awesome Columbia OBGYN, I knew she could take care of this, it was like how your immune system ultimately is picking off cancer out of your body every single day.

We have cancer cells arise, our immune system recognizes them as foreign and picks them off. Mine had not done that. Leading up to this procedure that I was going to have to have, I had developed over time a really strong meditation practice and I had studied in Thailand, meditation and I had done a 10 day Vipassana meditation, which is a 10 day silent meditation retreat. I had seen how much meditation can be really helpful to me but I hadn't thought of it as like a healing modality at all, it just hadn't occurred to me. But I ended up, I work sometimes with a school in Hawaii that's called The Clairvoyant School of Hawaii and they teach you a style of meditation.

I'm not clairvoyant, I can't see the future or anything but I practice a style of meditation that they teach that I really like and I had a clairvoyant reading and a healing with one of their teachers. She helped me release all this energy and taught me a meditation practice that helped me release the energy of the cancer and I focused on that and I practiced this specific meditation technique and watched it leaving my body and watched it clearing and allowed some other energies that weren't me — we all carry a lot of energies around every day that aren't us.

We pick them up from other people and places and sometimes it's hard to recognize what's our true energy and we kind of need to do a daily maintenance or clearing and clear those people and those things out so we can really kind of tap into ourselves and no one teaches you that as a kid or in med school but it's really important. So I did this, and I did this and I really worked it. Obviously was still going to go have the procedure but I just had this feeling that maybe it was better and it was only a couple of weeks difference. So there was no way that this lesion kind of cleared up on its own in a couple of weeks, it wasn't like a year or something.

So I go, I have the procedure of course, I'm not going to not do that and I get home, it's over, I'm like, "Okay." A week or two later, the doctor calls me and she's like, "Well we got the pathology report back on the tissue. I know for sure I took out the right spot, the right part/area," but she said to me, "It's really weird, I don't know what to make of it, I've never seen this but the pathology was totally normal, the tissue, which was CIN3 glandular involvement is totally normal." I literally burst out laughing, and I knew it, I just I knew it.

Something that I believe really deeply and something that we teach in functional medicine is that our bodies know how to heal, our bodies know what to do and usually, we're in their way, we're not giving them the right inputs or we're putting in too many toxins. So when we give our bodies

through food, through energy, through nutrients, through exercise, the right inputs and we take away the toxins, often our bodies can heal.

Now I'm also Columbia trained doctor, if you are very sick or suffering from a horrible cancer or have been in an accident or have a very advanced disease, please go seek medical treatment and get regular screening and don't wish it away, it's not that I'm suggesting that. But I do think that we have incredible power to heal and that we're not taught that, we're not empowered with that.

So really, my goal with Parsley is to be the healthcare platform for the millennial generation and to arm an entire generation with the knowledge base that they need to constantly heal throughout their lives so that they don't have these chronic diseases that are totally avoidable and that for the most part, they're using the medical system but using it only at its highest level by amazing doctors trained at their highest level to do what they do best only when they need it.

[0:35:10.9] AS: That is just so incredible.

[0:35:13.4] JB: I'm blown away.

[0:35:17.0] AS: Like mic drop. We're never speechless on this podcast. I love that.

[0:35:22.1] JB: So I'm sure that that's something that you incorporate a lot with your practice is teaching people a mindset meditation techniques, right? You said something about you leave with a prescription and a meditation.

[0:35:33.7] RB: Yeah, we prescribe meditation and relaxation to every single patient so we give them apps they can use like Head Space is one of our favorites but there's Grounded, there's Calm, there's a lot of cool apps out there. Our health coaches won't work with our members to teach them to meditate and we teach them and encourage them to do yoga. A lot of people are depleted and they need to replete and so a lot of people are running to their spin class and their long run and their crazy boot camp and then they're working like crazy and they're stressed and they're drinking too much.

So they're just depleted and the last thing they need is less they need more rest, they need more relaxation and so we really stress the importance of putting that in as a positive input because those are the inputs that allow the body to regenerate and heal and actually use whether it's a medication or a supplement that you're taking.

[0:36:28.5] JB: Especially being in New York where you, you probably see a lot of people who are extremely depleted just from the frenetic energy there.

[0:36:35.4] RB: 100%

[0:36:37.0] JB: Working so much and then like you were saying, just trying to fit in those hard core workout classes, running around like that stuff just takes a toll on you. You think you're doing something good for your body but when in fact you do need to just take...

[0:36:50.8] AS: Everything's about context.

[0:36:52.6] RB: Yeah,

[0:36:52.9] AS: You have to look at overall resiliency meter and if it's really low, that stuff turns from being supportive to stressful.

[0:37:00.3] RB: One of the other doctors in our practice said it really well. He said, "You can't exercise your way out of it. You can't exercise your way out of weight gain," and so I see a lot of people really struggling and they're just working on this crazy long classes and then they're exhausted and dehydrated and tired so then they eat too many carbs and their cortisol's high all day anyway and then they go to this crazy class and it's even higher so therefore their blood sugar spiked and they're gaining weight and they're hitting this wall, they're hitting this wall and I joke with them but I say, look around the room next time you go to that spin classes, is anybody skinny but the teacher? No one. Check that out.

[0:37:39.1] AS: Not that — I don't believe in formulas but I mean, it sounds like you don't believe in the calories in, calories out formula for weight loss either?

[0:37:47.9] RB: A hundred calories of broccoli and 100 calories of coca cola are going to do two very different things in your body. So the way their metabolize the hormonal effects, this stimulant effects, the neurological effects, the mood effects, all of these things are so different so it's not about calories in calories out. I think it's a 70% diet, it's 20% lifestyle and relaxation and it's maybe 10% exercise for most people.

[0:38:17.1] JB: What about for those who are eating very clean diets but they might still be eating too much of that clean diet.

[0:38:24.4] RB: Yeah, I mean portion control is such a personal thing and I just invite people to look at, you know, you can eat all the greens and broccoli if you want, I see a lot of people eating too much of and not realizing is that they're like, "Oh this is a gluten free carb, or I'm just having a little bit of quinoa," but it's like a vat of quinoa or it's a lot. We all as....

[0:38:48.7] JB: Almond butter. That's what I see a lot with my clients.

[0:38:49.8] RB: Almond butter is a lot, although almond butter is like crack to women, I don't know what it is.

[0:38:54.7] JB: Any kind of nut butter is like crack to women.

[0:38:58.0] AS: It's creamy, it's dairy free, for those of us who can't do dairy.

[0:39:02.8] RB: Yeah, and that is less bad in that it is high fat, it is protein, it's not starchy so it's not going to spike your insulin but you can overdo it. But we live in a world where we've created this very high carb norm. What see is a lot of people being like, "Well I'm eating clean, I'm eating pretty well," but our baseline for normal is so skewed. Really, humans were meant to run around a lot and probably eat a lot of high fiber, nuts and berries and greens and roughage and maybe some meat.

But we were not just meant to have this abundance of grains, either whole or refined, as a major part of our plates all the time and for some people they can stay skinny and feel good and get away with that but for a lot of women especially I see that grain and starch preponderance

causing PCOS and hormone problems and weight gain and mood problems and I just think that our sense of normal is really messed up.

[0:40:01.6] AS: Especially when you take it in context, again, carbs will sabotage you even more if you're over exercising, if you're not sleeping, if you have some underlying acid reflux or auto immune, you're just like fuelling the fire. So it's so much about I think like the symphony and I find it just fascinating when people are still kind of, "No, it's calories in, calories out," when I'm like, basically, everything, especially I think even the gut micro biome, everything we keep learning about that negates. Everything that we know about medicine a lot of the time. How in this big, wide universe that can people still be clinging to that, I don't know? It's just really interesting.

[0:40:40.4] RB: Yeah, your gut bacteria determine how many calories, what percent of the calories of your food you actually absorb? If you've destroyed your gut bacteria or altered that through a lot of antibiotics and medications and bad foods over the years, your bacteria can also be — a lot of times when you're having cravings, the cravings aren't you, they're your bugs. Understanding that is really important.

[0:41:03.5] AS: It is, that's one thing that I'm really working on myself is like diversity of vegetables because if you aren't diversifying your food, you're not diversifying your bugs. I think a lot of people have so many people have so many cravings for salty or sweet because they're eating like the same four foods, they only have the same bacteria groups. I think it kind of flies in the face of America's like manifest destiny of "I'm in control, I'm independent". It's like, "Your bacteria are dictating a lot."

[0:41:36.4] JB: So going back to those who can join and become members, you said, it's a super reasonable, \$149 a month I said you think you said?

[0:41:44.2] RB: Yeah.

[0:41:45.0] JB: Then the tests are extra on top of that they would be paying for?

[0:41:49.9] RB: Yeah. So blood testing is generally covered by insurance and we do encourage people to have health insurance both for our testing and for us but also for life, do you have health insurance. If you get hit by a bus, you need it, people out there who don't have health insurance gets them. We also really make an effort to make sure that you don't feel like you're spending too much on testing, specialty testing is super optional, we work with all the labs to make sure that you're not going to get screwed with a horrible bill and the copays for the specialty task who are usually a hundred to \$200 per test. So really manageable and again if that's not in your budget, we don't have to do it and if it is, great.

[0:42:31.0] AS: I think what's really important to mention though is that you, Parsley health and a lot of functional medicine is very outcome focused, a lot of times you go to the doctor and you pay all this money for blood work or for prescriptions and you don't get the outcome that you want because the insurance company, as Robin was saying, is billing based on procedures, they're not focused on what actually works.

So that's I think a really — I think not only do we have a healthcare crisis, we have a philosophy crisis. I'm like, "Why are we just measuring testing?" And versus saying like does any of this stuff actually, like in grad school I went to Sweden. It was a systems course and we were setting your healthcare system and the doctors there were like, "We don't even test for high cholesterol because it doesn't improve outcomes here." I was like, "That's so interesting," because people in the US are like.

[0:43:16.7] RB: All they test for.

[0:43:17.9] AS: Obsessed with cholesterol.

[0:43:19.1] RB: I know, I have a lot of patients with LDL or elevated LDL for the US norm and I'm like, don't worry about it because we'll look at their composition of the actual particles and as long as they don't have tons of small particles, which are the dangerous kind, we don't really care and also all the research shows, cholesterol does not cause heart disease or cause heart attacks but this has been this thing that the statin industry has basically sold to us, it's outdated data, it's really being replaced, I think statins is a category of drugs that hopefully will go away in the next 10 years.

Yeah, the way that we look at data, I do think we need to do healthcare based on outcomes. We have ways that we track outcomes at Parsley and we're actually developing our own proprietary data architecture where we chalk outcomes and aggregates, we're the first healthcare system that I know of that's actually paying doctors based on outcomes. So their bonus structure is based on how healthy their patients are.

That's something that we're evolving as we grow and because I think that doctors should be incentivized to have healthy patients and happy patients and also to work well with their teams. So we've setup our compensation structure to reflect all of those values at Parsley and same for health coaches. Then the other problem is, this is a problem that's not specific to functional medicine or anything and any way, it's no one in primary care is tracking outcomes and nobody knows how to track outcomes.

So our lead data scientist at Parsley and yes we have a data scientist at Parsley who works with us and we're bringing on another one but she works with the Peterson Institute for Healthcare, which is a huge research group that looks at primary healthcare outcomes and they're going literally around the country, meeting with hospitals and big primary care networks and basically trying to understand what they're doing and teach them a framework to even track outcomes.

So we're in this wild west in healthcare at large where we currently track outcomes based on a really bad proxy for how healthy you are, which is insurance claims data. So we don't know how healthy you are but we know how many prescription drugs you filled, how many times you went to the doctor, how many surgeries you've had, how many times you went to the ER.

That's a great way of measuring utilization of the healthcare system, like how much did you use it? That's not a good way — that's not measuring how healthy you are in your life and so, because we've, to date, only exclusively and this is so crazy but I want everyone listening to understand this. The only way that anyone's ever tracked an outcome is based on insurance claims data. That's the gold standard for outcomes, not even medical research.

[0:46:10.1] JB: Or if they've ended up back at the start.

[0:46:12.5] RB: Yeah, if they bounced back at a certain amount of time which is the big thing that everyone's obsessed with right now and the medical system and trying to fix. But fixing — having you bounce back to the ER with your same high blood pressure problem, in six weeks instead of four, I don't call that a success, I call success having you not have high blood pressure, which your way into through diet and inactivity.

So it's just a, which is not to fault the healthcare system. We're now in a really truly a new era of technology and big data analytics and ability to use wearable trackers and other types of technology to get more information about you in your day to day life and I just think we're on the cusp of knowing even what we don't know and understanding how we can track outcomes and Parsley I think is one of the only healthcare organizations that's poised to really look at that and capture that in a meaningful way.

[0:47:10.3] AS: Well and I think, for everyone listening, tracking outcomes isn't as easy as it seems because most things are multi factorial. In other words, you have to improve your sleep, you have to improve your diet. To try to then track back that, it's a whole different framework or model. I just want to kind of circle back for people who are like, "What? Cholesterol, you're not worried about high LDL?" There is a test that some insurance companies, actually they usually don't cover but it's called NMR. It measures the size of your LDL and that's actually what they're finding matters.

I just wanted to kind of circle back because that might be really — it's probably really new information for a lot of people. I didn't want them to be like, "Wait, I don't have to worry about my cholesterol." Well, not completely. It's only one side. I just wanted to...

[0:47:53.5] RB: Also, for those listening. Fat increasing cholesterol.

[0:47:58.2] AS: It's sugar.

[0:47:58.8] RB: Yeah.

[0:47:59.1] AS: Dehydration and stress.

[0:48:01.3] RB: Yeah, it's generally, it's not fat that increases your cholesterol, it's sugar and carbs and alcohol.

[0:48:08.3] JB: People don't want to believe it when you say that do them. Do you find that? The people are just like, they've been — everything's compounded into them through media and the news that it's cholesterol causes high cholesterol. It's so hard for people to believe.

[0:48:22.7] AS: Well, if you had heart attacks or heart disease in your family, then you have this like, "You really want me to eat fat?"

[0:48:29.6] JB: Yeah, do you find that people can be a little bit timid when you're giving them some dietary recommendations to eat like whole fats and things like that?

[0:48:40.7] RB: You know, it's so funny, I feel like it's such a range. It just depends on where people are coming from, probably all the people listening to your podcast are like, "Of course."

[0:48:51.0] AS: I think they know in theory but I think the extra calories scares people.

[0:48:55.7] RB: Yeah. I think they are scared of the extra calories but I always invite people to look at it as an experiment not a punishment. So when you're thinking about new ways of treating your body or new ways of eating, it's all about making it an experiment, not a punishment.

[0:49:14.2] JB: Definitely. How did you get to the name Parsley? I keep thinking that.

[0:49:18.6] AS: Yeah, I am curious.

[0:49:20.2] JB: "Parsley, I love parsley."

[0:49:22.1] AS: I put it in my smooth this morning. From my mom's organic garden. Local and organic.

[0:49:29.7] RB: Yes, Parsley is detoxifying, it actually is not — it has nothing to do with the properties of parsley the plant, which I know is weird but I really wanted something that could sound really fresh and clean and easy to say and something people would remember. I really wanted something that wasn't my name because this isn't about me, this is about a new way of doing healthcare and I also, I wanted something that could sound like a tech company as well as a healthcare company.

So I know those are all really strange requirements but I basically, I have this weird brainstorm moments sometimes when I read like fast company and I was reading fast company on a plane and I shut it and just did this massive deep dive of names and that's what stuck.

[0:50:17.1] JB: Awesome.

[0:50:18.7] AS: So before we wrap up Robin, what are three things that people who are looking to integrate functional medicine into their lives, what would you say the first couple of steps that they should take?

[0:50:30.4] RB: Well, I think the things that you should look for are first of all looking to do an elimination diet or looking at your diet whether you work with a functional medicine doctor, which I highly recommend, whether you do a program like the Whole30 or the Clean Program, which are somewhat functional medicine based, sort of dietary programs, whether you work with a health coach.

Try the experiment, that's the number one thing you can do. If you're eating gluten or dairy or a lot of sugar, I know it's hard but those things will be waiting for you on the other side, give it a shot and change your diet and see how you feel and make your body a living experiment because food is again, it's 70 to 80% of the battle for most people and it's really the number one driver of how you feel right now and tomorrow as well as how you're going to feel in 20 years.

So that's number one, I definitely recommend that people develop some kind of relaxation practice, how do you chill out that isn't looking at a screen. So watching TV doesn't count, looking at your phone doesn't count, how do you get yourself out into nature, how do you spend time alone, how do you relax and calm your nervous system, is it Yoga, is it meditation, is it

walking, is it acupuncture, it doesn't matter. Find something that you do that relaxes your nervous system because so many people are so stressed out and that is driving, they're mentally stressed out, even if they don't have a lot of reason to be stressed out, social media has insured that they feel really bad about themselves and feel stressed out.

My third one is not even about exercise but just about getting in touch with your body, a lot of people don't — they never touch their body. They don't like to interact with their body in a way that they feel, the parts of themselves that they don't like. There's a lot of body dysmorphia and shaming especially for women. So one reason I like Yoga is unlike running where you're just sort of going along or weight lifting, which is all about the weights, you actually get in this crazy positions and you put your hand on your side and your hand in your back.

You actually start to feel where you are in space. I find that that is such a powerful way, whether it's through yoga or Pilates or whatever you want to do, that is such a powerful way to kind of be present and tap in to your physicality because most of us are ignoring our bodies or we're using exercise as a punishment. I got to go to the gym, I got to slave it out on the elliptical machine.

That sets up physical movement and doing something physical as a negative, as a punishment, as something that we don't want to do and then once you have that mindset well then you're screwed. Doing anything but sitting at a desk or on your couch is always going to then come across as this thing you don't want. So the number one thing I recommend is like do something that makes you actually be present with your body in a nonjudgmental way because that will allow you to then want to take care of it a little bit better.

[0:53:27.2] AS: That's amazing. I love that.

[0:53:28.4] JB: I'm going back to the meditation or relaxation, whatever that is for someone. How often would you recommend? Is this a daily practice, is this at least a few times a week?

[0:53:41.9] RB: I think it really depends on what you need but I definitely recommend doing something daily if you can and it doesn't have to be the same thing every day. I highly recommend just getting in the habit of doing five minutes of meditation every day, maybe in the morning, and it can be — remember, you don't have to go in a room and sit in a shrine to

meditate. You can meditate while you make your tea or your breakfast, you can meditate on your commute. You can meditate as you walk to work or while you're driving.

A lot of people spend their whole commute in a car either angry and having like a one sided conversation in their heads with someone they're mad at or listening to radio or talking to themselves or being mad at traffic. So wow, what an amazing opportunity to make some of that time productive and bring your attention to your breath and meditate there. So I always try to remind people they don't need to make meditation fancy, they can just do it and — sorry?

[0:54:36.0] AS: I was going to say, by meditation you mean just bringing awareness to the moment. Because I think some people will be like, "What do you mean I don't have to be on a cushion?" But just like becoming aware of your thoughts, of the surroundings surround you. The sense and just wanted to kind of define that for people.

[0:54:54.8] RB: Yeah, I mean meditation is just bringing your attention to the present moment. All the tools that we teach you to meditate with, whether it's following your breath or listening to something and paying attention to it or repeating a mantra, these are all just tools and none of them matter. Anyone who tells you that you need to pay them a lot of money to teach you to meditate or there's only one way to meditate is lying to you and doesn't understand meditation.

Meditation is just bringing your attention and awareness to the present. So the easiest way I think to do that for a lot of folks is just to bring their attention and watch their breath go in their nose. Every couple of seconds you'll notice that your mind has left and it is in the future or it is in the past and every time you notice that instead of getting mad at yourself and being like I'm a horrible person because I can't pay attention, just be like, "Oh cool, I noticed that I've drifted away, bring my attention back to the breath."

Then my other piece of advice for meditation is that everyone thinks that, "Well, I did it and it felt terrible," or not it feel terrible but, "I didn't do a good job, I wasn't present and therefore I wasn't successful and therefore I'm never going to do it again." That is wrong, you will benefit from meditation even if it doesn't go well or feel good because just the act of trying to bring your attention to the present moment and just the act of noticing that, "Whoa, my head is all over the

place and mostly I'm thinking about what happened last week with that guy or what's going to happen tomorrow with my mom."

Just noticing that your brain is doing that is actually the powerful beneficial tool that will not only lower inflammation in your body, calm your nervous system, lower cortisol but actually build gray matter in your brain and remap some of those habitual patterns in your brain. 99% of your thoughts are involuntary and you would never choose to have, they're just happening. so meditation is simply the process, it's like ruts in the road and the thoughts are just following the oldest deepest ruts. Meditation is just kind of filling in some of those ruts so that your brain can go in new places.

[0:56:55.6] AS: Wonderful, and I just read in your newsletter that you were saying that, "Meditations rebuilds the gray matter that when you're on your smart phone, it decreases your gray matter," and I was like, "That's an incentive to meditate," but was like, "What does the gray matter do? It sounds so scary."

[0:57:09.8] JB: It does sound scary. I'm not looking at my...

[0:57:15.9] JB: We'll do biology later, does gray matter and white matter in your brain. They have different functions but needless to say they're both very important and we luckily, we have brain plasticity and much more than we used to think that your brain was kind of formed when you were a little kid and then it was stuck forever.

Now we know that thanks to peptides like BDNF which is a neuro peptide that can actually change neurons and we can create new synapses and create plasticity, which means that even if you've been thinking in a way that hasn't served you for a really long time, well guess what, you don't have to think that way anymore. You can actually use meditation to change the habitual thoughts that you have on a daily basis.

[0:57:57.2] AS: Robin...

[0:57:57.8] JB: I love it. We know you have to go Robin, thank you so much for coming on.

[0:57:59.9] AS: Where can people find you again?

[0:58:03.5] RB: Oh my gosh, come find us at Parsley Health, exciting news, we have a center of physically in New York City. Right on the flat iron on 23rd street and it's Parsleyhealth.com. We also, big news, we are opening our las Angeles center early September.

[0:58:18.6] AS: Congratulations. That's huge.

[0:58:21.0] RB: It's huge and next week I don't know when this is airing but on the 20th of July, we are opening up our founding membership for our LA location and that means that we're letting people, before we open, just for a limited time, just for about a month, we're going to let people buy a thousand dollar founding member ship. You pay upfront, you get your annual membership, LA would be your home base center. If you're listening and you live in California or you can get to LA or you have friends there. Please tell them that's a 40% discount from a regular price.

It's the equivalent of \$83 a month for the highest level concierge functional medicine that normally would be like \$15 - 20 grand a year and we are offering that and if you buy a founding membership for LA, you are locked in to that rate for life. So you don't have to renew every year if you don't want to but if you want to, you get to keep that price no matter what our prices become down the line, which I don't expect them to be high.

[0:59:20.0] JB: That is incredibly generous of you guys.

[0:59:23.1] AS: I'm going to tell all my friends out in LA, "You have to go here."

[0:59:27.6] RB: July 20th go to our website parsleyhealth.com you can also follow us on Facebook which is Parsley Health, Instagram @parsleyhealth, Twitter which is @parsley_health because someone who doesn't use their account has @parsleyhealth. "Give it to me!" Snapchat which is @parsleylife and we're very accessible. You can email us at hello@parsleyhealth.com and we will write you back.

[0:59:49.5] AS: Yeah, I think it's like weekly but it's frequent, newsletter, it's one of the few that I read, always good recipe.

[0:59:55.6] RB: Twice weekly newsletter, every Sunday and every Wednesday and our newsletter actually won a Webby award, which is one of the top awards that you can win in the web, whatever that means but we are very excited about it. So yeah, we're really focused on that and we also have, if you're ready to try, you asked earlier, what's the great way to just try the functional lifestyle, we have a really easy, really awesome seven day detox program that basically lets you live functional medicine just for one week.

Super affordable and our protein shakes and we send you our protein powder that comes along with some supplements, some probiotics and some digestive enzymes and our protein powder is literally like people are addicted to it, I swear, I promise you. I'm not going to name names but there's a lot of big fancy cleanses out there with protein powders that are just gross and ours is delicious. I have it every day, I don't need, I just love it. My husband has it every day too.

So if you're not sure you're ready for a membership or you need to work with a doctor, I highly recommend doing our seven day detox because it's a great way to just kind of put your toe in the water and see what functional medicine is like.

[1:01:03.7] AS: Wonderful. Thank you so much for joining us.

[1:01:05.3] RB: Thank you guys, thank you so much. Pleasure.

[1:01:08.0] AS: Good luck in LA.

[1:01:09.2] RB: Thank you.

[END OF INTERVIEW]

[0:56:00] JB: Thank you so much for listening to the Insatiable Podcast. We hope you enjoy today's episode. You can connect with us on social media. Follow me on Twitter and Instagram @julietunite and Ali @alimshapiro, M stand for Marie. Please feel free to also e-mail us any

questions. We would love to hear from all of our listeners. You can reach us on ali@alishapiro.com and juliet@unitefitness.com. We'll see you next time.

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