



**Keto for Heart Disease** Guest: Dr. Jack Wolfson

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**Dr. Jockers:** Hey, welcome to the Keto Edge Summit, where we are dispelling the myths and empowering you to take back control of your health with the ketogenic lifestyle. I'm Dr. David Jockers, and I'm here with my good friend, Dr. Jack Wolfson. Great to have you on the summit. And, Dr. Jack, is actually a practicing cardiologist.

He wrote a book called *The Paleo Cardiologist*. Practicing in traditional medicine, and he married his wife, and he's going to tell us this story, who was into natural health. She was a chiropractor and started to teach him about a natural health lifestyle. And he realized, wow, you know what? The things he was doing really weren't helping his clients and has completely adopted a more natural paleo/keto lifestyle. And he's going to tell us really what he's doing on a regular basis with his patients and how he's helping people really overcome cardiovascular disease using a paleo/keto lifestyle. So, Dr. Jack, tell us how you got into this, how you became a cardiologist to begin with.

**Dr. Wolfson:** Well, my father was a cardiologist. And he was my absolute hero. He was a brilliant man. But he was also—he liked to have fun. And that fun lifestyle also I think ultimately lead to his health issues that he had. So, I see my father going through these health issues as I'm following in his footsteps. And I'm going through all the cardiology training, all the steps to become a cardiologist. Four years of medical school. Three years of internal medicine. © 2018. All rights reserved.

Three years of cardiology. And I see my father once again starting to get sick. And he eventually gets diagnosed with a Parkinson's-like illness. And at that time, I'm also starting to get frustrated with conventional cardiology, because patients come in the hospital, we tune 'em up, they leave the hospital, and then they come back in. So, the hospital's like a revolving door.

So, at that point, it is when I did meet my aforementioned wife who is a doctor of chiropractic. And she starts telling me there's a reason why your patients are sick and why the hospital has a revolving door. There's a reason why your father's sick. And what she was saying made sense. Because what she was telling me was that there is a cause to this. And the cause is poor nutrition. The cause is environmental pollutants. The cause is lack of sleep and lack of sunshine. And she's telling me this. And I listened. Most medical doctors would run from that person.

But I listened to what she had to say. And it was just—blew my mind as far as, wow, this makes perfect sense. That we're not deficient in pills. We're not deficient in cardiology procedures. We weren't born deficient in open heart bypass surgery. So, I started to change my practice. Opened up my own natural practice in Arizona. Wrote the book. And it's been phenomenal. And I get to sit here and talk to doctors like you.

**Dr. Jockers:** Yeah, absolutely. And we really appreciate you coming on. And really the message that you're getting out to the world. Coming from that place where you were raised in conventional medicine. For myself, I've been, in a sense, outside of that my whole life, right? As a chiropractor, my mom's a naturopath. So, I kind of was raised in this natural lifestyle. But to hear it from a medical doctor who was trained, you have the credentials, and then you came out of that just realizing, "Hey this really isn't working and I just ultimately I'm going to surrender my ego and do what actually gets people better." Right?

**Dr. Wolfson:** Well, you know it is certainly difficult because I think a lot of MDs realize that there is a different way. That they are frustrated with their current model. But that's how they get paid. They get paid in that model. They get paid to see as many patients as possible, as rapidly as possible. They get paid to do the procedures. Ties with the pharmaceutical industry.

So, it is difficult to leave that model. I know it was difficult for me. I had to jump ship when the time was right back in 2012. It's just been a few years for me now in this current practice. But I would certainly encourage any medical doctor. And I meet them all the time at conferences and events where people would come up and say, "How'd you do it?" And I say, "I just did it. I accepted

that there is a better way and I moved on." And I would encourage anyone to do so.

**Dr. Jockers:** Yeah. Very courageous that's for sure.

**Dr. Wolfson:** Thank you.

**Dr. Jockers:** Obviously, with cardiology, one of the big things that I hear about all of the time and really all of us hear about, is cholesterol, right? So we hear about cholesterol, good cholesterol, bad cholesterol. We want to keep our cholesterol low, typically they're saying under 200. We know when people start adopting a ketogenic lifestyle and they're eating a lot more higher fats, it's natural for that cholesterol to go up. So, tell us, as a cardiologist, your take on cholesterol and what cholesterol does for our body.

**Dr. Wolfson:** Well, I think, obviously, historically cholesterol was found at the scene of the crime, if you will. It was found in coronary artery blockages in the 1940s-1950s when these pathologists we're looking under a microscope. But clearly, we know that cholesterol is just there. It's part of the spackle that helps to heal the wall.

So, I figured chapter one in my book, let's dedicate that to the truth about cholesterol. And let people understand that this is a critical molecule that we need. That's why our body makes it. And every other animal on planet Earth makes it as well. Because we need it. That's why a chicken egg contains it. So, regarding the keto diet and the cholesterol is that what we do is we give the body the foods it needs and then our body's going to make the cholesterol that it needs to get the job done.

What we want to do is we want focus on what is the perfect cholesterol for each individual person. And everybody's different, right? Yours may be 220. Mine may be 180. The next person down the street it could be somewhere in the middle. And that's when you follow the right lifestyle. You eat the right foods. You find your perfect number.

**Dr. Jockers:** Right. Yep. So, cholesterol is really an essential component of our body. Which I know a lot of people don't realize. And we're told that LDL is considered the bad cholesterol. And you have a chapter, chapter two, was "LDL is Not the Boogie Man." Because we're told, "Hey, it's really bad. It's the bad cholesterol. We need to do everything we can to lower that." Tell us about what LDL actually does for the body.

**Dr. Wolfson:** Yeah, most certainly. And when you follow keto—and I wrote the book *The Paleo Cardiologist*—and keto and paleo they're certainly very, very

similar. What it does, once again, is that you get to that cholesterol set point of where you need to be and then cholesterol total may go up. But, as you said, LDLs go up, which have a purpose. That's, once again, why the body makes LDLs. But also, HDL goes up as well. And when you maintain that ratio, that's the most important thing. So, oftentimes we do hear people that come back and they say, "Oh, well, I spoke to my friend who's the cardiologist. Or I spoke to my general internal medicine doctor and they said my cholesterol went up." And I said, "Who cares?"

And if you look at the data from the 1970s, in the MRFIT Trial, on hundreds of thousands of patients, if your total cholesterol was between 160 and 260 it had no difference in mortality. So, it didn't matter if your, once again, your total cholesterol was 160 or 260 you were at the same overall risk. Now, once you start going up from there it may be a problem. Once you start going under 160 it's definitely a problem. That's very clear in the literature.

So, when you eat keto, eat paleo, when you follow that kind of principle those LDL particles—actually the particle is really, as you know, of course, that's where the science is looking at the particle, looking at something called ApoB which is the stitching of the LDL baseball if you will. And it's that ratio versus the ApoAs which are the HDLs. These are really 21st-century data that our people, our tribe, they need to know those numbers. The conventional cardiologist, as you know, conventional doctors, they're stuck in that old 1970s model. And it doesn't work.

**Dr. Jockers:** Yeah. Absolutely. And so you're talking about the pattern a, pattern b, LDL particles as well, right? When we're looking at the ratio, right? So, if somebody were to look at their lipid profile right now and they were to look at their LDL to HDL and their triglyceride HDL ratio, as a cardiologist, what would be kind of the ideal zone there?

**Dr. Wolfson:** Well, I mean, I would have to say that probably the lower is better, where you get to somebody when they're following the right lifestyle. So, if we look at those LDL particles over the HDL. Correct, I mean, you certainly want to a lot more HDL particles that if you can than LDL particles or a lot more ApoAs than ApoBs. And we achieve that. And it's in the literature. It's not just conjecture with you and I sitting here talking. I see it in my patients most importantly.

But then also it's clearly in the literature and how you change those particles. And, once again, to get the information from doctors like us. And then if you want to take it to another doctor and say, "Well, what say you?" If you want to see a blank look on a cardiologist's face, take that kind of advanced profile to your cardiologist and see what they say. But it's very clear and we see it on a © 2018. All rights reserved.

daily basis. When you give the body what it needs it will make the products that it needs.

**Dr. Jockers:** Right. Exactly. So, just really working with the natural rhythms of the body, right?

**Dr. Wolfson:** Most certainly. And, like you said, I mean LDL has a purpose, right? LDL is the bus, the carrier, that takes things around the body. That's why it's formed in the liver.

**Dr. Jockers:** Like fat soluble nutrients, vitamin A, vitamin D, vitamin E, we need—it carries them.

**Dr. Wolfson:** Exactly. Like CoQ10, it's a major part of our immune system. You know, so, it's so important to have a lot of those big, large, fluffy LDL particles floating around. Those are the ones that are healthy. And I think that's also one of the benefits certainly when it comes to going keto. And I know that you're very big into fasting.

Dr. Jockers: Yes.

**Dr. Wolfson:** Is that as you kind of adopt that lifestyle, you allow the body to clear those old LDL particles that may be circulating around too much. They're getting smaller, getting damaged, getting oxidized. And then clear those from the system when you incorporate the intermittent fasting protocol as well.

**Dr. Jockers:** Yeah. You know as somebody who practices functional medicine I always tell my clients, "Hey, if you're following a paleo/keto lifestyle, you're following these natural, healthy, lifestyle practices and yet for some reason your LDL or HDL ratio is off, it's usually one of three things. It's either insulin resistance that isn't budging, it's a thyroid problem that maybe is underdiagnosed or undiagnosed or it could be an infection." What are your thoughts on that?

**Dr. Wolfson:** Well, I certainly agree. And then I would say maybe a fourth component to that would be it's a sunshine deficiency. Because as you get more sunshine in that last step before you make cholesterol. Because cholesterol, it's a passenger on that LDL bus, because it's being delivered around the body where it needs. So, as you're stacking that bus full of cholesterol you'll have less of it to stack in there the more sunshine you're getting. Because right before you make cholesterol you have something called 7-Dehydroxycholesterol. And when the sun hits 7-Dehydroxy it converts it into vitamin D.

So, you want a lot more vitamin D, not necessarily through supplements. Although if that's all you have because you live in upstate New York, or Canada, or somewhere else I can insult, you definitely want to get sunshine. And you and I see clients from all over the world. I tell people that live in those environments, "Move! You've got to get sunshine. As you crank up vitamin D, you will lower your cholesterol." So, high cholesterol, I believe, in so many times, is a sunshine deficiency.

**Dr. Jockers:** I mean, that's so huge for the listeners to understand, right? I mean, just getting out in the sun on a regular basis. It's just obviously a natural part of what our ancestors did on a regular basis. If somebody comes in to you, let's say, they come in 40 pounds overweight, they want to adopt a healthier lifestyle, right? LDL to HDL is off. They've got, let's say, coronary heart disease, right? Tell us about like how you take them through the process of adopting a more natural ketogenic lifestyle.

**Dr. Wolfson:** It definitely sounds like a lot of my patients, obviously, for sure. So, a lot of experience. I think it's important to get educated, right? So, to watch summits like this and to really learn all the steps to do it. And therefore, when you're learning from experts like yourself that have been doing it for so many years, you're learning from the best. You're learning from their experiences, as doctors like us serve as their guides to get them where they need to be.

I'm a very big proponent of organic food. So, organic food, therefore, not sprayed with pesticides and chemicals. I think that is a perfect way for people to start overall health and wellness. It's like no matter what your vice is just do it organically. And then from there, obviously, it depends on the person, right? Some people, as you know, they're ready to dive into the keto lifestyle. They're like, "Okay, give me the protocol. I'm jumping in." Other people, it's more of a, kind of like, six weeks to keto, six weeks to paleo lifestyle. And you start kind of checking things off and get them off their food addictions is what it is.

Dr. Jockers: Yeah, that's big.

**Dr. Wolfson:** So, the first thing I usually remove on people is gluten. I say, "Anything that has gluten, that nasty little particle from wheat, barley, and rye, get that out of the diet." And then from there you kind of wind up at like that most evil villain which is sugar. And that's usually kind of the last thing I remove because it's the last thing they want removed. And it's such a major hurdle. So, I think I build up the confidence in those people to get them off a lot of those foods.

Dr. Jockers: Small wins, right?

**Dr. Wolfson:** And then get them off that sugar at the end. And it's been very successful.

**Dr. Jockers:** Yeah. That's awesome. Absolutely. And I know I heard you speak recently and you were talking about heart disease as an autoimmune condition, right? Can you tell us more about that?

**Dr. Wolfson:** Most certainly. The cardiologists really do think that it is a deficiency of Lipitor, Crestor, Zocor. It's a statin drug deficiency. It's an aspirin deficiency. And I've learned so much more. And along that course it's just a matter of why is your body forming these blockages? Your body's not making mistakes. Your body is doing this because that arterial wall is damaged. And when you follow the right lifestyle, and you eat the right foods, and you get the sunshine, and get the sleep, the body will start dissolving that plaque.

The body will prevent that plaque from occurring. Because as you have these damaged blood vessels, the body comes in to repair that damage. See you have all this immune tissue coming in, the macrophages, the monocytes, the lymphocytes, T cells, B cells. They're all found in that plaque. And they're not innocent bystanders. They're there doing that work to repair and to heal and to protect that vessel. If we take away all these bad foods, our immune system is not going to attack that blood vessel wall.

**Dr. Jockers:** Right. Absolutely. That's so huge for people to understand, right? That it's really, it's inflammation. It's an autoimmune condition because the immune system is just going haywire because of just all this stress on the system. So, tell us about, in your book, in *The Paleo Cardiologist* book, you actually have a food pyramid. Tell us, basically, what your food pyramid looks like and how you teach your clients how to use this.

**Dr. Wolfson:** Well, you know, certainly. I think that there's a lot of debate amongst people now. And I think there's kind of really going into two camps at this point. There's the keto/paleo people, like us. And then there's people over here that are vegan. And I think that that is very poor advice from the vegan side.

**Dr. Jockers:** Because that is so common especially with Dean Ornish and a lot of the people that are in cardiology.

**Dr. Wolfson:** There's a lot of people in that space right now that are doing that. And they call themselves plant-based. Now, not all of them are vegan, who call themselves plant-based. Well, I'm plant-based too.

Dr. Jockers: I'm plant-based. Exactly.

**Dr. Wolfson:** The foundation of my pyramid is vegetables. And then from there you go to things like nuts, and seeds, then eggs, and avocados, and coconuts, and free-range grass-fed meats, and wild seafood, specifically the small fish, sardine, anchovy, wild salmon, shellfish. I test those things on my patients as I know you do on a daily basis. My patients are not coming up high in these toxins when they're eating those high-quality foods.

And how you mix up that pyramid is kind of up to you. I think the health that's been proven by explorers, people that are still alive as paleo peoples, including Eskimos, they eat nothing but caribou, and moose, and whale blubber, and their health is fine. They're cold. I think it's also a sunshine deficiency for some of those people as well, of course, that live at that high latitude. But the vegan lifestyle is just not congruent with total overall health. It's better in some ways then obviously eating fast food and junk food diet. It's a much cleaner process but I think the ultimate is just following the wisdom of mother nature and how we've done it for millions of years. That's the answer. Why try and reinvent what we've been doing successfully for so many years?

**Dr. Jockers:** This is really a big thing because there's a lot of cardiologists that are in to more of a natural, healthy lifestyle approach. But, again, they're kind of breaking this down and saying things like, "Hey, stay away from all animal fats." Right? But the right type of sourced animal fats, so grass-fed beef, different things like that, can have tremendous benefits. Tell us about like some of the nutrients that we find in let's say grass-fed beef, or grass-fed red meat, or even something like a grass-fed butter.

**Dr. Wolfson:** Right. Right. When it comes to these things and, once again, our ancestors have been doing it for so many years. Animals on the planet are either eating other animals or they're eating insects. So, not to bash the vegans, per se, but they're the only people that are not doing either one those, totally incongruent with nature. And I think it's bad advice to the public and to their patients. But, once again, when you eat those meats, those quality meats, you're getting all of the good saturated fats. You're getting conjugated linoleic acid, CLA. You're getting good quality omega fats that are in there that we need to get the job done.

There's certain amino acids, taurine, for example. Taurine is so important for healthy liver and gallbladder function. It's important for cardiovascular function. Taurine has been shown to be deficient in the vegan population and at very high levels in the paleo populations. And taurine, when you look at the data on taurine, lowers blood pressure. It decreases cardio ectopic beats, PACs, PVCs, people with irregular heartbeats, atrial fibrillation, which is so © 2018. All rights reserved.

common that I see from people as a complaint to come see me, and to get them on these right products, to get them on these right foods. B-12, of course, is notorious for people to be deficient in that if they're not getting the quality foods.

But ultimately, I would encourage anyone who is following a totally plant-based diet, please eat seafood. Because it is very clear you cannot get omega-3 DHA/EPA from vegan sources. You cannot do it. You and I both test people. And when those people that we test, we test their omega-3 levels, they are all deficient in omega-3 EPA/DHA when they follow that vegan lifestyle. And the literature is very clear. The people with the highest levels of the omega-3 EPA/DHA have the best health outcomes, cardiac-wise, cancer-wise, brainwise, autoimmune-wise. They live longer.

**Dr. Jockers:** Yeah, I mean, omega-3s are just so critical for down-regulating that inflammatory cascade that you were talking about that's damaging those arterial beds. So, so critical for brain function, immune system, everything.

**Dr. Wolfson:** And we can't make it.

Dr. Jockers: Yeah, right. It's essential.

**Dr. Wolfson:** You know we have that enzyme. That delta 60 saturation enzyme and we do not convert these walnut oils or walnuts and chia seeds and these ALAs, alpha linoleic acids, we do not convert those into the critical form. Now, the number one place where DHA sits in the body, that we only get from seafood, is in the back of the eye, right? It's sitting back there in the retina. And in the back of the retina it's just catching everything from our environment.

All of the visible light from our environment and all of the ultraviolet light that we have receptors for in the back of our eyes, right? It's all been vilified but we're built to accept it because we're in congruence with nature and with the sun. And when all of that electrical light gets coming into our body, it's caught in the eye, and then it's converted to chemical forms, chemical energy, and the system works perfect. Why break that system that's been working perfectly for so many years?

**Dr. Jockers:** Yeah, it's awesome. It's amazing. Tell us about, let's say, you were stranded on a desert island or something like that and you had five foods that you could bring with you to live off of for let's say a year. Okay, five foods. You've got sunshine, right? You're grounding, okay? You're swimming. You're active. But you only have five foods that you can bring, okay? Tell us your top five.

**Dr. Wolfson:** Wow. Wow. Um, I for sure would bring fermented vegetables. I love fermented vegetables, as you know, just a tremendous source of probiotics, good healthy gut bacteria. So, therefore, if I do kind of a fermented food jar, I'll have a lot of different vegetables in there.

Dr. Jockers: Good variety, yeah.

**Dr. Wolfson:** So, I'll cheat on that one. As opposed to me saying, "Well, I'll take broccoli or I'll take spinach with me."

**Dr. Jockers:** He's cheating the system here. So, he's got fermented cucumber in there. So he's got the pickle. He's got cabbage. He's got pretty much everything in there.

**Dr. Wolfson:** I've got the radishes in there.

**Dr. Jockers:** Because you can pretty much ferment just about any vegetable, right?

**Dr. Wolfson:** Any of those. You put those in there. I would take that. I would definitely—but I'm on the island though so I've already got seafood there. So, I don't have to bring that with me.

Dr. Jockers: You catch some fish.

**Dr. Wolfson:** So, I'm not going to say seafood. I would definitely bring eggs with me. I would bring avocado with me. I would bring berries with me. And let's do some grass-fed, free-range, bison liver.

Dr. Jockers: I like it. There you go.

Dr. Wolfson: Let's do that. I like that.

**Dr. Jockers:** He's just getting the liver right there which is actually the most nutrient-dense part. Tell us about some of the nutrients you find in liver that are also good for the heart. Like, I know CoQ10 is in there.

**Dr. Wolfson:** CoQ10, and once again, going back to LDL. CoQ10 is on that LDL bus as well. And that's why you find that statins, when they reduce LDL, they reduce CoQ10 and, not only that, but CoQ10 production in the whole process of how that all happens.

**Dr. Jockers:** Yeah, absolutely. If somebody were to take—this is a good point that our listeners really need to know. If somebody had a history of using a statin medication, what should they do? Let's say they're listening to this and they're like, "Okay, can I come off my Lipitor? Can I come off my Zocor? Is © 2018. All rights reserved.

there side effects to coming off of that? When I go in to talk to my doctor, what should I do about that?" Or if they were to come to you and say, "Hey, I'm taking Lipitor right now." And you were going to give them advice, what would you tell them?

**Dr. Wolfson:** Well you know, certainly, I encounter that very often. And I wrote a whole chapter basically about some of these useless, oftentimes dangerous drugs. So, best case scenario, Lipitor, Crestor, Zocor, the statin drugs, have a very limited benefit. So, I tell my patients if they want to discuss this with their local doctor let's just do a trial. We know, I would say to the doctor, "The drugs really don't work anyways. So, can I try for three months on this other plan? I was watching Dr. David Jockers' summit and I learned all this information. I want to implement that information over the next three months. Could we check my numbers now, the advanced numbers? And then can we check 'em three months down the road and let's see how I did?"

And if the doctor doesn't want to work with you on that then of course you need to find a new doctor. And there's plenty of natural holistic providers that are out there that will help guide do you. Neither one of us of course are telling anyone to stop their pharmaceuticals, but the reality is certainly when it comes to statin drugs, it is very easy to do. Some of the things like blood pressure drugs we want to kind of slowly wean people off of. But when it comes to some of these others we can do things pretty quickly. But I wouldn't suggest anybody to do it without guidance with someone who is a professional in that field.

**Dr. Jockers:** Absolutely. So, there's no real side effects of coming off of Lipitor, but obviously you want to work with that medical professional in a good process to come off of it.

**Dr. Wolfson:** Most certainly. No one is stopping Lipitor and saying, "Wow, I feel worse." And Lipitor is not making anyone feel better. That's for sure. You're only going to feel better when you stop the pharmaceutical. But once again if you do it the right way, it's actually very simple and very rewarding for people to see that there is an alternative. And, once again, there's many doctors out there like us that are practicing this right now. The health revolution is on. The old model is totally broken.

And there something that was invented a few years back called the internet. And on internet you can go and get tremendous help information and become informed. It's not like becoming your own doctor on the internet. But it's really arming us with the tools. The 1970s are over where it was like you go to see your doctor and your doctor says, "I hear your complaint. Here is your prescription. Goodbye." And you don't ask any questions. "Take two aspirin © 2018. All rights reserved.

and call me in the morning." You're like, "No! Wait a second. I heard some dangerous things about aspirin. I don't want to do that. And there's this other doctor who's talking about"—as you just said,"—"Omega-3, and omega-3 fats, and omega-3 fish oil, to lower my inflammation and therefore I'm not in pain. And there's all these other ways. What say you, doctor?" And if your doctor doesn't know it's time to find a new doctor.

**Dr. Jockers:** I mean, it's so true. Really, ultimately, doctor means teacher. And today's doctor, the doctor of the future, is a health coach. They're there to help encourage, inspire, empower you, obviously give you the right information. If you have a doctor that's not open-minded—I always tell my patients go into your doctor, tell them, "Hey, I'm starting a healthy lifestyle. I'm getting outside. I'm exercising regularly. I'm getting in the sun. I'm doing these healthy lifestyle things and I need your help to help reduce my blood pressure medications at the right time." Or something along those lines.

And I tell them, you're going to get one of two responses. The doctor should be high-fiving you. They should be excited. "Yeah, we're going to watch this. We're going to help you with the process. These are our checkpoints. We're going to be looking at your blood pressure twice a day, whatever it is." If they're not like that, if they're close minded, that's not the right doctor for you. That's not somebody that's going to be encouraging and uplifting for you. You need a new environment. So, yeah, I'm totally with you on that.

**Dr. Wolfson:** I think that the former person is a lot more likely, unfortunately.

Dr. Jockers: Yeah, exactly. Yeah.

**Dr. Wolfson:** I think for all the people that are watching this, of course, let's just say let's just divide them into two people. There's a 25-year-old that's watching this and they're totally healthy, no health problems whatsoever, but they want the best. They really want to prevent. They can really dive into this. But we're also talking about maybe the 55-year-old person who is on two, three, five pharmaceuticals. They're the ones that really need the guidance. For other people, yeah, it's like diving into mother nature. That's a piece of cake.

**Dr. Jockers:** Yeah. Absolutely. You brought up aspirin, okay? And, obviously you know, I have a lot of clients coming in, as you do, that have been taking baby aspirin for a long time. And in a sense the medical world looks at aspirin–I know it's a stimulator of the AMPK pathway, which same thing with metformin, diabetes drug. In the medical system, they're like, "Aspirin is one of the best things you can possibly do for your body. Take a baby aspirin a

day." But tell us about why that may not be a good option. And what other things we can do to help stimulate that AMPK pathway?

**Dr. Wolfson:** Well, I think there's "benefits" if you kind of break it down to a lot of different pharmaceuticals. That's where you get some of that activity but then you also get the side effect. And the side effect of aspirin would be catastrophic bleeding, gastrointestinal bleeding. And pretty much anybody who's on aspirin does bleed at least a little bit. And unfortunately, in my career I've seen people bleed a lot a bit and die from gastrointestinal hemorrhage. The reality regarding aspirin and primary prevention is that it stinks.

When you look at the literature, and according to the American College of Cardiology, women who are 65 and under, that are otherwise healthy women, it's a contraindication. It's what they call a class 3, which is, don't take this for that reason. Unfortunately, the media has sold us something different. They're shouting a different message then even the American College of Cardiology, the biggest group of cardiologists in the world. So, aspirin is not necessary for those people. And aspirin, there's better ways, and there's natural blood thinners, if you will. But I think fundamentally when you follow the keto/paleo lifestyle, when you get the sunshine, you get to sleep, you get the physical activity, you get the grounding, all the things that you teach, your blood is naturally thinned. And it's working perfectly. So, we don't need any extras to it. So, aspirin is not something that I use my practice. Not something that I recommend.

As you said, it may have some biochemical benefits. And you talk about AMPK pathway that does lower down inflammation. It has so many different components to it biochemically. One of my favorite activators of that is berberine. I love berberine. Berberine, I think, is kind of like that Swiss Army supplement, if you will. The Chinese have been studying berberine that comes from a plant. They've been studying it for 75 years. The literature is just hundreds and hundreds, if not thousands, of articles on berberine. There's over 400 articles about berberine killing cancer.

Berberine helps to modify that cholesterol panel in a very positive way. One of the things that it does is it increases LDL receptors on the liver. So, as LDLs are floating around the body and as they're getting older and damaged, those catcher's mitts on the liver pull that LDL out of circulation. And berberine helps to activate that. And part of that is through AMPK activation. So, whether it's resveratrol, curcumin, there's a lot of different things to do. And frankly you can get a lot of that from the food as it is. I know you are a big fan of supplements as I am a big fan of supplements because even the best foods

are deficient in plenty of nutrients. And a lot of people have to recover and they have to recover fast, and you can't necessarily do it from food alone. You've got to bring in these evidence-based supplements to supplement the healthy lifestyle.

**Dr. Jockers:** Yeah, absolutely. And even just omega-3 fatty acids. I mean, think about that. You were just talking about that. So, aspirin they're using it to help thin the blood. If you're getting enough omega-3 fatty acids, the right ratio of omega-6 to omega-3, which is really just eating a lot of vegetables and wild-caught fish, right? And if you're doing that you're going to naturally have the balance and blood's going to flow well. You're going to get that good oxygenation.

**Dr. Wolfson:** No doubt. Every single cell contains omega-3, EPA, and DHA. It's all over the body. And you're right, we need it. We want to have those nice, slick, blood vessels. And when the blood vessels are nice and slick, nothing sticks to it. So, you don't get coronary artery disease. You don't get deep venous thrombosis. You don't get blood that sticks together that will lead to a stroke or carotid artery disease.

And that takes me back really to the sun. Because the sun really provides that energy to come in and make that surface slick. Something that's been popularized by Gerald Pollock is the exclusion zone. And as you have that exclusion zone where it's just this layer of pure water running on the inside of these vessels. So all of the different pathway things that are happening, the shuttle where you're taking LDL for example from the liver to the rest of the body and it's flowing through those tubes called blood vessels, it's not going to interact anything when you have that's slick blood vessel generated from the sun.

**Dr. Jockers:** The sun is just so, so key for human health. And, obviously, it's been vilified for so long, so I'm really glad you're bringing this to the forefront and to attention. I know for myself, I knew this when I was a teenager, I always felt significantly better when I was in the sun. In fact, my family, we lived in Pennsylvania, we moved. And I was sick all the time when we lived there. We moved to Florida, near the beach, St. Augustine. Beautiful area. And I started getting out in the sun. We were right near the beach. I would go body boarding and surfing and things like that. And it was like my immune system got better. My whole body got better. I just wanted to be out in the sun. It was just natural and innate. And I was just listening to my body. I know you're in Arizona. So you get out in that heat on a regular basis, right? We were talking about that.

**Dr. Wolfson:** People come from all over the world into a holistic cardiology office, right? Because I don't have really much in the way of cardiology competition. There's not many people like me. And I tell them, I say, "Listen, you've got to get sun." And they say, "Well, what do I do? I live in Canada. I live in upstate New York." All that kind of stuff. And I tell them, "Move! Move to Arizona. In Arizona, it's sunny 450 days a year. In Arizona, it's sunny at night. So, if you want sunshine, move to some of these different areas." You take just these medical diagnoses that they come up with like seasonal affective disorder, where you're depressed when you live in Chicago in the wintertime.

Well, it's not seasonal affective disorder. It's a sunshine deficiency syndrome, if you will. Get out and get that sun. At least go on a lot of vacations. And even so, even in the winter time, if you can brave that cold to get out in sun and full body sunshine. Our ancestors, right, were running around naked all of the time. And when you come to some of these events whether you go to a cancer events, or a cardiology event, you know we've got to embrace that sunshine. And frankly, naked sunshine to get the job done.

**Dr. Jockers:** Get as much of that on your body as possible. You're absolutely so right. So, a lot of people will go out and they'll take a walk, but they've got sleeves on, right? They have got long shorts or pants. It's just not quite same. You're not getting that same level of sun exposure. So, take the shirt off. If you're a woman, wear a sports bra. I know, my wife and I, we take a barefoot walk, right? She has shorts, tank top or something like that. I'll oftentimes take off my shirt. And we'll walk our boys around our neighborhood at least once a day if not twice a day, barefoot. Even though we're on concrete, we're getting on grass, things like that. We ground. It's usually like a 20-minute walk. We've got hills, uphill, downhill. So, it's family time. It's outside time. We're getting sun exposure. We're grounding. We're connecting. It's really what we were made to do.

**Dr. Wolfson:** And it's totally free, right? People sometimes complain, "Well, I can't afford that kind of lifestyle." Listen, sunshine's free. Sleep is free. Walking barefoot is free. In fact, the less clothes you wear the less money you have to spend on clothes.

Dr. Jockers: Very true.

**Dr. Wolfson:** And it's so simple. You don't have to join the gym. You don't have to have this fancy monthly membership. Just get outside.

Dr. Jockers: Get out and get moving.

**Dr. Wolfson:** Go for the walk. Go with the family. Hold hands with everybody. It's so amazing. Our little dudes, we've got a 10-year-old and five-year-old. That five-year-old, we'll let him walk around that neighborhood naked, and in our backyard. As I talk about in my book, be careful on the weekends when you come over to our house, and you peek over the fence, we will be back there naked for at least some of the time.

Dr. Jockers: That's hilarious.

**Dr. Wolfson:** So, early morning sunshine, afternoon, whatever we want to do, the more of it the merrier. What if breast cancer was a sunshine deficiency to the breasts? What if prostate cancer is a deficiency coming into the area of the prostate? Colon cancer? On and on and on. That sun helps to recharge the whole system. Certainly, if you're going out in the neighborhood, I'm not encouraging you to walk naked. And if you do, hey, great. I don't care personally.

**Dr. Jockers:** There are nudist colonies.

**Dr. Wolfson:** I don't have a problem with that. You know, if you want to go do that, that's fine. I'm not going to call the cops on you. But that being said, we really want to embrace that lifestyle. And it's so important, so healthy.

Dr. Jockers: Absolutely.

**Dr. Wolfson:** Oh, and let me say this. In Arizona, everyone's walking around where they've got the fancy sunglasses. So, if I just said that we need that UVA/UVB coming into the back of the eye, hitting those receptors, making that DHA turn, and converting all of that electrical energy into chemical energy to feed the rest of the brain in the back of the body, we can't do that with sunglasses on. Even with regular glasses it blocks off some of that light. So, I'm not telling people to take off their glasses especially while they're driving their car, but just stand there for a few minutes and let the energy from the sun come into the eyes. And that baseball hat that everybody wears because we want to protect our face, and our skin, and all this stuff. Our ancestors, once again, that scalp -- that sun was coming in right through the bone of the skull, right into the brain, and just working it's magic. Embrace it.

**Dr. Jockers:** Absolutely. Now, what are your thoughts on intermittent fasting and using that as a therapeutic approach?

**Dr. Wolfson:** I love it. The number one thing that I think of with fasting, because you and I could obviously talk all day long about the science, and we will, and it's fun, and it's exciting, and it's totally evidenced based. But what's

nice about intermittent fasting I think it breaks addictions. It breaks those food addictions to carbs, to sugar, to alcohol. And once you kind break those addictions, I think you do such a positive thing.

Now, how long you can hold that break of those addictions is up to the individual person. The longer the better. But I love incorporating intermittent fasting. And it's really super simple, right? So, it's not like you're putting them through this whole program, per se. You're just telling people, "Hey, skip a meal. Skip two meals. Do a water fast. Do a juice fast. Do some kind of a fat fast. Or a bone broth fast or fish bone fast." I find people are very successful. And I think it's fun. I think it's exciting. It's something even kind of the whole family can do.

Dr. Jockers: You can do it together.

**Dr. Wolfson:** You know all this stuff obviously. Just the significance of how societies doing this forever.

**Dr. Jockers:** Absolutely. So, there you've heard it guys. I mean, this is a cardiologist and he's telling you get out in the sun, get naked out in the sun, or at least as minimal clothes as possible. He's telling you to get grounded. He's telling you eat real foods. He's telling you take time where you're not eating. Space out your meals or do time-restricted feeding. Take times of fasting. This is the words of a cardiologist right here. This is one of the best things you can do for your heart. So, Dr. Jack, tell us where our listeners can find out more about you.

**Dr. Wolfson:** Well, my wife and I, you know, once again, I became a natural cardiologist after meeting my wife who is a doctor of chiropractic. For what it's worth, what I'm telling you, I think you should all see chiropractors. Go make chiropractors your go-to doctor, the go-to physician. That's my message, certainly, is that everybody must be under chiropractic care.

My wife and I have a website called thedrswolfson.com. Doctors is abbreviated D-R-S, thedrswolfson.com. We're on social media under the same name. We have an office out in Arizona. We're both in practice. And we love seeing patients. And we love changing the world. And that's what we're all about. So, thank you so much for having me on.

**Dr. Jockers:** Love it, man. Really an honor and privilege to have you. That's for sure, Dr. Jack. So, if you enjoyed the content here with Dr. Jack, and I just want to really ask you to take time to consider owning the Keto Edge Summit for yourself where you can have all of these interviews, the transcripts, everything you need at your own time and your own pace so you can really

just own this information and apply it into your life, I guarantee you're going to get tremendous value. And really, it's going to help take you to the next level into your health. So, if you would do that, we would be honored and privileged, and we will see you on a future interview.