THE MODEL HEALTH SHOW

EPISODE 1029-

The Truth About Wearable Fitness Trackers, Protein Controversy, & the Biggest Sleep Mistakes to Avoid

You are now listening to The Model Health Show with Shawn Stevenson. For more, visit themodelhealthshow.com. The science is in, but it's been here forever.

Our sleep quality deeply impacts our metabolic health, our cardiovascular health, our hormone health. The list goes on and on. And the crazy thing is that today more than ever, we have to learn about how to do something that our bodies naturally do in the first place.

Sleeping is built into the system. We come with the factory setting to be able to do it, but of course, in our modern society, this is something that can be a very complex terrain. And that's okay because we also have some powerful insights and solutions. And so we're gonna look at some of the science on what sleep is impacting, but we're also going to look at the science on how do we optimize and improve our sleep starting tonight.

Not just that. What about our nutrition? What about the things that we're doing when we're awake? There's so much confusion with that as well. So we're gonna look at some of the big pillars, like this conversation around calories, this conversation around protein. All right? But we're gonna do this in a no holds bar way.

All right? I'm not pulling any punches. I'm not playing no games. All right, we're gonna look at this and just get to the real truth of the matter in a way that's going to make sense, but also to be tactical. And also, what about exercise? All right? These are those big pillars that we're looking at today.

It used to just be diet and exercise. Thank goodness sleep has popped up on the radar in a major way now as a part of this conversation. But the purpose of our exercise is very important. What is your purpose? If your purpose is weight loss, there's very specific forms of exercise that are well established to be supportive in that, and it might not be what you think.

And so we're gonna cover that as well. So this is super juicy. And this very powerful episode was an interview that I did on one of the top shows in the world called Habits and Hustle. All right? The Habits and Hustle show and the interviewer, Jen Cohen, is amazing. She asked the most incredible questions, and we dug in.

I'm talking about dug out. I'm talking about duggy fresh. I'm talking about skullduggery. Wait, maybe not that. But we got deep, and I'm so grateful to be able to share this with you today. And what we're gonna be covering is why your sleep quality might be the missing factor in your weight loss, some incredible insights about melatonin that you absolutely need to know, what it means if you struggle with interrupted sleep and waking up during the night The

surprising insights about wearable health and fitness technology like, the watches and the rings.

We're gonna talk about that as well. We're gonna talk about why calorie amounts on food labels can be radically misleading. Plus some insights on exercising for the sole purpose of fat loss that you won't wanna miss. And so again, this is a very special interview and I'm grateful to be able to share this with you today.

So without further ado, enjoy this interview with Jen Cohen on habits and hustle.

JEN COHEN: We have the wonderful Shawn Stevenson on, and we are gonna be doing a whole podcast on health, fitness, sleep, wellness, longevity. You are a wealth of information. How many books do you have now, by the way?

SHAWN STEVENSON: Three. Okay. Three, yeah.

JEN COHEN: You have three books, and the first book is a sleep book.

SHAWN STEVENSON: Sleep Smarter, yeah. So that was an international bestseller. First sleep wellness book to become an international bestseller.

JEN COHEN: Really?

SHAWN STEVENSON: It's translated in 26 or 27 different languages or countries, all separate foreign book deals.

So that really, it changed everything, and this w- it came out 11, about 11 or 12 years ago.

JEN COHEN: Wow. Yeah. So it was before sleep became the- Yeah ... most trending, talked about wellness hack, basically.

SHAWN STEVENSON: Yeah. Yeah. It really... And also, it was one of those things where, especially in the book industry- Yeah

they're very big on proof of concept.

JEN COHEN: Yes.

SHAWN STEVENSON: And so publishers weren't trying to really look at a book like that agents, and so it was something I really had to advocate for, and I'm grateful. Now it's just again, the conversation is just a big part. It's built in to the health conversation now.

And so I'm grateful for that, yeah.

JEN COHEN: What made you even think back then to write a book on sleep?

SHAWN STEVENSON: I was working as a nutritionist. I had just graduated, and I was still working in the gym as well as a strength and conditioning coach. Mm-hmm. But you know, we were seeing incredible results with people, helping people to, if they're on like lisinopril and metformin- Yeah

or high blood pressure, insulin resistance, all this kinda stuff, just helping to get their body to normalize a lot of these functions just through nutrition and exercise. But there was always this percentage of people who wouldn't get the same results, and that would really bother me. Ironically, sometimes it would keep me up at night "What is wr- why can't we get this person, get the weight off or get their blood pressure normalized?"

And so it just kinda hit me like a ton of bricks one day to ask people about their sleep, and I was shocked. I was shocked. Some people... I was working with this guy from France, and he shared with me that he only sleeps about four hours a night for, and he said for years. And when he said it, it was just like, I see it.

I see it. He l- there was part of... He kinda looked like a ghost a little bit, like a little tra- Really? Yeah ... like his spirit was a little bit like unsettled in his body, and and here's the thing. I know that people want change, but they don't want to change that much to get it.

JEN COHEN: That's right.

SHAWN STEVENSON: And so I started to look into what are some science-backed ways that people can improve their sleep quality without changing a lot? And so I just, I was blown away by all the data that existed that most people had no idea about. And so even one of those studies that was conducted by researchers at Appalachian State University looking at the timing of day that you do your exercise and the impact that it has on sleep a- at night.

And the researchers found that exercising in the morning, so they had exercisers to work out in the morning, this was 7:00 AM, a 1:00 PM group and a 7:00 PM group. And morning

exercisers spent more time in anabolic stages of sleep, so delta wave sleep. They had lower blood pressure in the evening, and they had more efficient sleep cycles overall.

And so not to say that the other times- Yeah ... aren't g- quote, bad to exercise. Exercise is great just about any time. But of course, working out in the evening and then trying to go to bed with your cortisol-

...

SHAWN STEVENSON: Elevated can be problematic. But it was just pointing to the way that we evolved, for most people just our genes are expecting us to be active in the morning.

JEN COHEN: Yeah.

SHAWN STEVENSON: And what that did was, one of the things the researchers found in other studies as well, exercising in the morning helps to kind of set or reset or kinda sync up our cortisol rhythm. Our cortisol is supposed to spike in the morning-

...

SHAWN STEVENSON: And then gradually go down through the day. And not to say that cortisol is like an, an antithesis of melatonin, but if cortisol is elevated it definitely does kinda have a suppressive effect on melatonin.

And so for a lot of people we would see, if we get a Dutch test done or whatever, just to be able to look at their- Yeah ... cortisol rhythm through a 24-hour cycle. We would see and call them tired and wired. Yeah. And so they would wake up in the morning tired- And then they would be wide awake in the evening, right?

Yeah. And they- and I've been there. I understand. And you wake up and you're like, "I can't wait to get to bed at night," but then nighttime rolls around. It's because their cortisol was elevated in the evening and too low in the morning. And so exercise is one of those things f- which s- seems kind of obvious to help to get that cortisol rhyth- rhythm reset.

JEN COHEN: And what happens? Did you see people, what was the data on people who worked out mid-morning or 1 or 1:00 PM?

SHAWN STEVENSON: Yeah.

JEN COHEN: What did you see? Was it still, it was better but not great, basically.

SHAWN STEVENSON: Yeah. Exercise i- again, in the afternoon, beneficial- Okay ... as far as in-influence on sleep, but not as much as the morning.

In the evening, same thing, but there was some issue with, again, cortisol. And you know what's so funny? Is that when I was writing the book, I had this book that my son was, he's 14 now, so he was like, like 2. And in the book it was like a nighttime book, right? Yeah. A go

to bed ritual book in the book. So it was like the little characters, the little animals they had their evening routine taking a bath and, having their little warm milk or whatever it was. But then part of the book was they exercise right next to their bed to basically tire themselves out.

JEN COHEN: Yeah.

SHAWN STEVENSON: And this was a belief that people had, decades ago- ... that we should tire ourselves out, when in reality there's a big difference between tiring yourself out and passing out versus actually going through your sleep cycles efficiently. And I, a- again, another great example.

I had a person I was working with who did BJJ, the Br- Brazilian jujitsu.

JEN COHEN: Yeah.

SHAWN STEVENSON: And their class was at 8:00 PM and they were like, "I was struggling to get to bed at night."

JEN COHEN: Yep.

SHAWN STEVENSON: I'm like, "Of course you are," 'cause you're wired. You're leaving there at 9:00- Yeah ... and you're just like, you just got done fighting basically, and they're trying to get to bed at like 10:30.

I'm just like, "Listen, either..." And this sometimes is just helping- A great coach is somebody who just looks at your life from a different point of view. And you could see okay, is there another time you could do your jujitsu training? Or don't be so hard on yourself to try to get to bed at 10:30.

It's okay to go to bed 11:00, 11:30 if your schedule allows for you to get up at 7:00 the next day. It's okay. You don't have to... So sometimes it's just moving stuff around to optimize sleep.

JEN COHEN: Do you... Back then when you wrote that book, I believe melatonin, taking melatonin was a big thing.

Yeah. And since then, it's now known that it's a hormone, whatever, and that people shouldn't be taking it and they should be taking now magnesium. Do you remember that back then? Was that- Of

SHAWN STEVENSON: course. Yeah. Did- I cited a, a study in the book. Melaton- just to be clear-

JEN COHEN: Yeah ...

SHAWN STEVENSON: it has its applications that are appropriate.

JEN COHEN: Can you tell us what it is? 'Cause I feel like melatonin now has become kinda like the devil. No one- Right? It's only you take magnesium glycinate- Yeah ... and if you wanna fall asleep, and not even the other types of magnesiums. Can you kinda give me some clarification on this? Sure. 'Cause I think there is a lot of confusion.

SHAWN STEVENSON: Yeah. F- melatonin, first of all, is one of the most powerful hormones that we have.

JEN COHEN: Okay.

SHAWN STEVENSON: It is... It's not just about sleep. That's really one of the biggest misconceptions.

It is part of our overall... It is a master clock regulator, so it's a big part of our circadian timing system. All right? And so what the hell is that?

When I was in school, again, my expensive university education- ... hearing about something like a biological clock sounds like soft science. We weren't really... It was, like, something literally two pages in a textbook, we move on.

JEN COHEN: Yeah.

SHAWN STEVENSON: But in reality, it is quite possibly the most important thing for us to focus on when trying to optimize what our body is doing because these circadian clocks are determining when all of our other hormones and neurotransmitters- proteins are getting made, gene expression. These master clocks are controlling everything about us, right?

And the question would be, for me, what the hell are they? What are these biological clocks or clock genes?

So these clock genes are existing in... our biological clocks or circadian clocks exist in p- almost all of our trillions of cells.

There are certain cells that don't have them, but these cells are glorified genes and proteins. These clock... we'll call them... if you're hearing the term biological clock or circadian clock, they're genes and proteins that control all of our other genes and proteins. Okay? Top-tier importance.

What in, what is influencing these circadian clocks? Light exposure- Mm-hmm ... is the number one thing that's determining what these clocks are doing. And we can hypothetically break these clocks by having all of this abnormal exposure to artificial light at the wrong times and lack of exposure to natural lights.

We evolved thousands upon thousands of years with these inputs telling our bodies when to produce, have a, a bigger boost of testosterone or human growth hormone or estrogen or melatonin, and suddenly all of this stuff is getting complete. It's chaos in our bodies.

And so melatonin is a master regulator of all these processes, most attributed to nighttime stuff.

Melatonin is a very powerful controller or regulator of our immune system function as well. And so this is why we see higher rates, one of the reasons, higher rates of various cancers in shift workers, for example.

And so there are multiple studies on this as well.

JEN COHEN: Yeah.

SHAWN STEVENSON: And so melatonin is not just about sleep.

It's about regulating our circadian timing system, which is ... It's influencing everything about us. Again I could just list off 20 things. Yeah. From immune system function testosterone, estrogen production cortisol rhythms, all of it. With that being said, should you just go to CVS and buy some of that off the shelf?

Yeah. You gotta be very careful about that.

JEN COHEN: Because why? Why? Is it dangerous?

SHAWN STEVENSON: So what the data showed and what I shared in the book was- the prevailing belief was that taking an exogenous melatonin supplement- ... would suppress your body's own production of melatonin.

JEN COHEN: Yeah.

SHAWN STEVENSON: But that turned out to not be true.

What the data showed was that y- you will still continue to produce the same amounts of melatonin, but your sensitivity to it goes down. The receptor sites for melatonin, your natural receptor sites- ... start to basically down regulate. And so melatonin won't work as, as well in your body.

You keep producing it just fine, but it doesn't work as well.

So there is a issue with that.

JEN COHEN: That's a big issue.

SHAWN STEVENSON: Of course. For sure. For sure. So now we know what the kind of culprit might be and why people continue to, end up taking more and more to get the same effect.

JEN COHEN: And people are giving it to their children.

SHAWN STEVENSON: Yeah.

JEN COHEN: To get them to fall asleep.

SHAWN STEVENSON: People have been giving their kids shit for a long time. I

JEN COHEN: know. I was gonna say, this is not new.

SHAWN STEVENSON: The, whether it's slipping some alcohol into the bottle or whatever-

JEN COHEN: ... The case might be. To get them to go to sleep. Yeah. You're right. Yeah. So this is not, It's obviously not a safe...

Would you say that parents should maybe not give their children melatonin before they go to sleep?

SHAWN STEVENSON: Ideally, no. Yeah. That's just not appropriate. But- ... you gotta look at the culture. What is the parents' habits around sleep- Mm-hmm ... look like? A lot of times our sleep habits have to do with our environment and our culture.

And which we'll get back. We'll, we could definitely dig in on this. But I wanna make this point. Where I would possibly recommend or say it's okay for melatonin use- Yeah ... small amounts, like micro amounts, especially shift like time zone changes, can help to kinda get you synced back up. Get a little melatonin boost.

I find it great for that. If you've had a couple of rough nights of sleep in a row and just "I just need to kinda reset," maybe that's another case. But again, you, there are so many other things you'd wanna do instead, but that's another place. Or if somebody's using again, a micro amount over a longer amount of time, that might be okay.

We just don't wanna get into higher doses, which is the vast majority. What it's recommended on the bottles or on the, the sprays or the supplements are pretty significant doses-

JEN COHEN: Really ...

SHAWN STEVENSON: of melatonin that, again, taken over a long period of time could cause some issues.

JEN COHEN: So why can't pe- so because now I feel like it's all about taking magnesium at night.

SHAWN STEVENSON: Yeah.

JEN COHEN: Is that... So there was a sh- I feel like there has been a shift over the years.

SHAWN STEVENSON: Yeah.

JEN COHEN: And does magnesium work better? And why does it work better for sleep?

SHAWN STEVENSON: Yeah. Again, another thing in my nutritional science class that I took in college, we were, like, the teacher, the professor recommended everybody take a multivitamin.

Mm-hmm. If you work with people, tell them everybody needs to take a multivitamin.

What we didn't know at the time, and by the way, my first semester, I actually moved into my dorm- in, in the summer of 1997- Mm-hmm ... which is crazy. And so this was a while back for sure. But even today-

JEN COHEN: You still look like a college kid, by the way.

SHAWN STEVENSON: Thank you.

JEN COHEN: Yeah.

SHAWN STEVENSON: Even today though, this is rare that you're going to have a professor who tells you that vitamin C on that multivitamin, there are multiple forms of vitamin C. You have one synthetic version of it in that supplement.

JEN COHEN: Yeah.

SHAWN STEVENSON: There are multiple forms of magnesium. I was not taught that.

There are multiple forms. It's more k- most people know multiple forms of vitamin D. Multiple forms of, obviously, the B vitamins. But just about any vitamin that you can name, minerals, there are multiple forms of that thing. And so when we're getting this kinda isolated supplement, it can be helpful, but some of it might not be what your body's actually looking for.

And so obviously there are all these different types of magnesium. Now, I can't make a recommendation on which one is right, which one's right for you. So of course there's different companies that have like blends of different magnesiums- Yeah ... and, but I, and not... I think they can be incredibly valuable by the way, but I lean towards let's do what we can to get this in, get m- magnesium in ways that we traditionally did, through your diet.

JEN COHEN: So you're not big on, on taking a supplement at all to try to fall asleep?

SHAWN STEVENSON: There are some, but they're gonna be more time tested, simple st- and there's, we can go into stronger stuff. We could do basic like chamomile.

JEN COHEN: Yeah. It's got some good B- Okay. Tell me some stuff, 'cause I know people love talking about sleep.

Yeah. And if I-

SHAWN STEVENSON: But magnesium, by the way, I'm not trying to-

JEN COHEN: No. It's- It-

SHAWN STEVENSON: I

JEN COHEN: wanna know ...

SHAWN STEVENSON: we've got some da- some really strong data on magnesium. P- and I'm a big why guy. So magnesium supplementation before bed helps essentially to shift over to that parasympathetic nervous system and supports the production of melatonin.

Mm-hmm. So it does have an impact, right? And but you gotta ... It's context. If you're taking the supplement, but then you've got all the lights on and the TV and all this stuff, are you gonna get that same effect? No, you're not. It's like you gotta stack the conditions.

And so magnesium can be great for some people sometimes.

That being said, I would love to see magnesium-rich diet. I would love to see a tryptophan-rich diet. Tryptophan is another really important- Yeah ... good sleep nutrient. Tryptophan is a precursor to make serotonin, which is a precursor to make melatonin. Give your body the raw materials to build this thing, but then get out of the way.

The conditions that you need for your body to make melatonin is a consistent schedule, 'cause it's always looking to produce stuff at the same time, and darkness, right? Mm-hmm. And so again, if you're not abiding by those things, you could take all the supplements you want, you're not gonna get the effect you're looking for.

JEN COHEN: And the tryptophan, isn't that in turkey?

SHAWN STEVENSON: That, yeah, that's-

JEN COHEN: That's a turkey

SHAWN STEVENSON: thing ... it is in turkey, but it doesn't make you sleepy like that. It doesn't? Does it... Th- we get tired on Thanksgiving 'cause we eat a shitload

JEN COHEN: of food. Too much. Exactly, too much.

SHAWN STEVENSON: That's what we call it, the itis, yeah, no it's, it's- You get a little itis.

But it's in chicken as well, it's in a lot of plant foods too, so yeah, you can find tryptophan in a bunch of different sources, but this is just to lean back to, okay, if we're looking at something supplement-wise, quote, "supplement-wise" for supporting sleep, chamomile, time-tested for relaxation, parasympathetic tone.

We've got kava, if you wanna get a little bit stronger.

Kava can really knock some people out as well. It's traditional, been used for thousands of years. But my favorite, affirmed by data, biochemistry In Pharmacology Research, I believe that's the name of the journal. I know that it's a couple of parts of the name of the journal.

But they did a controlled study with reishi mushroom.

JEN COHEN: Oh, yes.

SHAWN STEVENSON: And reishi was found to incre- improve sleep latency, meaning you fall asleep faster, increase overall sleep time improve sleep efficiency, and improve energy the next day as well. So reishi is really remarkable, but the sourcing matters, too.

Is it, are you getting the extraction method?

Because you might be buying a supplement and it's not even what the researchers used.

JEN COHEN: What do you recommend, then? What's a good

SHAWN STEVENSON: supplement? So there's hot water extracts, and then there's alcohol extracts as well. It just depends on the purpose, because with the alcohol extraction, the hot water extraction, you're gonna get different things out of the mushroom.

One method's gonna get more of the kinda hormonal compounds, triterpenes. Another method's gonna get the antioxidants and stuff like that. If you can, get both. And so this is why, like a, it's called a dual extraction. And so there are some companies out there that have both extraction methods in one tea or one supplement.

JEN COHEN: And that reishi can help you stay asleep fall asleep, and have better quality sleep.

SHAWN STEVENSON: Yeah. And no negative side effects. That was the biggest thing- Oh ... I wanted to point out- Yeah ... about that study. If you put that up against some of these stronger medications or even some supplements like melatonin, with, we get reishi, we have these benefits with reishi without negative side effects, and it's immunoregulating, and it's attributed to, supporting longevity.

It's been used for thousands of years. It's something I personally use a couple times a week. I'll have a cup of reishi 45 minutes before bed just to unwind. Really? Yeah. Yeah. That helps. But especially if I'm traveling And if I'm wanting to get a reset, I'll have some reishi tea before bed.

And I blend it with a little bit of fat as well, just a little, because again, it kind of helps to bind with certain nutrients, with the digestion. So maybe this is some ghee,

JEN COHEN: really?

SHAWN STEVENSON: Yeah. Just a little bit of ghee. Maybe a little bit of some stevia or something just to make it a little sweet.

But yeah. But it's earthy. Yeah. Nobody said reishi's delicious.

JEN COHEN: Yeah, I know, but it's- You know what I'm

SHAWN STEVENSON: saying?

JEN COHEN: So- But it works.

SHAWN STEVENSON: Yeah, it does work. Yeah. People who are about that sleep life have been doing something for years because it just flat out works. It creates a notable improvement to our sleep quality.

Multiple studies, including a study that was cited in the Journal of Applied Physiology, suggest that blue light from our devices is especially powerful at suppressing our melatonin production. Now, obviously, we can pull the plug on these things. We could turn off our devices. We could set them down We could sit them down, but it's very difficult to do those things in our modern reality, and it is what it is.

So most of us are going to be interacting with our tech devices, our screens, whether this is television, our laptops, our smartphones in the evenings. And one of the ways that, again, people that are really about that sleep life have been utilizing for years is utilizing some blue light blocking glasses.

Now, this is super important because the technology has come so far. Most brands of blue light blocking glasses do not block blue light efficiently, and they're not actually lab tested to be effective, and they don't block other known spectrums of light that have been proven to disrupt our sleep quality, like green light, for example.

And that's why I utilize the blue light blocking glasses from Bon Charge. They're scientifically engineered to block out 100% of melatonin disrupting blue and green light for improved sleep and regulated circadian rhythms. These glasses are FDA registered and proven to be effective. And right now, you can get 15% off when you go to boncharge.com/model and use the code model.

Again, 15% off. That's boncharge.com/model, B-O-N-C-H-A-R-G-E.com/model. Use the code model at checkout for 15% off. They've got all kinds of stylish frames. Get the ones that you vibe with. You're gonna look good. You're gonna improve your sleep quality. And again, this technology has come so far. They've got all the science there as well if you want to look into that.

But head over there, check them out, take advantage of the discount, 15% off. Go to boncharge.com/model. And now, back to the show.

JEN COHEN: Because I feel like it's not so much for people and myself, it's not about falling asleep, it's about staying asleep.

SHAWN STEVENSON: Yeah.

JEN COHEN: Do you have any recommendations for how people could actually stay asleep?

Because that's the biggest problem I feel that's happening, especially in mid, middle age.

SHAWN STEVENSON: Yes. So n- number one, We have to move away from adding so much morality to you sleep through the night. Mm-hmm. Like you're doing everything right.

We have sufficient documentation of people centuries ago waking up, basically having two sleeps.

Waking up after a certain amount of hours, maybe, ha- having a little snack, maybe having sex, maybe whatever the case might be, and then they go to sleep again. But this is a time, again, we didn't have artificial lights, so you're not getting on your phone. They're ju- it's still dark.

Mm-hmm. And it's not safe to be out rummaging around, so you get the rest of your sleep that your body might be looking for. So this doesn't have to be this black or white. The reason that we might wake up, which we wake up, we ac- all of us wake up, but we're just unaware of it because we're going through our sleep cycles, right?

Going through the different sta- quote, stages of sleep, right? And so there are times when we're ha- we have very light sleep where we're kind of out. We can wake up. Maybe we move around, whatever, and then we just drift back into the, into our sleep. But some people mo- have a more pronounced waking up when moving through those stages.

And today, unfortunately, we start doing . Maybe we're look, we c- we look at our phone or we look at the clock and we're like, "Oh, , I have, oh, I have two hours left. Oh my G-" And we start stressing

JEN COHEN: about it. That anxiety.

SHAWN STEVENSON: Yes. And that is just, is so unnecessary because you are okay. If you just slept for, five hours and you still had two hou- maybe your body is just ready to get up, and that's okay.

M- but a big reason, if this is kinda chronic and you are seeing the negative side effects, this i- it has a lot to do with cortisol spikes. All right? So again, this r- the rhythm, you might be getting, some inappropriate release of certain hormones. And it's not all ... Cortisol's not bad, by the way.

But maybe it's just like you're getting a certain spike. And may- this could be based on when you're eating before bed. Maybe you ate something close to your bedtime or maybe you didn't. Maybe you ate too far away from your bedtime and that's not appropriate for you. 'Cause, now it's don't eat two hours before you go to bed or three hours or pe- three hours-

JEN COHEN: Right

SHAWN STEVENSON: is the main thing people talk about. That's great for most people, actually. For some people, their blood sugar goes too low-

...

SHAWN STEVENSON: While they're sleeping, and that can pull y- you'll get a adrenaline boost spike, and it can wake you up And or again, it could be, f- for most people today, what it really boils down to is we're creating disruption with our natural rhythms because of our devices.

JEN COHEN: Yeah.

SHAWN STEVENSON: And so being on your f- screen right before bed, watch, what, a television, your phone, whatever, we know we need a little bit of time to help our s- Downregulate, yeah ... there are multiple studies on this now. When I shared this almost 15 years ago, it was kinda like, "What?" Yeah, so we know that's the case.

If we do wake up, d- just don't get on your phone. You could do some breathing exercises, do some breathwork.

JEN COHEN: That phone though, you're right, it just... Then you're r- then there's no way you're going back to bed. Yeah. But why? Is it because we're doom scrolling and the light, the blue light- Yeah ... and all the things?

SHAWN STEVENSON: Yeah.

JEN COHEN: Would you say-

SHAWN STEVENSON: It's fortifying that interruption in the, in your normal rhythm.

JEN COHEN: Oh, yeah.

SHAWN STEVENSON: So you're getting up and getting on your... So now, again, you might take a couple of nights off and not get on your phone and struggle. Y- your body has to have time to get everything synced up again.

Because our bo- our brains are always looking to automate, always. And so this is why it's so important to have, to try to do stuff around the same time to the best of our ability, especially when we're kinda discombobulated. So this is why the morning routines and evening routines, they're uber valuable for people who are out of sorts.

JEN COHEN: Yeah.

SHAWN STEVENSON: Once you have some pretty good rhythms, it's okay... And this is a problem with the health community now too is it's like-

JEN COHEN: Yeah ...

SHAWN STEVENSON: you can't stay up late. You know what I mean? For if there's an event "No, I gotta..." And I know this 'cause I've been that guy. Oh. But it's okay. If there's this thing, you got family in town, it's okay.

JEN COHEN: Oh, I s- I think w- I think everything... we've taken things to such an extreme that nobody has fun anymore. Nobody has... No one's living life anymore. It's all about your we- what you're tracking your wearables, tracking your blood glucose, tracking your sleep, tracking this, doing that. Everything...

We're all walking around as robots, and then we die, right? You know what I mean? Yeah. It's just kinda crazy what's happening. W- I was gonna actually even ask you do you think these wearables are just making us more obsessive, or are they actually helping us at this point,

SHAWN STEVENSON: that's such a great question. Thank you for asking this because, again, w- when it comes down to any of these things, it is so individual. It is so situationally dependent. When it comes to the wearables, this conversation- For certain people, it's a game changer. They gamified it. It's helped them to stick to their goals.

They feel good about it. They don't feel a sense of stress around it. For others, they become more neurotic. It's become a source of stress. They're always trying to optimize, and they're losing track of themselves. They're losing track of what we've survived with- Mm-hmm ... and evolved with, which is paying attention to one's self, the data in the body that you live in, paying attention to how you look, how you feel.

Just paying attention to how you actually feel and how you perform. Like, how are you actually moving through the world? Paying attention to these very basic data sets in lieu of I, I'm not gonna perform at my best because my, my, Fitbit or my Whoop is telling me that I only got a 66% sleep score and, like-

JEN COHEN: That's what's

That's basically what's happening, right?

SHAWN STEVENSON: Yeah.

JEN COHEN: The thing is as I'm wearing my Oura Ring, which I only started wearing recently, I found it in my ... I wore it for a bit, then I put it away like I did with my Whoop and everything else, and I'm like, "Oh, it's here. I'm gonna start wearing it again."

And I'm like, "I thought I slept well," and then it says to me- "Nope, you didn't sleep well at all." Yeah. "You had 66 and blah, blah, blah." The, the thing is I think it just gives people ... I think it gives me personally a little bit more anxiety 'cause now I'm like, "Oh my God, maybe I didn't sleep well. Maybe I

It gives you all this more neuroses that was, like, completely unnecessary. What I remember, before fitness and wellness became a massive, business so to speak, I was like, I was, like, working out be- 25 years ago doing the sa- ... I do the same boring every single day, and I'm not following the trends, and I'm just fine.

And I don't think that ... And maybe you can tell me with all your data points. Are we healthier now when we're now- ... following every data point and doing every single thing? Red light this and that, hyperbaric chamber and that. Are we healthier? This is such a great question. Are we just more neurotic and stressed out?

SHAWN STEVENSON: This is such a great question. You didn't know, you didn't even know that ... I didn't even know you was gonna ask about this, but right now I'm working with somebody who's published a lot of studies-

JEN COHEN: Yes ...

SHAWN STEVENSON: and very prominent researcher research scientist, and working on putting together a pilot study- Yeah

on this subject because the data doesn't exist yet.

JEN COHEN: Yeah.

SHAWN STEVENSON: And so this is something that I've been actually actively ... Because I see it m- Again, a great example, my wife, she loves tracking her data. She loves it. And she, but she's also very- She has a very lighthearted personality- Okay ... to where it's not, she's not going- Her whole life.

Yeah. So it's okay either way- She's not Bryan Johnson ... but she likes to know it inspires her.

JEN COHEN: Yeah.

SHAWN STEVENSON: And just so people are aware, I'm the guy- they've s- the Whoop, the Oura- Yeah ... all, they send me this stuff in beta. They've a-

JEN COHEN: 100% ...

SHAWN STEVENSON: reaching out for me to be an early investor. I know all these guys, but I couldn't-

JEN COHEN: 100%

SHAWN STEVENSON: wholeheartedly get involved because again, I know that there is this other side of the equation. All that to say, I don't want to rain on anybody's parade at all. If it is working for you and you feel good about it, that's what matters most And on the other side, you gotta be honest, like if it's not good for your mental health.

Because again, there's nothing worse for your sleep than creating anxiety about your sleep.

JEN COHEN: 100%. The other thing I notice, and I just... this is just my obser- like, pattern recognition or observation, is that the OGs, like people like me or you who've been doing this stuff, for our whole life basically, like 'cause we- like it's embodied in us or D- in our DNA, we're not so much about all of that.

Like every major athlete, by the way, I've spoken to, like the top and the best in the world, like I ask them questions, they're like, "I don't know. I don't track it," or, "I don't know. I'm not doing that," or "I don't know. I'm just e- I eat okay." They're not like as meticulous and crazy. What I think has happened is it's because it's new and trending and it's become such a multi-billion

dollar industry, and people who are newer to the game, they're using these these little trinkets so to speak- Yeah

to kinda keep them in the game or to keep them, or to get them in the game. And it kind of maintains the game for them for accountability. But when I think it's people who have it's so embodied in them, it's not as, as useful or important. Yeah. There are people I'm watching, they have their glucose monitor, they're taking their blood with the other thing that they have.

They have the o- Oura, they have the w- the, what do you call it, the Whoops. They have They're, they look like Mr. T. They're walking around- ... looking like Mr. T. And I guess for them it makes sense, right? But you know, I don't think, I don't think it necessarily makes you any healthier or I think it's just more of it, it brings out more psychological, like psychological- Yeah

neuroses personally.

SHAWN STEVENSON: Newsflash, Mr. T did not stand for tech.

JEN COHEN: Yeah. Exactly. But

SHAWN STEVENSON: you- Yeah. But again, the, some of my friends and colleagues, like really they're, they... we're ki- we're a balance.

JEN COHEN: Yeah.

SHAWN STEVENSON: Like I've been brought into like the, the big biohacking conference to, do a keynote- Yeah

just because it, I'm bringing

JEN COHEN: more grounded-

SHAWN STEVENSON: More groundedness ... energy and science. Like I don't give a sh- if you are doing the, red lighting your nut sack- Yeah. ... if you're not even going for a 10-minute walk each day.

JEN COHEN: That's just like-

SHAWN STEVENSON: Right? Like- '

JEN COHEN: Cause you're ma- you're majoring in the minors at that

SHAWN STEVENSON: point.

Exactly. You're majoring in the minors. We're looking for these hacks. What are the things your genes expect you to do?

JEN COHEN: Exactly.

SHAWN STEVENSON: And once you do some of those things, it is, we need to guide ourselves back to ourselves. What

JEN COHEN: w- We're so externally focused today. Everything is. Yeah. What would you say is the number one most important wellness habit?

Though, to kind of keep you o- on point and kind of, for longevity. What would you say the number one- Oh,

SHAWN STEVENSON: the data is clear and experientially it is beyond clear, if we wanna be honest about this. Yep,

JEN COHEN: go ahead.

SHAWN STEVENSON: The number one most influential factor on your longevity, on your health, is your relationships.

And this, it's not even close. And of c- I'm a science guy. I love nutrition. I love exercise. I wrote the book on sleep wellness. All those things are massive, but nobody affects my sleep habits more than my wife and my kids. No one affects my exercise habits more than my wife and my kids. No one affects what I eat more than my wife and my kids.

And one of my most valuable conversations, and it was really affirmation because in a recent project that I did, and it actually my, in my latest book, in the Eat Smarter Family Cookbook, I shared one of the largest studies ever conducted on longevity, and this was done by researchers at Brigham Young University and University of North Carolina.

And this was a meta-analysis of 148 studies Over 300,000 people looking at what are the things that determine how long they were going to live. They looked at s- smoking, they looked at exercise habits. They looked at, beating obesity. The number one thing that determined how long people were going to live was the quality of their relationships.

People who had strong social bonds had a 50% increase in longevity versus people who did not. Okay? Said another way, people who have healthy relationships have a 50% reduction in early death from all causes. All causes. All right? Leading that into my conversation and being able to, again, support, uplift the work of, and to really dissect the data with Dr.

Robert Waldinger. He is the director of the longest running longitudinal study on human longevity ever conducted out of Harvard, or out of Harvard. And it's it's been going on for over 80 years. He's the fourth director, and the reason that we resonate with each other so much is that I tend to be, I'm not gonna say side eye, but I tend to be-

skeptical about stuff.

JEN COHEN: Yeah.

SHAWN STEVENSON: And but that also made me a good researcher, right? Yeah. So he came into it with skepticism when he was offered the position. He didn't believe just your relationships impact how long you're gonna live more than anything else. So he actually took it upon himself to really go through and fact check the data, decades worth of data.

He went to other universities. He went to other research labs "Can you confirm this?" And he was shocked. It's just yeah, it is very clear. The number one thing that determines how long you're going to live is the quality of your relationships. And so with this being said, now we get into the conversations and I can ask the guy who has the most data why.

Why? It doesn't make sense From the data, what he shared was the number one in- kind of factor that they're able to kind of pinpoint is the impact that our relationships have on stress.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: And you're just like again, now we have this emerging conversation around stress. Now we have all this data affirming how stress is really fucking us up, and a recent analysis was published in the Journal of the American Medical Association, and they affirmed that upwards of 80% of all physician visits today in the United States have a major stress-related component.

Up to 80%. But our physicians are not talking about stress. Our messages that we're getting are not talking about stress. What the hell even is it?

JEN COHEN: Yeah.

SHAWN STEVENSON: And so we can maybe drive into that conversation in a moment, but for this particular researcher, Dr. Robert Waldinger, he shared with me that, yes, stress is making us wildly unhealthy.

Healthy social bonds are a very powerful way, the most powerful way, to help us to metabolize stress, to process stress.

And I asked why. What is it? He's just Because I would think oh, it's talking things out, right? It's cathartic. Yeah. But it's not even that. He shared that it's this overarching feeling or this sense of knowing that somebody cares about you, that somebody has your back.

JEN COHEN: Oh.

SHAWN STEVENSON: That somebody's there for you at the end of the day, even if you had the most stressful day. Just that sense of knowing in this very uncertain universe, it's arguably the greatest gift And so keeping that in mind, I asked w- what creates a what are the ingredients of a, quote, "healthy relationship" or these strong social bonds?

I was like, "So does this mean you..." We'll just use romantic relationships. "Does this mean you guys don't fight a lot?" He was like... And I'm just kind of, imitating him. He's like, "No. The people who we studied," and we have them on film. We go and track these people down every year and take their blood work, and we have interviews on camera.

People with the healthiest long-term relationships fought like cats and dogs. And, again, I'm just like, "Really?" And he was like, "But they have a bedrock of affection. They might nitpick with each other and mess with each other, but they touch a lot. They look at each other. They see each other.

They honor each other. And even though they might have conflicts, they know that they are their person."

JEN COHEN: Yeah.

SHAWN STEVENSON: They're there for them. They have their back. They might have their annoyances, and their grievances, and their bickering, but those are not the things that create a healthy relationship.

And so I've been investigating for the last few years, like, what are those ingredients that do create a healthy relationship, and that's really where my, my, where my mission is at, where my work is at. Because, by the way, I haven't shared this before, so I haven't shared this before in a interview.

JEN COHEN: Yeah.

SHAWN STEVENSON: When I talked about are relationships impacting, 'cause I just worked out with my wife today, right? And it is one of the most powerful leverage points that we can use for... Because if we struggle to be consistent working out. This incredible study was published in the Journal of Sports Medicine and Physical Fitness, and it tracked the exercise habits of people who worked out with their spouse compared to people who worked out without their spouse- Mm-hmm

spouse over the course of a one-year study tracking these people. People who worked out without their spouse dropped out of their exer- exercise plan 43% of the time. People who worked out with their spouse only dropped out 6% of the time. Working out with their significant other led to them staying consistent with their exercise.

It was six times more effective. All right? Wow. So again, it's this huge leverage point, and some people are just like I don't have a significant other. They're not into it," whatever. It's not just the significant other, though. And so this is what I haven't shared. As well. So this was published in Health Behavior Research, looking at group exercise training to boost exercise compliance and consistency.

They found that people who were signed up and engaged in group exercise were up to 97% more compliant and consistent in exercise over the course of an 11-week study. And that's otherworldly. 97%-

JEN COHEN: Wow ...

SHAWN STEVENSON: showing up and compliant. And many people have experienced this. The CrossFit movement, for example, or, just their group exercise, that they just have to go.

Whether it's the people there, the teacher, the energy in the room- Yeah ... just not being alone and doing stuff together with a group, that's how we evolve.

JEN COHEN: Yes.

SHAWN STEVENSON: And so it's an epigenetic influence to utilize. So again, it's these relationships. And I could do this for sleep, I could do this for exercise.

Again, I could do this for our nutrition, of course. That's really where my, where the Eat Smarter Family Cookbook was really devoted to was- Yeah ... the impact that our relationships have on our nutrition, and it's crazy.

JEN COHEN: 100%. That's why also lifestyle's so important, though. I feel like that's why when you're looking for someone, a spouse or mo- someone, it's good to all these things that make the most, the, the b- the biggest dent is finding someone you're, who you're like-minded who wants to do these things with you, for all these reasons that we just talked about, right?

That will be your biggest lever point, I think, in, in staying healthy, happy, and also living the longest. What do you think about... And I, actually, let me ask you this question 'cause you've been doing this for so long. What would you say when is the most popular question or that people ask you about the most?

Would it be sleep? Would it be fat loss?

Would it be... What would it be the most popular area?

SHAWN STEVENSON: Yeah. It's fat loss.

JEN COHEN: Fat loss- For sure ...

SHAWN STEVENSON: yeah. Yeah.

JEN COHEN: Still. Was that always the way? I think that has- that's the- ... always stayed the same, right?

SHAWN STEVENSON: That's the concern for most people if they're being honest.

JEN COHEN: Honest, right? 'Cause people work out... You can say you're doing it for your health and longevity- Yeah ... which I think is true to some de- point, some degree. But the biggest ri- the biggest driving force is vanity, wouldn't you say?

SHAWN STEVENSON: Yeah. N- again, it's-

JEN COHEN: Not a bad

SHAWN STEVENSON: thing ... it's okay. It's the framing of it.

I

JEN COHEN: know. It's fi- and and all these ripple effects happen from it.

SHAWN STEVENSON: Nobody's waking up like, "I wanna look terrible today."

JEN COHEN: No, of

SHAWN STEVENSON: course. You know what I mean? And so that f- I find that to be an inroads.

JEN COHEN: 100%.

SHAWN STEVENSON: It's a gateway drug. Yes.

JEN COHEN: Yeah, it's a gateway

SHAWN STEVENSON: drug. And it's a superficial thing, but also our phys- our outer appearance- So much of our outer world is created by our inner world.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: Yep. And so but there are people who are superficially attractive or look fit who are wildly unhealthy.

JEN COHEN: Very much

SHAWN STEVENSON: and I definitely fell into that camp when I was z- like in college, for sure. I looked very fit, but I was not healthy. And and also again that's a great inroads, but the things that we're talking about are actually the way to get there.

Mm-hmm. Like sleep, for example. Again, this was one of the biggest leverages that I used to get the message across. Part of the reason a sleep wellness book hadn't done well previously was that it was lacking sexiness- Mm-hmm ... to be 1,000. I made it sexy specifically by connecting it to fat loss.

Yeah. And so- Smart. So scientists at the University of Chicago put people into it was a ward study, so they're actually in ward conditions, controlled conditions, where they're not leaving to go to McDonald's, or they're actually in this kinda clinical setting- Mm-hmm ... living there. And looking at the impact that their sleep habits had on fat loss.

And and this is a crossover study, so not only is this like a controlled trial, they're having test subjects go through both conditions. One condition being the sleep condition where they're getting adequate sleep. In this case, they got to sleep for eight and a half hours. And then there was the sleep deprivation condition- Right

where they sleep deprive them. Now they're only getting five and a half hours of sleep at night. After compiling all the d- And by the way, same exact diet. They're eating the same amount of calories, same macronutrients, all that stuff. The only difference is one phase of the study, they sleep deprive them In this study, after compiling all of the data, when people were well-rested, getting adequate sleep, they lost 55% more body fat.

JEN COHEN: Wow.

SHAWN STEVENSON: Okay? And I, again, I wanna stress this. Body fat, not weight. 55... Because the weight actually, they lost a pretty similar amount of weight-

JEN COHEN: yeah ...

SHAWN STEVENSON: in the different conditions because they were on a calorie restricted diet. You can lose weight, yes. Where's that weight coming from? And so when they were sleep-deprived, their body shifted.

There was like a metabolic shift to using more of their muscle mass, burning it off in this weight loss process.

JEN COHEN: Wow, so their body composition changed.

SHAWN STEVENSON: Yes. That's how powerful our sleep is because that sleep deprivation I... This can be a signal for many things. Yeah. One of the things it's signaling is a threat.

It is a threat. Yeah. It's a threat to our survival. My human is sleep depriving themselves because there must be danger around.

JEN COHEN: That's true.

SHAWN STEVENSON: And we want to keep this fat. We can live off this fat. This muscle mass is burning off too many calories. We need to slow our metabolism down Because there's obviously a thread around we're not sleeping enough and we can slow burn this body fat, and we're gonna work to keep that on, right?

JEN COHEN: That's crazy. Yeah. That's a big amount. That is not... That's no joke. I know also your appetite, for me, if I'm not sleeping, I will eat double the calories 'cause I'm just so much hungrier, or my inhibitions go down. Yeah. Both probably.

SHAWN STEVENSON: Yeah. So we have the kinda black and white weight loss numbers, but then we also have data on there's a major shift with leptin-

JEN COHEN: Mm-hmm

SHAWN STEVENSON: when we are sleep-deprived. Higher greater increase in ghrelin, which is our kind of our glorified hunger hormone. Yeah. We have many that drive us to eat. We have many that work to kind of quench that appetite, by the way. GLP-1 is something we naturally produce. Leptin and CCK adiponectin.

It isn't just this one... Because again, when I was in school, we did have leptin, ghrelin. Yeah. That was

JEN COHEN: the s- ...

SHAWN STEVENSON: the, just these two. But we know that sleep, our sleep quality impacts all that stuff.

JEN COHEN: You just said a word that I was gonna ask you about. Sleep quality versus sleep quantity.

SHAWN STEVENSON: Yes. Yeah.

JEN COHEN: What do you say?

SHAWN STEVENSON: That was a big part of the sleep wellness conversation that I was very passionate about ushering in and changing. Mm-hmm. Because even today, like I just had a conversation with somebody a couple days ago, and they're like, "So do you get, like you get eight hours of sleep though, right? Seven to eight, right?"

And I'm just like, "Listen. Pump your brakes." Yeah. It's okay." It's like, it's not about that. The quality of the sleep that you're getting. You can be in bed or even passed out for eight hours, but wake up feeling like .

JEN COHEN: Yeah.

SHAWN STEVENSON: And have low energy. Totally. It's the quality of those sleep minutes, and I liken it to calories.

JEN COHEN: Yeah.

SHAWN STEVENSON: The calories, all calories are not the same. That's a great point. The quality of those calories do make a difference.

JEN COHEN: That's such a good point. Yeah. That's a great analogy. Yeah. Because... I got a couple questions on that. First of all, just to finish the sleep part, because I just wanna finish it, is there an amount that people should...

amount of REM sleep people get, deep sleep? Is there like... I- if you're sleeping a six-hour window, should they be getting an hour? What's normal? What's a normal amount of REM sleep to have?

SHAWN STEVENSON: After doing this work this long-

JEN COHEN: Yeah There is no such thing?

SHAWN STEVENSON: Yeah. There's... It depends. It depends on you.

It depends on your needs.

JEN COHEN: Okay. Fair.

SHAWN STEVENSON: If you are training for a final exam-

JEN COHEN: Yeah ...

SHAWN STEVENSON: versus training for a marathon versus just stress with kids- Yeah ... versus the amount of time that you're gonna... Your body knows what to do, and it's gonna be different. It can be different from night to night. Of course, there are gonna be patterns.

But there isn't any black or white, you should be getting 20% this, 40% that. It's just- And it- ... it's not like that.

JEN COHEN: So you think... Okay, so then if that's the case, if it's more like quality of sleep, you were saying something about... It was, we're-

SHAWN STEVENSON: The main thing is efficiency.

JEN COHEN: What I was gonna say is we're...

You gave the analogy of calories in, calories out. Yes.

SHAWN STEVENSON: Yeah.

JEN COHEN: So there's... That's still a huge argument though, right? There's ha- literally half the people say calories in versus calories out, and there's another group that says, "No, it's the quality of the calories." You're obviously saying it's about cal- it's not about the calories in, calories out.

If I were to have 500 calories of a Mars bar, I'm just making... And french fries- Mm-hmm ... it's not the same as having a chicken breast, and people still talk about this.

SHAWN STEVENSON: Yes. Here's the thing. It's usually coming from people who are... who found success with managing their calories.

It's usually coming from people who are inexperienced. It's usually coming from people who haven't helped a lot of other people- ... with their system, okay? And also it is a valuable

metric. Okay. Let me be clear. Managing calories, you absolutely d- even in the sleep study, people lost a similar amount of weight by cutting calories.

But what did it do to your metabolism?

JEN COHEN: No, cutting sl- you mean cutting sleep.

SHAWN STEVENSON: By cutting sleep. Yeah. Cutting, yeah. Yes, by cutting sleep. What is it doing to your metabolism? What is it doing to the way that your hormones and your neurotransmitters and your organ function, your mitochondria? It's changing you as an indivi- it's actually changing how your body operates.

JEN COHEN: Yeah.

SHAWN STEVENSON: And so it is a valuable metric, and somebody like myself, I'm always asking why and also where did it come from.

JEN COHEN: Yeah.

SHAWN STEVENSON: So the whole concept of the calorie was actually something that was first manifested in the field of physics. Mm-hmm. It had nothing to do with nutritional science.

And what happened over time was it kinda parlayed its way in. And to find out how much energy was in a food, they used a bomb calorimeter. Basically, we'll just say we take a banana, and we incinerate it. We incin- no, actually, let's do this. Let's take let's take a, some almonds. Maybe use three ounces of almonds completely incinerated and see how much energy, how much...

It's heating up the water, basically. All right? So they used it, the bomb calorimeter, to see how much energy can heat up water. And so that tells you how much energy is in there. Okay, so this was 300 calories worth of energy. Number one, your body is not a bomb calorimeter. You're not actually absorbing all of that calorie, caloric energy that was dispersed.

You are also... There's some indigestible aspects of- Oh ... those almonds. And so there's a study that I cited in my book Eat Smarter years ago that was I'm just paraphrasing, problem with the Atwater system. All right? And the Atwater system is the calorie system that's on all your food today, which they're not using a bomb calorimeter anymore, they're just using math.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: Okay? And, just designating a certain amount of calories for the grams of protein, a certain amount of calories for the grams of fat, a certain amount of calories for the grams of carbohydrates. But with this, they found that when people consumed, we'll say again 300 calories of almonds, their net gain or net res- what they're receiving from those almonds was maybe 158 calories.

There was a substantial amount of those calories-

JEN COHEN: Oh ...

SHAWN STEVENSON: that the body did not metabolize or utilize, and that's not what is edu- that we don't receive that education. All right? So already the calorie conversation is a little sketchy, right? They're trying to measure and manage what's on our wrappers versus our goals.

Mm-hmm. That's just one. This is minor stuff, though. This is minor. Let's get to the more major stuff here So what I've designated, like I said, I could do 10 of these, are epicaloric controllers. They're determining how your body interacts with the calories that you consume. A huge epicaloric controller that we have now designated today and have a lot of data on is our microbiome makeup.

Our gut makeup, our microbiome, this kinda cascade of all these different microbes has a huge impact on what your body's doing with the calories you consume. We can literally have a difference of sometimes hundreds of calories, two people eating the same thing.

And we see this in twin studies. This is why we know so much data on the microbiome as far as obesity, where they can live in the same conditions, eat affectionately the same diet.

And then but one of the twins is obese versus the other or overweight versus the other. And it's attributed to these categories of bacteria. Firmicutes being one of this kind of broad class. Mm-hmm. How... What's the ratio? So that's another thing. Another factor that we're now dealing with today is this term, this blanket statement given to this, these molecules called obesogens.

Obesogens create obesity in the

body. Obesogen Independent of calorie intake, it changes the way your body manages the energy that you're taking in. All right? So these obesogens, and we are exposed to billions of them on a regular basis. Again, our air, water, food supply.

It's altering the way that people's bodies are interacting with calories.

So it's a epicaloric controller. The quality of food, and this is where we're gonna get to more hardcore science piece. So in Eat Smart I share this study that went bonkers, and this was published in the journal Food and Nutrition Research. Okay. And this was the quality of food itself. So they had people to consume a meal of ultra-processed foods versus a meal of whole foods- to see the impact that it had on their calorie expenditure. So the f- the two meals, same amount of calories again.

JEN COHEN: Okay.

SHAWN STEVENSON: Same calories. Similar macronutrients. One is ultra-processed cheese product, so like Kraft Singles and white bread. The other is a whole, quote, "whole food sandwich, multi-grain bread, cheddar cheese."

Okay? And the que- also by a little sidebar, how do they, how are they tracking how many calories they're burning?

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: Because what they researchers did was they were monitoring how many calories they burn post-ingestion of the sandwich.

Okay? We breathe out most of the calories. When we're losing calories, we breathe them out.

JEN COHEN: Really?

SHAWN STEVENSON: That's how our body gets rid of... 'Cause we t- we think sweating, you know- Yeah ... getting... But most of it is through our breath, through breathing. Yeah. So but anyways, w- let's p- put a pin in that. Wow. So here's what happened after analyzing the data When people ate the ultra-processed version of the sandwich, there was a dramatic decrease in the amount of calories that their body was burning after eating that sandwich.

JEN COHEN: Really?

SHAWN STEVENSON: So we're talking like 40 upwards of even 60% suppression of calorie burn after eating that sandwich. Okay? And so what the researchers can kind of designate was something we'll affectionately call a metabolic or a hormonal clog. Like something happened to gum up the system and to suppress the efficiency- Wow

of getting rid of those calories they consumed. Now here's the rub This is a temporary thing. Over the course of the day, your body will probably sort it out how many calories you burn. But if you do that every day, meal after meal, what's gonna happen? Your metabolism is gonna be totally different. And I know this, this is what-

JEN COHEN: That's right.

That's right ...

SHAWN STEVENSON: this is how I ate, my university drive-through diet. And my metabolism was very different. And it's not about having a, an efficient metabolism per se, like burning stuff off quickly because we w- survival as well. But it's having... It's not creating like artificial blockages to where your body's like, "What the is this fake cheese stuff?"

"Let me just tuck this over here. My- maybe my liver can kinda deal with it," but like we got this adipose tissue. We got space on the, on the neck. We can go add some there, on the, on your ass or whatever the case might be. Like- So but the- ... some of these compounds are sketchy.

Let's just, we'll figure this out later. If you're looking for a way to save on groceries today like so many families are, cost of living is already going bonkers. We could find a way to save money on our groceries, but the key is the quality of the foods as well. And Wild Pastures delivers 100% grass-fed, grass-finished beef, pasture-raised pork, pasture-raised chicken, and wild-caught seafood direct to your door at savings of 25 to up to 40% of what you would find in conventional grocery stores.

Now, Wild Pastures doesn't just stop there. They're sourcing their foods from 100% regenerative family farms. There's no antibiotics, no added hormones, no added steroids, no feedlots, and absolutely no GMOs. Again, fast delivery from their farms direct to your door. And right now, when you go to wildpastures.com/model, with a Wild Pastures subscription you're going to receive an additional 20% off for life, free shipping, and $15 off your first order.

Again, just go to wildpastures.com/model to take advantage. That's W-I-L-D-P-A-S-T-U-R-E-S.com/model

to take advantage right now. Head over there, check 'em out. Now back to the show.

JEN COHEN: So this sounds... That's interesting. So it sounds to me it really depends on your genetics based on how your body metabolizes some of this stuff.

SHAWN STEVENSON: So there's nutrigenomics and nutrigenetics, yes. That it's n- but it's, that's only a part of the...

The it matters.

JEN COHEN: Okay

SHAWN STEVENSON: But it's only a part of... And I don't wanna designate a certain amount, but it is a smaller percentage than a lot of these other epigenetic controllers. So epigenetic means above genetic control.

JEN COHEN: Okay.

Above ge-

SHAWN STEVENSON: Yeah

JEN COHEN: Yes.

SHAWN STEVENSON: So epicaloric is above calorie control.

It's controlling what the calories are doing, okay? This is where we have to focus. Because again, calories matter. We can use this as a metric to get an estimate.

But these things matter more because they're determining what your body is actually doing with the calories you're consuming.

JEN COHEN: Do you think we're also over protein?

Are we just eating way too much protein now because it's become a trend?

I feel like pro- e- everyone, if everyone's talking about protein- Yeah ... protein, it's impossible to consume the amount of protein that people are. Yeah. Like, when I say people, I don't know. It's like a very, like, general term.

Yeah, it's difficult.

SHAWN STEVENSON: But, like- Yeah, for sure ...

JEN COHEN: but to keep lean muscle-

SHAWN STEVENSON: Especially if you're eating real food ...

JEN COHEN: if you're eating real food. That's what I mean. Yeah. And if you're not, if you're someone who's busy-

SHAWN STEVENSON: Yeah ...

JEN COHEN: right? Are you someone who believes that... Like, how else could we keep lean muscle mass on?

SHAWN STEVENSON: Yeah.

JEN COHEN: I think I told you la- like, when I saw you last time, I take aminos. I take I drink these aminos with leucine. Do you like aminos? Have you taken aminos or no?

SHAWN STEVENSON: There's room for these things, sure.

JEN COHEN: But what would you suggest? What what do, how do we- Yeah ... I mean-

SHAWN STEVENSON: Food first.

JEN COHEN: Food first always.

SHAWN STEVENSON: Yeah.

JEN COHEN: But what I'm saying is to keep muscle on, which is of course the longevity organ. Yeah. We all talk about that. We can- For sure. Yeah ... we can. But what are some ways, besides the things we everywh- like lifting heavy weights, all the things-

SHAWN STEVENSON: Yeah ...

JEN COHEN: like, how do we maintain lean muscle mass as we get older?

SHAWN STEVENSON: Yeah. And just with the protein conversation- I'm grateful that we're having the conversation. So in, I wrote Eat Smarter. I wrote the book. It came out at the last week of 2020, but I wrote most of it in 2019.

JEN COHEN: Okay.

SHAWN STEVENSON: And there was a special section dedicated-

JEN COHEN: Really? ...

SHAWN STEVENSON: to protein.

JEN COHEN: Okay,

SHAWN STEVENSON: tell me

JEN COHEN: why. Because

SHAWN STEVENSON: when I was in college, it was low fat.

JEN COHEN: Of course.

SHAWN STEVENSON: The conversation was so focused on fat, and fat was villainized.

JEN COHEN: Do you remember like SnackWells?

SHAWN STEVENSON: Of course. Yeah. Like I did all that . Yeah. The Smart Ones, Lean Cuisines. Lean

JEN COHEN: Cuisines.

Yes.

SHAWN STEVENSON: Then it shifted to carbs. Now carbs are the villain. Low carb, again, low f- it has a place.

Low carb has a place, but it becomes this like thing where I talked about it earlier with the, the book situation. Yeah. And like these publishers looking for, they want proof of concept. Like

JEN COHEN: proof of concept. That's-

SHAWN STEVENSON: So they love that . When I went in for Eat Smarter for that book deal- Yeah

and, was getting all these different offers, one of the... I remember very clearly, like they're like, "So what kind of book are- is this? Is this gonna be like a keto book?" Because again, it, like these things are trending, right?

JEN COHEN: 100%.

SHAWN STEVENSON: And but what was missing- Like G-

JEN COHEN: yeah. Go ahead.

SHAWN STEVENSON: Oh, go ahead. No, you go ahead.

No, I was gonna

JEN COHEN: say like now everyone's writing a GLP-1 book. There's like 11 books out right

SHAWN STEVENSON: now. Yeah. It's trending. Yeah. And it's, these is, these are the things that sell.

JEN COHEN: But sorry, what were you gonna say? But

SHAWN STEVENSON: with that being said, it was protein was just kind of left out of the conversation.

JEN COHEN: Yeah.

SHAWN STEVENSON: And so what I wanted to do is elevate that so that we have intelligent focus on all of them.

JEN COHEN: Yeah.

SHAWN STEVENSON: But also to not hyper-focus on all of them because we don't eat protein, carbs, and fat. We eat food. We eat food. It's us like obsessing and trying to break down and- Good point ... and isolate and separate That being said, protein matters a lot and h- this is the reason why.

JEN COHEN: Okay.

SHAWN STEVENSON: It's not what, it's j- just about the muscle piece. That, of course that matters a lot.

JEN COHEN: But- It's satiating ...

SHAWN STEVENSON: when we're looking at each other, we're mostly seeing the proteins that we've eaten.

JEN COHEN: Oh,

SHAWN STEVENSON: okay.

JEN COHEN: Okay? That's what you mean. Okay.

SHAWN STEVENSON: I- So tissue, so when our genes are sending, like the DNA to RNA to protein-

JEN COHEN: Yes

SHAWN STEVENSON: okay? When we're printing out copies of stuff, building blocks-

JEN COHEN: Yep ...

SHAWN STEVENSON: those are proteins. It matters a lot. Also, minerals. I'm seeing your minerals, all that kinda stuff. But protein, building blocks, seriously. Number two, your hormones. They're proteins. Yes. Okay? We need protein to make that.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: To make them.

Enzymes. Enzymes are required for basically everything to happen in our body to do with, they're proteins. They're amino acids. Amino acid base.

JEN COHEN: That's why it dr- that's why I have these aminos and you keep on looking at me like I'm crazy, but you don't like them I can tell.

SHAWN STEVENSON: It's, again, it's just, it's a s- it's a small percentage versus the big movers- Of course

of like real, so

JEN COHEN: it's not- Real food ... yeah, it's

SHAWN STEVENSON: not- It's always about real food. But h- I'm a fan. Certain the protein supplements, amino acids could be in the mix, but a lot of people

JEN COHEN: are- But how many shakes can you have in a day? How many shakes- yeah, for sure ... can you have in a day?

SHAWN STEVENSON: For sure.

JEN COHEN: When you're old like me or whatever, there's like anxiety over how much protein you're eating.

SHAWN STEVENSON: Yeah. Yeah. You are, and our ability to, to actually utilize protein does go down as we get older, but it doesn't have to go down substantially. There's certain things that we could do to still metabolize.

That's where the data's really at, is for- The utilization of protein, especially in in the older populations. It is important to focus more on it. In the older- But here's the thing- Are we the

JEN COHEN: older population?

SHAWN STEVENSON: So not quite. Ah. Not quite. But what tends to happen, the protein, like we're eating too much protein, that was this

It's a narrative based on our consumption of all these ultra-processed foods. It is easier- Oh ... to eat more protein- Mm-hmm ... if I'm eating that sh-

JEN COHEN: Yeah ...

SHAWN STEVENSON: right? But it's also way easier to eat sugar. It's way easier to eat carbohydrates. Yeah. Maybe those things in the pro- maybe those things are problematic too, but again, we're isolating things.

JEN COHEN: Yes.

SHAWN STEVENSON: What you found, what most people find is that when you're eating real food, it's difficult to eat a lot of protein. It's like you're just too satisfied. And so we can lean into that because what your body is signaling is that this is something that's satiating. You are getting a lot of value. You're gonna find that your mood is better.

You're gonna find that your, your hunger cues, hunger cravings, hunger and cravings, which are s- kind of slightly different those things are n- now more regulated. Yeah. You're making better food choices. You're sleeping better. All these oth- positive things happen. This doesn't mean that we gotta try to force ourselves to eat more protein.

But some of us have tricked ourselves into not eating enough protein because of some other things. Maybe this is we get a big satiating effect when we have coffee in the morning with our fat in it- Mm-hmm ... our butter or our cream or our protein, whatever we're putting in coffee, and then we don't eat for four hours- Right

because of that, right? Yeah. Or maybe we're so dedicated to our intermittent fast and we're missing out on getting in the protein, and your body is always looking for- Being able to

JEN COHEN: Automate, you said. Right

SHAWN STEVENSON: And so you've trained yourself to not eat a lot. And maybe again... So why this matters also is that protein really is the most prominent as a signal for safety, for success.

Your body's Because it's used for so many things to regenerate you and to keep you healthy. Okay? So when you're getting in ample amounts of protein, this can be very effective with helping to metabolize stress. The whole convert cortisol phase and the cortisol belly, like it can really help your body to get safety signals-

JEN COHEN: Oh,

SHAWN STEVENSON: okay

that it's okay to let this weight go, right? And again, not to negate calories, but it's shifting your metab- your metabolic blueprint so that it's more efficient in getting rid of body fat.

And we know that protein helps our bodies to preferentially protect our muscle.

JEN COHEN: Do you think cardio maintain k- keeps body fat on our bodies, or is it helping with losing body fat?

The reason why I'm asking is there's... Again, I'm just asking these questions and I know that a lot there's all these contradictions, right? No cardio, only do that... Y- have you heard of that 12... I think I asked you last time, 12, the incline 12 and the speed at three for 30 minutes. Have you heard of this workout?

Yeah, it's like very popular and everyone's- Yeah ... doing it. They're saying that's like the greatest workout- ... since sliced bread. I think it's fine- Yeah ... but it's not gonna change your body composition, right?

SHAWN STEVENSON: It's always something.

JEN COHEN: It's always something, right? Yeah. Also HIIT training, also the whatever it is.

SHAWN STEVENSON: Yeah.

JEN COHEN: To change... n- we're not talking about movement for, your steps. Obviously, that's very important. Let's talk about body composition. How do we actually... What are the ways we can change our body composition? Besides lifting weights, is there anything else we can do?

SHAWN STEVENSON: Sleep

JEN COHEN: Well, sleep You know I forgot.

Obviously sleep

SHAWN STEVENSON: But-

JEN COHEN: Sleep, lifting weights. Those are two As far as

SHAWN STEVENSON: like the cardio being effective for fat

JEN COHEN: loss- yeah, like for anything ... and like

SHAWN STEVENSON: losing muscle

JEN COHEN: Like, what do you think cardio is a good strategy for fat loss?

SHAWN STEVENSON: This goes back to N of one.

JEN COHEN: Yes.

SHAWN STEVENSON: Okay? It depends-

JEN COHEN: On who you are

SHAWN STEVENSON: Yes.

Yes. It's context driven, right? For some people- And you always

JEN COHEN: say that

SHAWN STEVENSON: Because it's the truth. I

JEN COHEN: know Like- Nothing's... There's not like one thing that's one thing that suits everybody. Yes. Yeah.

SHAWN STEVENSON: There are certain things that they're much more universal, like walking.

JEN COHEN: Yeah. Walking.

SHAWN STEVENSON: Because we're bipedal, it's just something our genes expect us to do.

JEN COHEN: Exactly.

SHAWN STEVENSON: And also we know that our metabolism works differently when we're walking versus when we're running. It will preferentially go and grab s- stored fat for fuel a little bit easier versus going through this kinda glycolytic path.

JEN COHEN: No, talk about that. You're saying... Are you saying that when people walk versus run you'll burn more fat in the walking?

This is

SHAWN STEVENSON: validated 'cause I didn't believe it.

JEN COHEN: I still don't believe- 'cause it doesn't make sense ... even though I see it. It doesn't make sense to me either.

SHAWN STEVENSON: One of the things that I was taught was that your body will, number one, it's like a LIFO, FIFO, like in accounting class.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: Last in, first out, first in, first out.

So your body's gonna use the last in, first out. So last in is the food you just ate. It's gonna burn through that glycogen cache on hand first- Yeah ... for energy processes. Then it'll go and break down glycogen, store glycogen if need be. After it burns through the cache, muscle, liver glycogen. That's like writing a check, right?

Mm-hmm. It takes a little bit more time and then it will go to the fat certificates of deposit, right? Then, and only then, it will start to... Now remember this 'cause I, when I was doing my certification, there was like this chart of like getting to the fat burning zone.

JEN COHEN: Yeah.

Yeah.

SHAWN STEVENSON: And you gotta go through this process to try to get here, and so you can start burning fat. In reality, your body is so much smarter than all this bullshit.

JEN COHEN: Yeah.

SHAWN STEVENSON: It's gonna use energy based on the demands and based on efficiency. What we forget in our mission to, lose body fat and to get this body that we want to have, your body's number one driving force is survival.

It wants to survive and it wants to be capable. And so over time we've evolved because of that walking experience of humans of walking around, laboring and doing stuff, walking from location to location. Fat is a very efficient, slow-burning fuel, right? And it- you're not under threat if you're walking, okay?

Mm-hmm. This is very important. If you're running a long time, based on your biology-

JEN COHEN: Yes ...

SHAWN STEVENSON: this could be this motherfucker will not stop running, something must be chasing them.

JEN COHEN: Yeah.

SHAWN STEVENSON: Or they can't catch their food, we gotta keep going. Okay?

JEN COHEN: Yeah.

SHAWN STEVENSON: Not to say that's not valuable to do from time to time, or if that just, if it works for you But for most people, it's efficient when we're walking because it's more parasympathetic.

It's not... running is very sympathetic- Mm-hmm ... fight or flight. It is what it is. And we can go and cleave off. There's like a amplification cascade where we'll start, like, burning off a lot of s- fatty acid- not burning off, releasing stored fatty acids.

JEN COHEN: Yeah.

SHAWN STEVENSON: There's a difference between releasing and burning.

It has to get to the mitochondria to be used for fuel. That's a whole other story. Most efficient way to do that is walking, actually.

JEN COHEN: So zone 2, you're saying.

SHAWN STEVENSON: Eh, fuck the zones.

JEN COHEN: Yeah, okay. Thank God. Respectfully.

SHAWN STEVENSON: Okay.

JEN COHEN: No, please, I can't stand these zones. Zone 2, be- I- It's

SHAWN STEVENSON: the Twilight Zone.

JEN COHEN: Yeah.

SHAWN STEVENSON: Okay? But just, you know what it's like to just- Zones

go for a relaxing walk- ... or maybe a little bit more brisk walk. You kn- just be- It's okay. Just be cool. Just go walk.

JEN COHEN: I know.

SHAWN STEVENSON: Okay? Just walk. I- And try... And actually, this is a great opportunity to relax, to get into that parasympathetic. Okay. Yeah. We've turned it into now, again we've got the,

JEN COHEN: Oh,

SHAWN STEVENSON: it's so funny

The street warriors with the, with the weighted vest. Of

JEN COHEN: course. That's- Everybody's wearing the weighted vest,

SHAWN STEVENSON: Shawn ... I helped to popularize this. My guy, Michael Easter, like-

JEN COHEN: Yeah ... I- You're the second person that mentioned him today.

SHAWN STEVENSON: Yeah,

JEN COHEN: like- Why did you just mention him just now?

Because he... Does he talk about this

SHAWN STEVENSON: stuff? He's... he's arguably the top person as far as a voice-

...

SHAWN STEVENSON: Of research, 'cause he mentioned it in one of his previous books. Which one? He's a New York Times bestselling author. I think it was The Scarcity- The... Scarcity C-

JEN COHEN: wh- The Scarcity something. He

SHAWN STEVENSON: was just

JEN COHEN: here.

SHAWN STEVENSON: But yeah. But he's... But when he was on my show, it took off like wildfire.

JEN COHEN: Really?

SHAWN STEVENSON: It took off like wildfire. Was it the whole- Like, the social media- ... the weight the

JEN COHEN: weight- ... all that stuff ... the weighted vest part?

SHAWN STEVENSON: Yeah.

JEN COHEN: What did he say about the weighted vest? It

SHAWN STEVENSON: just, we do burn more calories. Of course- It is more

JEN COHEN: efficient

SHAWN STEVENSON: 'cause

JEN COHEN: you're adding more resistance, yeah.

SHAWN STEVENSON: But here's something really cool.

JEN COHEN: Yeah?

SHAWN STEVENSON: So I went to and worked with a leading researcher at UCLA who's a gastroenterologist- ... actually, and he's been studying gravitational metabolism and how gravity is affecting what our metabolic health is doing.

Not just our metabolic health but also our gut health.

Okay. And so what was so cool, and there, there's this really fascinating study that found that people, when you lose weight your gravitostat, you have... Just like the circadian clocks, just like you have a thermostat in your body trying to regulate your temperature, we have a gravitostat.

That is your body's kind of buoyancy or resistance to the forces of gravity. All right? And so when you lose weight- And it's already, your gravitostat has been attuned to a certain amount of mass that you're carrying on this planet.

JEN COHEN: Mm-hmm.

SHAWN STEVENSON: What happens is your body is... This is part of the reason why it is difficult to change that set point and to lose weight and to keep it off.

Mm-hmm. Because your body is looking for, it's not just a superficial thing, but it's looking for stability and safety in this world, in this, the physics of this reality. And so what the researchers found was that people who wore a weighted vest, pound for pound matching the amount of calories that they lost, kept the weight off much longer.

JEN COHEN: Really?

SHAWN STEVENSON: Yes. They kept the... And some of them, d- the s- study w- for, towards the end of the study over a year later, maybe the people who didn't do the weighted vest protocol-

...

SHAWN STEVENSON: They might have g- most often they regained all the weight that they lost.

JEN COHEN: Really?

SHAWN STEVENSON: And a little bit more, just tr- again, traditional stuff, traditional means.

But maybe these people ga- regained 20% of the weight that they lost over the course of a year study, for example. So it's just like it was basically telling their gravitostat, telling their metabolism, telling their, their brain, their biology that, "I still have this, this weight on me, this force on me, and it's okay," basically.

"I don't have to gain all these extra pounds because I'm still carrying this weight around in a sense." And I know that I'm making this very rudimentary.

JEN COHEN: No, but

SHAWN STEVENSON: it, it- And actually, let me-

JEN COHEN: It

SHAWN STEVENSON: actually makes sense to me ... let me look up the study right now.

JEN COHEN: You know what's so interesting about that is- you're not wearing the weighted vest for more than an hour a day, right?

So how does that

SHAWN STEVENSON: work? They're wearing it all day. They're wearing it basically their waking hours.

JEN COHEN: Oh, really?

SHAWN STEVENSON: Yes. Yeah.

JEN COHEN: So-

SHAWN STEVENSON: Yeah, so I failed to mention that part, yeah.

JEN COHEN: So you're not just- Okay, so that makes sense. So that's why their gravit- that's why their overall gravitudial, whatever the word is-

SHAWN STEVENSON: Gravitostat,

JEN COHEN: yeah.

Gravitostat. Yeah. The is the, they think... it's tricking the baseline to think it's much heavier than they, it is. My question is, I wear this weighted vest around all day but it's only six pounds. Does that count? It's not really that heavy. Of

SHAWN STEVENSON: course. Of course that counts.

JEN COHEN: Yeah, but it's really small.

SHAWN STEVENSON: So what?

JEN COHEN: It's still, it's better than zero, I feel. It's very comfortable. I like

SHAWN STEVENSON: it. It's just, again, I... We even got into this, But by the way, let me go ahead and share this study really quickly. Okay, go

JEN COHEN: ahead. So- I

SHAWN STEVENSON: like these studies.

JEN COHEN: I love these

SHAWN STEVENSON: studies ... there's multiple studies, but just here's one.

This one was published in the International Journal of Obesity.

JEN COHEN: Okay. "

SHAWN STEVENSON: Analyze how gravitational loading during conventional calorie-restricted weight loss influences subsequent weight regain." 18 test subjects. Wow. Six

months. This is a crossover study as well. So six months calorie-restricted diet, standard, and six months placed in another arm of the study with the weighted vest worn throughout.

And so they were wear, instructing to wear the weighted vest for about 10 hours a day, just living life, doing their typical routine. And again, it was increased by a pound. So they might have started off with a one-pound vest, but maybe they had eventually lost five pounds, so they're wearing a five-pound vest Okay.

So I'm just consolidating all the data here. I like that. The weighted vest group's resting metabolic rate, this was the key.

JEN COHEN: Okay. Go.

SHAWN STEVENSON: The weighted vest group resting metabolic rate only went down by about 16 calories a day, because the m- the metabolic rate will compensate as well, right? Oh. So that's another reason we regain the weight, is that you lose this weight, but your metabolism's gonna slow down c- because for survival.

People, when they didn't use the weighted vest, their metabolic rate went down by nearly 250 calories a day, that they were burning less, okay? Without the weighted vest.

JEN COHEN: Without the weighted vest. Yeah.

SHAWN STEVENSON: Wearing the weighted vest, their metabolic rate only went down by 16 calories a day on average.

JEN COHEN: That's it?

SHAWN STEVENSON: That's it. And so this is why-

JEN COHEN: 16 calories? ...

SHAWN STEVENSON: this is why they were able to have a greater effect and more-

JEN COHEN: Geez ...

SHAWN STEVENSON: stability and consistency with keeping the weight off long term. So yeah, fascinating stuff.

JEN COHEN: That's super fascinating. Yeah.

SHAWN STEVENSON: Dr. Brennan Spiegel is the guy who, I connected with at UCLA.

Super smart guy. Yep.

JEN COHEN: I love that. So 'cause I always think that everyone has a baseline. These are all just my like Jen-isms. No matter what I s- re- read or whatever, but I always thought you know what? There's only so much you can like if m- I feel like my body's very comfortable at a certain weight.

SHAWN STEVENSON: Yeah.

JEN COHEN: And I can only tweak it that much here or there. Yeah. But I'll always come back to baseline if I don't do the things I do. Yeah. Do you know what I mean?

SHAWN STEVENSON: Of course. Of course.

JEN COHEN: And so I just, is, so there is accuracy-

SHAWN STEVENSON: Yeah ...

JEN COHEN: around that. What do you believe in supplementation? Do you, would you think that there are any essentials that you should be taking every day?

Or what is your, what do you take every day?

SHAWN STEVENSON: If you're deficient, yes.

JEN COHEN: I knew you

SHAWN STEVENSON: were

JEN COHEN: gonna say that.

SHAWN STEVENSON: Yeah. But if you're good and you're eating a well-rounded diet where you don't need to, there are certain I'm very big where I'm at today, I used to, a lot of stuff. Different times.

I've done all the things.

JEN COHEN: Of c- I know.

SHAWN STEVENSON: You can't even imagine what my cabinets have looked like.

JEN COHEN: I'm sure. What do they look like today?

SHAWN STEVENSON: Today, what I will occasionally take is an omega-3 supplement.

JEN COHEN: Okay. Occasionally only?

SHAWN STEVENSON: Yeah. Okay. Because I'm eating a lot of foods that are rich in omega-3s.

JEN COHEN: Okay.

SHAWN STEVENSON: And also the quality, the sourcing of those omega-3s matter a lot.

JEN COHEN: Matters a lot, yeah.

SHAWN STEVENSON: You ideally wanna have something that has astaxanthin in it.

JEN COHEN: Yeah. To protect it. I take that as a supplement even.

SHAWN STEVENSON: Yeah.

JEN COHEN: Is that bad?

SHAWN STEVENSON: No. No. Yeah. Not at all. It's protective of those omega-3s.

JEN COHEN: Okay.

SHAWN STEVENSON: I, magnesium occasionally.

Occasionally. Vitamin C

JEN COHEN: You do take vitamin C ...

SHAWN STEVENSON: food-based, though. Food-based. So like a concentrate of a vitamin C dense food, like camu berry, amla berry, those kind of things.

JEN COHEN: Okay.

SHAWN STEVENSON: Because synthetic vitamin C, that's what most vitamin C supplements are. That's derived from genetically modified corn syrup, corn starch, and we got multiple studies showing that higher incidence of kidney stones less change.

And one of these studies was actually done in the Journal of Car- Cardiology, looked at camu berry, C-A-M-U C-A-M-U, vitamin C versus synthetic vitamin C supplement or capsule or the little Emergen-C type packets of shit that you'll see anywhere, and had smokers who had... That is a strong oxidant- oxidative behavior, to take bo- either, either of these.

And so what they found was that there was no beneficial effect on oxidation or a- antioxidant effect taking the synthetic version. The test subjects taking the camu berry had a notable decrease in C-reactive protein, which is an inflammatory marker, right? So we know the vitamin C helps, but the source matters.

JEN COHEN: The source

SHAWN STEVENSON: matters. So I'll occasionally take vitamin C, omega-3s, and Yeah, those are the two main things that I'll occasionally take. But then there's some other stuff in the mix. Sometimes a turmeric supplement here or there, or, maybe an organ complex. Or just depends. That's

JEN COHEN: interesting, though.

SHAWN STEVENSON: Because I eat real food, and I eat a lot of good food.

JEN COHEN: You didn't say one that everybody takes, is vitamin D.

SHAWN STEVENSON: You see me. You see my complexion. I do. You know what I'm saying? I'm outside. I'm getting ample amounts of sun. Not against it.

JEN COHEN: I think everyone just jumps on bandwagons-

SHAWN STEVENSON: Yeah ...

JEN COHEN: and they don't even know.

I was on that bandwagon, and then I, then I checked my, my levels in my blood, and I was, like, three times, three times higher than I should've been. Dang. So-

SHAWN STEVENSON: That's

JEN COHEN: hard to do. Yeah, exactly. 'Cause they're like, "Oh, everyone needs to take vitamin D," so I'm like- Yeah ... "I'll take vitamin D." And then I'm like, "Oh, whoops, I almost poisoned myself with vitamin D."

Yeah. Thanks for being on the podcast.

SHAWN STEVENSON: Of course. Yeah.

JEN COHEN: And- This is awesome ... this was amazing. I appreciate you. And what else? That's it. Go for those of you who don't know Shawn, listen to his podcast. He's very knowledgeable, as you can see. And we'll do this again, round three. Round two and a half.

How about that? Two. Yeah.

SHAWN STEVENSON: I love that.

JEN COHEN: All right. Thanks, Shawn.

SHAWN STEVENSON: Thank you so much for tuning into this episode today. I hope that you got a lot of value out of this. If you did, you already know what to do. Sharing is caring. Share this with somebody that you love, or maybe that you, maybe you just like a little bit, or maybe even somebody that you don't like.

Maybe this will help them to be more likable. So regardless of the level of or love, be generous. Share the insights. Share the knowledge. It can be transformative for somebody. You never know who you can impact. And listen, we got some epic master classes and world-leading experts coming your way very soon, so make sure to stay tuned.

Take care, have an amazing day, and I'll talk with you soon.