THE MODEL HEALTH SHOW

EPISODE 1046

The Hard Truth About Sexual Fitness: How Diet, Exercise, & More Control Your Sex Life

With Guest Dr. Rena Malik

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SHAWN STEVENSON: Welcome to The Model Health Show. Today we're going to discuss the hard truth about sexual health. Yes, it's a double entendre. We're talking about things being hard, so this is an adult conversation. And also we're gonna talk about some of these truths that might be hard things as well that we need to hear to ensure that we have a long, healthy sex span.

Like this fun fact. Having a base of fitness of 150 minutes of exercise per week is just as effective as popping a Viagra in clinical trials. Now that pill literally, that pill is easy to swallow The 150 minutes of exercise per week, hard truth. But then you don't need necessarily to pop the pill. It's creating this base of fitness, but it's not just gonna translate over to your sexual health.

It's gonna be your metabolic health. It's gonna be your cognitive health. The list goes on and on and on. It's just stacking goodness. But popping that blue chew or Viagra, Cialis, whatever else is out there on the market, you know, these can be quick hitters, quick fixes for potentially deeper underlying problems.

So this is just a small slice of what you're going to learn in this powerful episode. You're also gonna discover that there are systemic and site-specific aspects of sexual fitness. So yes, training a certain way can help overall systemic health and sexual function, but there are site-specific, if you know what I mean, things that you could do for the nether regions to strengthen things.

We're also gonna cover how impactful your environment is on your sexual function. And we're gonna lead off this powerful conversation with the connection between food and sexual health, and then get deep into so much more. So the bottom line is this episode is robust. It's well-endowed, filled to the brim with goodness.

And so without further ado, let's get to our special guest and topic of the day. Dr. Rena Malik is a board-certified urologist, pelvic surgeon, and internationally recognized health educator

who spent her career making the conversations people are too afraid to have with their own doctor finally accessible to everyone.

Specializing in sexual medicine, urogynecology, and reconstructive pelvic surgery, she translates complex medical science into practical evidence-based guidance for a global audience. And today, you're gonna discover the hard truth, what you need to know for good health, great sex, and long life. Let's dive into this conversation with the incredible Dr.

Rena Malik. Dr. Rena Malik, thank you so much for joining us today.

DR. RENA MALIK: Thanks for having me.

SHAWN STEVENSON: You say that what we eat has a huge impact on our sexual health. Yes. Let's talk about that

DR. RENA MALIK: Yes. So it's, it's, it's what you eat that shows up in everything you do, and part of that is your sex life. And the reason is that your, your body needs blood flow, right?

Especially your genital organs. When you get aroused, you get blood flow to the genitals, and in order to have good blood flow, you need to have good, healthy vessels. And when you eat poorly, you affect those vessels, and those vessels get less flexible. They get more stiff. They get clogged with cholesterol plaques, and then you're not getting good blood flow to those areas.

And what happens, unfortunately, is that very often you're seeing problems in your genitals long before you're having heart disease or any other problem. Mm-hmm. So the reality is that it's actually a great way to mo- sort of look at your body and say, "Hey, th- something's off here. Like, we need to go back to the basics and see what's wrong."

And so eating a healthy diet, and we'll talk about what that is, eating a healthy diet translates to having a better sex life because it means that the, the erections and the clitoris and the clitoral erections have the g- access to good blood flow that allows them to function appropriately. And it's also important for hormonal health.

And you need opt- to optimize your hormones, you have to have good, uh, good access to healthy nutrients that you're putting in your body that keep every, all the signals from your brain working appropriately.

SHAWN STEVENSON: That part as well. We don't think about that ... We, we just see the stuff as it just kinda shows up, right?

Mm-hmm. Mm-hmm. Our tissues, you know, even the genitals themselves. Like, what you're looking at is made from the food that you eat. Absolutely. This isn't just manifesting out of any, uh, out of nowhere. And so keeping in mind that we're literally creating our tissues with what we're eating as well, and even the quality of sperm, for example.

Mm-hmm. And this is one of the things you shared in the book that was so eye-opening. And this is a direct quote from the book. You said that, "Sperm health and testosterone levels are also biomarkers for overall health," and we tend to not think about this. And also you go on to say that, "Men with low testosterone or infertility show higher mortality rates compared to fertile men or men with normal testosterone levels."

DR. RENA MALIK: Yeah. It's, it's wild

SHAWN STEVENSON: It's tied to our lifeline

DR. RENA MALIK: It's wild because when you look at the data, there's actually this really good study I talk about in the book where you look at semen parameters. So if a guy gets a semen analysis, you get certain information about their sperm. How much is there? How concentrated is it?

What's the motility like? How do they move around? What's the morphology? Do they look like normal sperm, or are they missing a head? Are they missing a tail, or does it look different? And, and, um, how viable are they? So they give you all this information, and when you look at each individual characteristic as it goes down and you correlate that with life expectancy, you see life expectancy go down.

And so your sperm essentially are predicting your life expectancy. Now, this is a correlation. I can't say f- you know, with a degree of certainty that, yes, if your sperm is low, you're gonna have less life expectancy. But with this large database, they saw this data that was very compelling, saying that when your sperm is unhealthy, that is likely a product of your overall health and directly translates into living short, uh, shorter lifespan

SHAWN STEVENSON: You mentioned the signaling a little bit earlier as well, and I wanna talk more about this because this is another place where food has a huge impact.

Because even the, the signals- Mm-hmm ... that are taking place in our bodies, you know, cells communicating with each other, let alone the cells themselves, are made from the food that we eat.

Mm-hmm.

So it should be Captain Obvious that even the quality of our sperm is gonna be impacted by what we eat. Mm-hmm.

We might know about, like, the superficial social media stuff like pineapple juice or something like that.

DR. RENA MALIK: Yeah, yeah.

SHAWN STEVENSON: But can you talk more about how our diet can be impacting things like, you know, our erections- Mm-hmm ... outside of just the structural aspect, but, like, the quality of our blood- Mm-hmm ... our, you know, sexual fluids and stuff like that?

DR. RENA MALIK: Absolutely. So when you look at the totality of the data on diet, the large majority of the diet literature looks at the Mediterranean diet and finds that men who are on a Mediterranean diet, and the way I translate that for people is like, look, you're eating whole foods, you're eating vegetables, you're eating, um, a small amount of lean proteins.

Um, I mean, a good amount of lean proteins, but a small amount of, you know, sort of fattier proteins and, and that's your focus of your diet. That is translating to a 20% lower risk of erectile problems. So people who maintain good diet actually see, uh, that they sustain their sexual function. Hmm. And then, you know, as you sort of said, we hear about these, like, super foods, right?

People are like, "Oh, if I do this, it's gonna be good for me," like, if I take beets or if I eat blueberries or if I eat nuts. And so in the book, we have a whole section on super foods because people always ask me all the time, "Oh, should I eat this? Should I do this? Should I have watermelon?" And there is some actual, like, validity to a lot of those super foods.

For example, eating blueberries. They saw people who had a large amount of blueberries in their diet on a regular basis had lower rates of erectile dysfunction. Hmm. So, and that's because blueberries have all these phyto- th- these phenols and these healthy sort of, um- antioxidants in them that th- ultimately lead to healthier blood vessels.

Hmm. And so, you know, we're seeing this extrapolation from blueberries, and I say, "Well, yeah, that data showed that." But the reality is you have to find foods that you like, that you can sustain, that you can continue eating on a regular basis that will allow making your diet really easy. And I think that's the thing.

That's the, the thing about this book that's so different is I don't come there with like, "This is the, the recipe you need to follow," or, "This is the, this is the 12-step plan." It's like, how do we take this data, synthesize it, and apply it to our lives? How do we make a diet that sort of fits the th- the rules that we need to follow to maintain a good, healthy sex life and ultimately a good, healthy life- Hmm

and apply them to the foods that we eat? So, like, I grew up eating Indian food and I grew up eating, you know, roti and dal and different ty- lentils, and those are the kinds of foods. I, we eat a lot of rice. And so how do I incorporate that into a healthy diet? That's gonna be different for me than you. Hmm.

And so I think that's the real value here is like, okay, if I do like these superfoods, what's, how do they work? How are they helping me? And, you know, how can I incorporate them? But you don't need to say like, "Oh, this one study said blueberries are good, so I'm gonna eat blueberries." Hmm. Right? You gotta figure out what works for you, um, and, and apply that to your diet.

SHAWN STEVENSON: Yeah, because, you know, based on the data, we're looking at norms, we're looking at averages, and something might really be super for you, and it might be trash for somebody else, you know? Yeah, yeah. And so this is about experimentation with some intelligence, of course.

DR. RENA MALIK: Correct.

SHAWN STEVENSON: And so I wanna ask you, are there any other notable foods just in general, or nutrients that we should be paying attention to when it comes to sexual health?

DR. RENA MALIK: Yeah, so I think there's really three sort of foundational things. One, you wanna figure out what your caloric maintenance is to sort of maintain your body at the, at a healthy weight. We know over time and time again that an excess body weight in the studies shows bad outcomes in terms of sexual health, prostate health, all these things, and usually it's because people who are overweight also have other metabolic conditions.

And so trying to stay at, maintain a good, healthy body weight requires that you keep a caloric sort of maintenance. And then having a sufficient amount of protein to grow muscle, which actually shows over and over again benefit with sexual function- Hmm ... testosterone health. Muscle health actually really does correlate.

We just had a recent study, I think it was 2025 published, that s- found that muscle health, as you have, if you maintain muscle health, you have improvements in libido and improvements in erectile function. Hmm. Just from people who maintain muscle health alone. Hmm. And so we need protein to maintain muscle health.

You need fiber. Fiber has a lot of benefits in the gut. It, uh, it gives you these, it gives your gut bacteria healthy food so that it can then produce these healthy sort of, um, compounds that send signals to your body that, you know, help it function appropriately. And there's even early preliminary data that shows that, like, good, healthy guts lead to good sexual function, and that's because we're having, you know, good, healthy gut microbiomes.

And so- All these things taken together, um, you know, take those are your three kind of big things, and then you're looking at the individual sort of breakdown things. What are the other things we need to look at? Like, of course, people talk about carbohydrates and, um, how does that fit in, and fats. And then, you know, the, it's important to have a certain amount, but then above and beyond that, you just fit it into your, into your calorie restriction or calorie maintenance that you need to stay on.

And then the super foods, again, you gotta experiment, figure out what works for you. But really, the thing is to figure out what's sustainable. What can you maintain on a regular basis to make sure that you're getting the, the nutrients that you need, that you're getting the, you know, healthy, like, um, fuel basically to sustain your body for sex- sexual activity and for regular daily life.

SHAWN STEVENSON: Mm. Yes. This is just good advice overall. Yeah. But you shared this the last time we had a conversation- Yeah ... that sexual health is health.

DR. RENA MALIK: Yes.

SHAWN STEVENSON: And these two are interchangeable. They feed into each other. And just, it- it's even more of affirmation reading this book of how, you know, these biomarkers that are attributed kinda to, to sexual function really do tell the tale on our longevity.

Mm-hmm.

And it's also being mindful about the other side of the equation. So we're looking at what are the normal things that our genes are expecting us to eat-

Mm-hmm ...

versus the newly invented chemical cocktails that we have, like these food-like products. And this was crazy, and because you were coming on, I looked this up.

This is a study, this was published in the journal Cell Metabolism. The title is, this is the title of the study, "Effect of Ultra-Processed Food Consumption on Male Reproductive and Metabolic Health." Mm. And this was just published, by the way. Yeah. And this was an incredible... This was a controlled crossover study with nearly 50 men.

They had 77% ultra-processed food diet for one part of the study, and then there was a washout period. About, it was three weeks, and then they had a washout period, and then they had a largely unprocessed diet- Mm ... which was basically 1% ultra-processed foods. Now, on the largely ultra-processed food diet, not only did their testosterone trend downward by about 11, 11% comparatively.

This was crazy. They had the notable impairments in cardiometabolic health, but the researchers stated, quote, "Sperm quality trended downward with impairment, with decrease in total motility."

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: All right? So it directly, the ultra-processed food was like shooting down their swimmers.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: You know, and creating, uh, abnormalities.

DR. RENA MALIK: Yeah, so we have a chapter in the infr- on infertility in the book, and I actually share a story about a guy who was, like, super healthy. He was a patient of mine, came in. I have a fr- actually a friend of mine, 'cause I don't, I don't take care of infertility as a

primary part of my practice. And so he came in, he's like, "Look, I'm, you know, my semen analysis wasn't great," and we talked through everything.

And he's like, "Everything else looked okay, um, but, like, we can't get pregnant. And it's not, like, bad enough where I can figure out what's causing it." And I was like, "Well, what are you eating?" And he's eating, you know, like a, a, like a McDonald's sandwich in the morning. He's, you know, having a quick protein bar for lunch and, like, a- you know, having, um, just going out to eat whatever the, the office is going out to eat.

So he might have a quesadilla. He might have, uh, you know, some nachos. And then for dinner he would, um, you know, it was just another, like, whatever was around. It was n- there was no thought into it. It was like whatever we order, whatever we felt like. And I was like, "Look, like, when are you e- Like, do you ever, like, have a salad, or do you cook for yourself, or do you, like, eat vegetables?

Do you consistently try to do these things?" And he was like, "No." And I said, "Look, let's start with something super simple. Just let's, let's just focus on breakfast. Let's remove that McDonald's sandwich. And if you like eggs for breakfast, sounds like you do, why don't you make, like, an egg and toast at home?

Maybe add some avocado, um, and, and start with that. Something simple, s- similar enough to what you're already eating, but it's not processed." And so I- over the time we went, we went through everything, and ultimately, like, you know, a year later, he was able to conceive with his partner. Mm. And but it was, like, really we had to clear out his diet and go through each meal and figure out what was easy enough for him to do that he could maintain and could continue doing.

SHAWN STEVENSON: That's such a great story.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: And what people don't think about is it's not just the quality of the food itself when we're talking about this kinda ultra-processed food paradigm, it's also the

environment overall and all the things that are coming along with the ultra-processed food because of how it's grown, because of, you know, the packaging- Yeah

and all of these, you know, bisphenols and microplastics- Yeah ... and all this stuff that we're dealing with today. You're gonna get higher doses of that stuff-

DR. RENA MALIK: Absolutely ...

SHAWN STEVENSON: when you're not eating real food.

DR. RENA MALIK: Well, yeah. And when you... A lot... I think we're cooking less, and when you go out to eat, like, you don't know what they're...

You don't know how many sauces they're putting in. Those sauces are also packaged. You, you know, how much oil's going in that food. And so I'm like, it's great to eat out once in a while. I, I do it all the time, but, like, you know, you have to also be thoughtful because you can't really c- like, understand how m- like, what's going into that thing.

When you make a quesadilla at home, it's gonna be very different than the quesadilla you get at the store, right? Yeah. And so it's sort of also realizing that.

Yeah. You gotta be mindful of those salsa's.

Mm-hmm.

SHAWN STEVENSON: Um, I wanna ask you about this. You actually have a great chapter in the book about the environment.

DR. RENA MALIK: Yes.

SHAWN STEVENSON: And you go into these different things that, again, I don't think that we think about-

DR. RENA MALIK: Mm-hmm ...

SHAWN STEVENSON: just because, you know, um, we are kind of- inundated or, like, we're kind of like in a, in a snow globe. Mm-hmm. We don't realize being here on this planet, let alone our kinda micro-culture, micro-environment. And so a lot of stuff is influencing our sexual health that we might not even realize, and I love that you broke these things down.

And one of them that you talked about was stress.

DR. RENA MALIK: Yes.

SHAWN STEVENSON: Let's talk about that.

DR. RENA MALIK: Stress is the, one of the things I think we don't talk about enough because we, we're like, "Oh, you gotta do this, this, this," and like the large part of people are like, "What do I need to do?" And they're super stressed because they're not actually, like, they don't have any clear guidance.

But we also are in a society right now where we feel like we gotta go, go, go. You could work 24 hours a day. You can always be accessing your phone, checking your email, doing whatever, right? If you don't intentionally turn that off, you're gonna be stressed, right? And but we're like, "Oh, it's just normal," and, and we don't realize what the toll that's taking on our bodies.

And so stress not only affects testosterone, which a lot of people have heard about. When your cortisol goes up, your testosterone goes down. But when you think about just being intimate with another human being, what we learn in med school is point and shoot. So when you get an erection, your parasympathetic nervous system needs to be activated, and that is your rest and digest system.

Mm. So point is getting the erection. And so if you are not, if you're in a sympathetic nervous system state, like you're stressed, you're anxious, you're thinking about other things, you're not gonna be able to get aroused appropriately or sufficiently. And so you're gonna feel like something's wrong with you.

And unless you actually take the time to, like, relax and turn those things off and really, like, be intentional about de-stressing, which is crazy that we have to do that now- Yeah ... but we really do because there's just so much input all the time, and it's, and whether you realize it or not, it is affecting you.

Like, you might see something on social media, scroll through, and you're like, "Oh, my God. Oh, my God, what am I not doing? This is, this tells me I gotta do this," or, "Oh, my God, this terrible thing happened," or whatever it is. We're constantly being fed negative things or telling, things telling us we're doing something wrong, and so that really does affect you.

SHAWN STEVENSON: Yeah. Thank you for sharing this. Mr. T, it might as well stand for testosterone, the muscles, the Mohawk, the audacity to wear feather earrings. We know the iconic Mr. T, of course, but we all want to be Mr. T in our own lives, and a big component of that is being mindful of supporting our testosterone. Now, the lifestyle factors matter so much.

For example, we've got an incredible study published in the Asian Journal of Andrology finding that there is a heavy sleep-dependent factor in producing testosterone, and another study published in the Journal of the American Medical Association finding that when young men are sleep-deprived, just for a week, getting five or less hours of sleep per night plummets testosterone by upwards of 15%.

So sleep deprivation is one of those things that is counter to optimal testosterone levels, so we wanna be mindful of that and other lifestyle factors. Now, many people are looking for a supplemental thing that they can do, that they can take to support testosterone, but I'm telling you right now, the efficacy is far and in between.

There are very, very few things that are proven clinically to support healthy testosterone levels, and dare I say, give it a boost. But one of those things was noted in a randomized, double-blind, placebo-controlled trial titled Clinical Evaluation of Purified Shilajit on Testosterone Levels in Healthy Volunteers.

And it had men between the ages of 45 and 55 take 250 milligrams of purified, purified is key, Shilajit twice daily for 90 days. At the end of the study, the researchers found that, versus a placebo, the men taking Shilajit had significantly increased levels of total testosterone, free testosterone, and DHEA.

Total testosterone increased by upwards of 28%, while free testosterone increased by upwards of 20%. Now, all of this happened without negative side effects. Now, if you're wondering, "What the heck is Shilajit? What is that?" This comes from the Sanskrit word that's translated to mean the conqueror of mountains and the destroyer of weakness.

And Shilajit itself is a dark, resinous substance from the Himalayan Mountains. It's been utilized in Ayurveda for thousands of years. And right now, you don't need to hunt the mountains of the Himalayas to find it. Organifi now has an ultra-purified, authentic extract that's clinically tested for potency and efficacy, all in easy-to-use gummies.

Just go to organifi.com/model and you're going to get 20% off their phenomenal Shilajit gummies and storewide. All right? Incredible opportunity. Head over there, check them out. Organifi.com/model for 20% off. Take advantage. And now, back to the show.

This is another thing that you're doing with this project, is, like, really uniting the psychological and the physical.

Mm-hmm. Because I know as a dude, we tend to think that it's just physical. Mm-hmm. Like, you know, and especially when we're, you know, younger and this stuff starts happening, it's like, "What is this feral thing in my pants?" You know, just this physical component, and we don't have to think about it. It's just happening.

DR. RENA MALIK: It just works, yeah.

SHAWN STEVENSON: And then life stuff can start happening for a lot of men, and just, like, the stuff just start piling on, piling on. And maybe your interest in sex goes down, or maybe the performance stuff and all these different things that, you know, you've seen. Like, if anybody knows, it's you, skyrocketing rates of people coming in with different sexual

struggles and dysfunction, and not realizing just how much their psychology and what's going on in their life is affecting all that stuff.

And- You're probably looking for, "Give me something to take." Yeah. Because I gotta keep, keep this whole thing going. So I know it's usually a tough conversation to get people to, like, analyze and look at their lives. But with this environment piece, what else do you want people to know?

DR. RENA MALIK: Well, one, you know, you bring up such an important thing, and I think that guys really struggle with dealing with emotions.

Because as a society, we've told them they can't be emotional. They have to be stoic all the time. They have to show up and, and put those to the side. And so one, they feel like they can't express those emotions, so they come in that way. And then, y- you know, you ... Because it was so easy when you're young, it almost feels like a different part of you.

Like, your, your, your sexual organs, your genitals are just separate from who you are, and they should just work. And so when there, something's wrong there, it's something that's wrong just there. It's, it couldn't be anything else that's causing it. Mm. And I tell guys, anyone who comes in with a sexual problem, I tell them there is always a psychological component, because the first time something happens to you, you're thinking about it.

It's on your mind the next time you try to have sex, and the next time after that. You don't just, like, forget that you had a bad experience, that something happened. And so there's always a component of it. And we're dealing with another person, right? So there's, there's, there's always challenges there, because everyone has some insecurity they're bringing into, uh, being vulnerable with a person, right?

And that's what sex is. You're being completely vulnerable with someone. And so I think the reality is, like, we have to be okay expressing these things and talking about them, but also, like, realizing that you're human. Like, you're not just a machine that shows up, and, like, things are gonna work. Like, you have emotions, and it's okay if you're stressed and don't feel like it, or you're, um, you know, you are dealing with something

Like, you know, it's okay to talk about that, and we need to make a space for men to be able to talk about those things.

Ooh, that's a, that's a tough, that's a tough pill to swallow

right there. It's really hard. But, like, I think ... I mean, I know it, 'cause I see these guys. I mean, they open up to me, and, and it is

It, it's like I'm the first person they've ever talked to about it, right? And they f- And they just feel, like, so unburdened f- someone actually listened to them. And it's, it's so sad to me that, like, I see guys in their 80s who've never talked to anybody about what they're feeling, and they've been struggling c- carrying this for so many years.

And, you know, I think, I, I hope that we can make a society where it's okay for guys to talk about these things.

SHAWN STEVENSON: With this environment chapter, you also address sleep. Mm. You know, this is a big, especially today, our environment heavily influences our sleep quality, our sleep habits.

Mm.

You know, through our evolution, it gets dark, you gotta take shelter, you know?

But today, we can, we have basically, we can create artificial daytime-

DR. RENA MALIK: Oh, yeah

SHAWN STEVENSON: ...you know, anytime we want. And you share another hard truth-

Mm-hmm ...

that our sleep quality is deeply impacting our sexual health. Talk about that a little bit.

DR. RENA MALIK: 100%. And sleep is, you know, I think when we were younger, it was like, "I'll sleep when I'm dead," you know?

Mm-hmm. Like, it's okay, and we used to pride ourselves on how little we could sleep and be fine. And I think fortunately, because of books like yours and, you know, discussions that we're having about sleep, that there's a little bit more understanding that sleep is important. But sleep in terms of sexual health, if you're not sleeping, you are d- dramatically impacting your testosterone.

And so when you don't sleep at night, your, basically what happens, your body is normally at night making testosterone production, and it's, it's g- kind of rising, rising. And so when you wake up, your testosterone is at its peak. And so if you don't sleep, you're reducing that time where your body is replenishing your testosterone.

Right. And so you ultimately are lowering your testosterone. And, and then that just compounds, 'cause you're, you're feeling sluggish, you're feeling terrible, and usually you're probably doing something to alleviate that. Maybe you're using caffeine late in the day or other things. That's making your sleep worse, and then it's just kinda getting into this terrible cycle.

And so sleep can have a huge impact on so many different things. On your nutrition, because you're not snacking when you're as tired, on your, um, on your hormones, like we talked about. If you're really tired, you're not feeling very sexy, and you don't really want to be intimate with another person because you're just tired.

You might be more quick to, uh, be irritable. And so all these things really tie into your health when it comes to sleep. But, you know, it is so valuable. And sleep and stress are those things that like, oh, we know we should do- Yeah ... and we don't really. You know what I mean? Like, everyone talks about diet and exercise, and people can be so good at those things.

Like, people are like, "Yeah, I got it. I got that dialed in." And I'm like, "Well, what about your stress?" "Oh, oh, well, you know, I'm stressed." "And what about your sleep?" "Yeah, I'm, I, I'm

okay on five hours." And the reality is, have you slept eight hours or seven hours? Do you see the difference? Because once you do, you'll realize.

SHAWN STEVENSON: You just said, this another hard truth. It's another hard truth. You know, truly, like-

DR. RENA MALIK: Yeah ...

SHAWN STEVENSON: but I think sometimes, and we'll talk about this as well, you got so many examples of this, but it needs to have that connective tissue.

Mm-hmm.

Right? And I've been talking about this study for years. It's published in JAMA, Journal of the, of the American Medical Association.

They took young, healthy men-

Mm-hmm ...

and this is a part sleep ward study, and they also had them sleep at home as well. But they allowed them to get adequate sleep, which was one phase of the study, eight hours. Another phase, uh, in the ward conditions was 10 hours.

Mm-hmm.

And then they had them do a sleep deprivation arm of the study where they got five hours of sleep.

DR. RENA MALIK: Yep.

SHAWN STEVENSON: And they compiled all the data, and just one week, one week of sleep deprivation dropped their testosterone upwards of 15%.

DR. RENA MALIK: Yeah, and you know, I think people need to understand what that means, 15%. 15% is the equivalent of being a decade older. So it's as if, you know, you became a 30-year-old guy as, like, a 40-year-old guy in terms of testosterone, and that's a huge difference.

So the reality is, like, you need to prioritize it. And yeah, there will be ti- I think the one thing in this book, and I try my best, is like look, we're not perfect. You don't need to be perfect 100% of the time. No one, no one is. And so the reality is, like, you gotta really be intentional about these pillars of sexual health so that you can cont- continue to have great sex throughout your life and great health, right?

But if you're not intentional, it will deteriorate, and you will deteriorate in so many different ways. And that's what happens to most people, is they just like, let this go, let that go, let this go, and then over time they don't even recognize themselves anymore.

SHAWN STEVENSON: Yeah. Oh, my gosh. You started off this portion talking about basically sleep is like, testosterone is sleep dependent essentially.

DR. RENA MALIK: It's, uh, it's, it's very important for testosterone, yes.

SHAWN STEVENSON: And we are shortcoming ourselves, pun intended- ... when we're not getting adequate sleep as far as, like- It's really kind of optimizing our testosterone

DR. RENA MALIK: Yeah, and I'll add that since you're s- you run, you had a little pun there, low testosterone is associated with ejaculatory problems.

So when guys have premature ejaculation or delayed ejaculation, we do see a correlation- Hmm ... with low testosterone. And so it's really important if you wanna be functioning, not just for testosterone or for erections, it's for a lot of different factors in our body. And testosterone is important for much more than sexual function, you know, muscle health, brain health, um, losing fat mass, mood is huge, brain fog.

I mean, a lot of the patients who end up needing testosterone go on it, the first thing they tell me is they feel clear.

SHAWN STEVENSON: Hmm.

DR. RENA MALIK: Like, they feel like they can actually, you know, function normally, and their brain is clear. And they didn't even realize how foggy they were until they started it.

SHAWN STEVENSON: Yeah.

Testosterone is ... It's a, it's a big part of this overall health landscape that we all have. Mm-hmm. And this is for everybody. Mm-hmm. And, and when we tend to, again, isolate this as a m- man thing, this is about drive, it's about, um, you know, building muscle. Mm-hmm. It's about, um, you know, just being able to, obviously the sexual health component.

It's not everything. Like I, again, people can, we can function, but this is a part of, as you talked about, longevity. This is a part of our ov- overall kind of, um, cardiometabolic health. So we don't wanna negate this. And also, just again, having this correlation with- Getting those sleepy pumps in. Sometimes the sleepy pumps aren't the best pumps, you know?

Mm-hmm. So I wanna ask you about this as well because just to lean into the connective tissue piece, this was recently published as well. This was in the American Journal of Epidemiology. The researchers found that sleep deprivation has been found to create significant dysfunction to total sperm count, sperm motility, morphology, and even testicular size.

DR. RENA MALIK: Yeah. Yeah.

SHAWN STEVENSON: So again, if we're short on sleep, we can end up short other places. Give 'em the hard truth.

DR. RENA MALIK: It, it makes sense, right? When your testosterone declines, you're affecting fertility. You're affecting your sperm production. If your testicles are not being used because there's not enough signal to them that testosterone is needed, they're gonna shrink, right?

And so that's why we see when people do take testosterone exogenously, they will become infertile, and their testicles will shrink. And so that's another thing to be thoughtful of if you're gonna take testosterone. But if your body's not making enough, those are signs that you will see in your body if you're trying to have a baby.

Or you might say, "Hey, my testicles got really small." Pay attention. Mm. Like, do, especially if you're a young guy, do a self-exam of your testicles because that's the only thing you're really at risk for is testicular cancer. And if you don't examine your testicles once a month, you might miss it. And so you gotta look, you gotta feel, you gotta know what they look like on a normal basis, and so that also can be a signal for you.

SHAWN STEVENSON: Yeah. Are you hanging tough like the New Kids on the Block? Or never mind. Um, so with- within this context of the environment, is there anything else that we need to, to know?

DR. RENA MALIK: Yeah, I think there's a couple more things. So one, you know, we talk about the company you keep, and I think this is important. There's not a lot of science behind specifically the company you keep for sexual health.

There's a little bit, but what I would say is when you think about the people around you, if they're not prioritizing having a good sex life or having an intimate relationship, if they're all like, "Yeah, we're not having sex with our partner," or, "Oh my God, that's just normal," and your, all your buddies are like, "Yeah, my, my wife's not having sex with me," or, "My partner's not having sex with me," then you're gonna start thinking, "Well, that's normal, so I should just let it go."

And then you just let it go, just like everything else. And so one is who's around you, and then also thinking about who's around you that's giving you positivity, right? Because y- we

sometimes need to do an audit. Like, oh, every time I hang out with this person, I feel worse about myself, or I feel like, you know, I'm not, uh, they're always like, "Let's go out for drinks.

Let's go out for this. Let's go out for that," and they're never like, "Let's go for a hike," right? So it's, it's also, like, auditing the company you keep to be like, "I need to be around people who are helping me reach my goals, who are also in the same mindset that they, they value relationships. They value sex."

Mm. "They want to k- maintain their sexual health, and they're working, willing to do the hard work to get there." And so that's one. The other two things that we talk about in environment are how you self-love, so masturbation and pornography. And I think these are really important because I think a lot of people feel like these are all negative or all positive, and the reality is it's somewhere in between.

Masturbation can be a very healthy way to feel pleasure, to have enjoyment, especially if you don't have a partner, right? And so I think we, we don't want to, like, say, "Oh, this is a terrible thing to do." I think with either that or pornography, when these things become negative is when you're doing them at the expense of something else.

Mm-hmm. Mm-hmm. And you're like, "Hey, I'd rather be alone by myself than hang out with a partner, go out and hang out with my friends, go to work," right? That's where you're like, "Hey, this is a red flag. Let's go." And if you are feeling like, "Hey, I'm struggling with my sex life," maybe it's related. There are some occasions where it can be a negative.

And so for example, with masturbation, if you are using a, a, a technique that cannot be replicated with a partner, like you're using, people will call it a death grip, or you're masturbating against a hard surface. There is no orifice that's gonna replicate that, right? And so it will be difficult for you to climax or maybe, you know, to feel enjoyment with a partner because it's not gonna be the same as what you're doing by yourself.

SHAWN STEVENSON: What's a death grip?

DR. RENA MALIK: So it's essentially masturbating with a very firm grip, like a grip that would be too, you know, would, would be very, very strong

SHAWN STEVENSON: That's scary. That's so scary.

DR. RENA MALIK: Well, so peop- a- and people do it, right? And some people do it and don't have a problem. They, they do it- Yeah ... that's how they enjoy themselves, and then they are with their partner and they're fine.

50 shades of gray. Right? It's 50 shades. That's all fine. But, but so these things, and then for example, if you are using pornography to become aroused, and that's the only way you get aroused, and you're now struggling to get aroused with your partner- Mm ... that's a red flag. Like, maybe there's, um, maybe you're watching something that is just, like, can't do with your partner or that's not really, like, something you would do with someone else, and that's not happening when you're with your partner.

So those are things to think about, and when they can play a role, or you're comparing yourself to pornography. Mm. So what I'm seeing with a lot of younger guys is they w- that's where they're learning about sex, right? They don't learn from anywhere else. They learn on porn, and then they go to and have their first sexual experience or first few sexual experiences and they're like, "Oh, it didn't happen like that.

It didn't, like, either my, my body didn't work like that, or my partner didn't respond like that, and something's wrong." And now they have this deep-rooted shame that something is wrong with them, and they have no one to talk to, right? And so they, they feel badly, and then that carries into their future sexual encounters.

And so that's another place where it can be a problem.

SHAWN STEVENSON: Oh, my goodness. And you, again, you break this down. There's a section in the book, in the environment section, uh, pornography pro- por- uh, pros and cons.

DR. RENA MALIK: Mm-hmm.

SHAWN STEVENSON: And again, you said it, like, people's mindset usually at one of the extremes is this is all terrible, and then this is all, you know, there's no problems with it at all.

And I love the overall understanding of, like, is this creating dysfunction for you? Yeah. And being mindful of it, because as you just mentioned, like, red flag.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: Right? And- I wanna ask you about, because you mentioned how especially for young people, you know, having pornography being like the blueprint.

Mm-hmm.

And if this can create any sense of, you know, again, um, what you're supposed to do that might not be accurate- Mm-hmm ... and also a sense of, you, you mentioned comparison, maybe a sense of inadequacy, or maybe like feeling like, you know, maybe you are, you know, you're just n- you're, you're not what this, uh, video is- Mm-hmm

is proposing you should be.

DR. RENA MALIK: Yeah. And so I think that one thing to realize is these videos are made for entertainment, right? And they are, they are, this is not like a real scenario. And the, the challenge is that no one knows that. And that's part of the reason I wrote this book is like when my kids are young adults, I want them to have this book.

I want them to know, like, what ... So our, we, our fourth pillar is confidence. And confidence, part of that is understanding what, you know, what is, how do you get some, give someone pleasure? What are the things that you need to know? What are the erogenous zones? How do you cultivate an environment of desire?

How do you talk about sex? And, and really importantly, we even have a, like a section on anatomy because you need to understand anatomy and, and how, what, what, what's what,

and like what you need to stimulate and what works and what doesn't. And there's science behind it. And so this is the thing that they're not getting taught on pornography, right?

They're, they're seeing something that looks good to the person watching. They make pornos, they make these erotic films so that the person watching is enjoying it, right? The angles, the, everything is done for the viewer's enjoyment. And they're actors. They may not be enjoying the experience. They may be enjoying it, they may not.

And, and the reality is like you'll never know. So I think the important thing, and I, I encourage all parents to talk to their kids because they're going to see pornography at some point from somewhere, maybe by accident, maybe from a friend's phone, maybe somewhere. I remember we were walking down the street and my son was like, "I think I saw something in the, uh, uh, in the TV in, in the neighbor's house," because they had the windows open.

And I said, you know, we had talked about what porn was. He's like, "I think that was porn." I said, "That's wild." Like we're literally walking down the street- Hmm ... in our neighborhood. Um, and so they're gonna see it and, and we have to equip them with the knowledge like, you know, this is a, a movie, this is not real life, and if you see something that is confusing to you, please come talk to me about it.

It's an open place for you to talk about it. Because we are the people that they trust, and they come to us with that information. And if we make it like, "Oh, you should never s- oh, how dare you watch that?" Like, it's, it's unfortunate, but they're probably gonna see it. And so we have to be able to let them know what to expect when, when, how to handle that information.

SHAWN STEVENSON: Yeah. Oh, s- so good. Um, you, you said this very powerful statement- How do you give someone pleasure? And having that as your blueprint-

Mm-hmm ...

you're probably gonna miss the whole point.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: Right? And a lot of pornography is probably not gonna be dedicated to the clitoris.

DR. RENA MALIK: Nope. And the clitoris, as you've astutely brought up, is the most reliable route for women to climax, and so we talk about that in the book.

But, you know, you're seeing things that look good on porno. They're not teaching you what works. And part of that is actually communicating, right? Because every person is different, so be like, "Do you like that? Is that good? Are you enjoying yourself?" Like, actually talk, right? Or use non-verbal cues, you know?

Like, let your partner know you're enjoying what they're doing. And, and I think it's important that we make it okay and, and actually encouraged to communicate, and not just be like, "Oh, yeah, that was good," and- Yeah ... or, like, a- and never talk about it again. Because sex is supposed to be fun and playful, and you're supposed to connect with another human being, and if you're not doing that, then what's the point, right?

You, you can masturbate by yourself if you want an orgasm, but you can, you can actually have a connection with another human being and enjoy pleasure with another human being when you're actually using all these tools.

SHAWN STEVENSON: I love this so much, the communication piece. Just being human- Yeah ... you know, and asking, because everybody's different.

Somebody might really be looking forward to that death grip.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: You'd never know unless you ask.

DR. RENA MALIK: Right, and, and you gotta ask, right? And don't take it personally. I think that's the biggest thing is, like, we've made it so difficult to talk about that when someone says something negative potentially, that's it.

All you hear is a negative thing and you shut down and you're like, "Oh my God, I'm horrible." Mm. And, and you've not... Now you're not really, like, being like, "Oh, hey, well, how do I, how do I work on this? What's good," right? And we have to give each other good feedback, too, right? Good, what can we work on, what can be better.

That's how you have great sex. Mm. It's not just like... It's a skill that you get better at, and you get better with each individual partner you're with because not everyone is the same. Now, things, many things will work well for many partners, but each individual person is different. And so you gotta say, "Hey, do you like this?

Is this good for you? Is this not good for you? Be honest with me," right?

SHAWN STEVENSON: Mm. Uh, this is very count- again, it's not what we're taught. Mm-hmm. It's not the prevailing message. Yeah. And so this is the, one of the benefits of being able to, to talk to you about these things. One of the most important nutrients for human health, this should be of no surprise, it should be written in the sky, it's vitamin C.

It has so many benefits, from supporting our immune system function to supporting our sleep quality, and even supporting our mental health. Vitamin C is believed to be a bonafide stress buster. It reduced stress by supporting the adrenal glands, and allows a person to bounce back more quickly when under stress.

In a randomized, double-blind, placebo-controlled trial published in the journal Psychopharmacology, looking at the stress of public speaking and other stressors, scientists found that those who received vitamin C supplements experienced less stage fright, maintained more balanced blood pressure, and had a faster recovery of their cortisol levels.

What don't you do, vitamin C? You're so special. Now, here's the rub and what most people don't know, this is not written in the sky, is that most vitamin C supplements are made from

genetically modified corn syrup and corn starch. These are not ideal sources of vitamin C for our tissues, for our brain, for our biology.

And so we wanna make sure that we are sourcing our vitamin C supplements from bonafide science-backed sources. And for that, the vitamin C supplement that I've been using for years is the Essential C formula from Paleovalley. Go to paleovalley.com/model right now and you're going to get 15% off of their powerful Essential C complex.

Now, it's based on some of the most vitamin C dense real super foods that have ever been discovered, including acerola cherry, amla berry, and the vitamin C superstar of superstars, camu camu berry. It's all organic with no binders, no fillers, no synthetic ingredients, plus it has a 60-day 100% money back guarantee.

So if you aren't absolutely thrilled with it, you'll get your money back, no questions asked. So again, you've got nothing to lose but better health to gain by utilizing Paleovalley's Essential C complex. Head over to paleovalley.com/model right now for 15% off. That's P-A-L-E-O-V-A-L-L-E-Y.com/model for 15% off storewide.

And now, back to the show. You mentioned earlier, and I don't wanna like walk around the recent study on strength, maintaining muscle mass- Mm-hmm ... and strength. correlating with erectile function- Mm-hmm ... and sexual health later in life in particular.

DR. RENA MALIK: Mm-hmm.

SHAWN STEVENSON: You've got a section of the book dedicated to sexual fitness-

DR. RENA MALIK: Mm-hmm

SHAWN STEVENSON: as well. Yeah. So let's dive in a little bit deeper on this.

DR. RENA MALIK: Yeah, so strength is our second pillar. Fuel was our first pillar, which was food. Strength is the second pillar, and strength, people think, "Okay, I'm just gonna go work

out." It's a little bit more nuanced than that. So we talk about, um, the why you do th- the strength things and what works, right?

So for cardiovascular exercise, it's actually very, very important. So we've seen in the data that when you exercise 150 minutes a week, you're gonna see improvements as good as if you were taking a Viagra. So when they looked at, like, the actual improvement in sexual function on questionnaires, it was as good as if someone took a Viagra.

SHAWN STEVENSON: Yeah.

DR. RENA MALIK: And so it's because you're, you're improving the health of your blood flow. Like, you're improving your health of your blood vessels, allowing more blood flow to the genitals, right? And so super valuable. I don't care how you do it. I don't care what you do. I care that you find something you enjoy doing.

It could be dancing in your bedroom. I don't care, but something that raises your heart rate, that allows you to get some moderate intensity that you're doing on a regular basis. And then we talk about strength, and strength is, is so important. As I mentioned, muscular health translates to better sexual health.

It translates to better longevity. And if you think about it, the stronger you are, the more you're gonna be able to actually play in the bedroom. You'll be able to try different things, do different positions, right? All those different things come with being strong, and you'll feel better in your own skin.

When you're feeling more confident, you show up better in the bedroom

SHAWN STEVENSON: Mm.

DR. RENA MALIK: And then strength itself shows significant improvements. When you improve strength, specifically you do strength exercises of the large muscle groups, like you do, um, squats and deadlifts and those sorts of things, you see improvements in testosterone.

Now, they're short-lived improvements, but if you keep doing it over time, you're going to have an additive benefit. And so there's so much value in strength. But we also talk about pelvic floor strength, and a lot of guys don't think about this. They may have heard of Kegel exercises. They may have heard to do those to get better orgasms or something.

And there is truth to that, that these are the muscles essentially that sit in your pelvis, that are underneath your organs here, that connect to all the bones in your pelvis. They connect to your back, they connect to your hip, and they also hold up your rectum and your bladder and your-- and the blood vessels to the penis, and the nerves of the penis go through them.

Mm. And so whe- these muscles are working all the time with every step you take, and usually they're working fine. You don't have to think about it. But for some people, they do start having problems with these muscles. And when they start having problems with these muscles, they either are too weak or too tense.

And what I see a lot of people don't realize, especially in this day where stress is so common, that they're also clenching their pelvic floor, or they're having more tension in their pelvic floor, and they don't realize it. Mm. And so what that means is it's sort of like when people get TMJ dysfunction.

Mm. So they go to bed, they clench their jaw, they wake up with a headache. They didn't know they were clenching their jaw. They were asleep. Same thing. You don't know these muscles are tense, but when they're tense, it can cause problems with difficulty getting erections. It can have problems with ejaculation.

You can have problems with constipation, maybe going to the bathroom too often. Maybe you can have back pain, maybe even have hip pain. And so when you have these issues, you just say, "Wait, I'm not gonna do Kegels. I need to learn how to relax these muscles and do exercises to stretch and lengthen these muscles before I try to strengthen them with exercises that strengthen the pelvic floor."

And that's what a Kegel is. It strengthens- Mm ... those muscles. And so when you strengthen those muscles, you can see benefits in terms of like, oh, you might actually have a more

forceful ejaculate. You may actually notice that when you orgasm, it's more intense because those muscles are what's contracting during the orgasm.

So there are benefits to understanding your pelvic floor and knowing how to both strengthen it and relax it, just like you would any other muscle in your body.

SHAWN STEVENSON: Wow, it makes complete sense. But I, I love this because we're, we're looking at whole body fitness, of course.

DR. RENA MALIK: Mm-hmm.

SHAWN STEVENSON: And we're also look at, looking at training the area- Yeah

itself. Yeah. And again, this might be a new concept for people, but again, it just makes complete sense. And I don't think we realize, and I love that you mentioned that this can just be, like, chronically on.

DR. RENA MALIK: Mm-hmm.

SHAWN STEVENSON: A good way to know if you have relaxation is to really tense it up. Mm-hmm. Tense and relax, tense and relax.

Can you talk about some pelvic floor exercises?

DR. RENA MALIK: Yeah. So to first, just if you have no problems, your pelvic floor is probably working fine. You can assess it by, like, trying to put your fingers underneath the, the scrotum and the perineum area, the taint, and sort of try to cl- clench, like you're squeezing up and in and relax and see if your m- moves in and relaxes.

If it's not doing that movement or it's not relaxing, that may be a sign that there's some abnormality there. Um, but if things-- you've no symptoms, you're doing just fine, you can do Kegel exercises, uh, as a way to potentially improve sexual health. And so what you can do is you can sort of lift... You can visualize like you're lifting your penis up without touching it, or

you're, like, lifting your scrotum up without touching it, and then you do that, and then you hold it for five seconds, and then you relax.

I tell people start it lying down because you're not using any other muscles. You're just focused on that muscle. You wanna really, like, focus your mind on being able to feel that. Feel up, relax, and relax. Make sure you're relaxed. And you do that maybe 10 times in the morning, 10 times at night, and then you work your way up.

You do more sets. Maybe you'll do two sets of 10 in the morning, two sets at night. And then once you're good at it, yous do it sitting, and then you do it standing. And there's other exercises too that we talk about that are not just Kegel exercises that can help with your pelvic floor as a whole.

Because like I said, it's not just-- it's, it's connected to all these other things, so it's doing maybe lunges in different positions or, you know, holding, uh, balance on one leg. And there's different exercises that we go through in the book that also help with strengthening. They're not just these sort of Kegel exercises.

And then we talk about relaxation exercises too because again, 'cause again- And it's also really important to do pelvic floor relaxation exercises, because you wanna stretch and lengthen those muscles so that they don't get stuck or used to being in that tight, contracted state. And a lot of this is happening because we're spending a lot of time sitting.

So I saw a lot of guys during COVID come in with all these new symptoms, and a lot of it was because they were just sitting all day and not moving their bodies anymore, and so their muscles got stuck in this short, contracted state.

SHAWN STEVENSON: Mm. So again, tensing, relaxing, doing sets.

DR. RENA MALIK: Mm-hmm.

SHAWN STEVENSON: It's like training. Yeah.

Right? Now, this is in a relaxed state generally when people be doing Kegels. Now, what about when the penis is erect? You know, this is a different physical state. Is this like that up and down kind of action that we'll see?

DR. RENA MALIK: Yeah, absolutely. I mean, essentially when you're strength, or, you know, squeezing those muscles, things will move up, and then when you relax them, it'll move down.

I tell people, you know, if it's, it's, you're doing it, no problem, no pain, no discomfort, go ahead. But obviously, if you start having any sort of discomfort, pain, like, don't, don't just ignore it, because those things can snowball into something that's a problem later down the line.

SHAWN STEVENSON: All right. I wanna know, because this is leading to this question that I wanna ask, which is potentially strength training- Your dick.

All right? Where we have this, you know, again, what kind of tissue are we dealing with here? Mm-hmm. Is this, like, muscle? Is this tendon?

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: How does it go from a, a f- a floppy disk to a hard drive?

DR. RENA MALIK: Yes. So, um, the, the penis is an amazing organ, and we talk about it in the book. We go through the science of it.

But essentially, you have these corpora cavernosa, which are these cylinders in the penis, and they're basically like sponge tissue. And there, there's no muscle. It's just, it's, it's all fills, it fills with blood. And so when you have an erection, you get a signal from nitric ox- a signal in your body from some arousal, right?

Your body then says, "Hey, I'm aroused. I'm gonna release nitric oxide." So the blood vessels in the nerves release nitric oxide. That's your ignition, right? That's what sets off the cascade. It

sends a bunch of signals, and when those signals happen, blood flows into the penis. And this corpora cavernosa tissue, there's nothing else like it.

It expands, and it gets lo- larger, right? It gets longer and wider because all this blood is flowing in and filling those tissues. And that's staying there because of the, the way it's organized. So around that spongy tissue is this very thick tunica that sort of keeps, keeps the blood in there, but also there's these veins on the top, and the veins get compressed.

So veins let blood out, and so when they're compressed, your blood is staying there. It's not coming out. Mm. Until you're done, you have arousal, comes down, then the, the blood starts leaving the penis. The veins open up. The blood leaves. And so it's really amazing that- Wow ... actually, if you look at the pressure that changes in the bloo- in the penis, it's so impressive, it, the, the magnitude of change that can happen with blood flow into the penis and how much pressure goes into that organ.

I mean, there's, like I said, there's nothing like it.

SHAWN STEVENSON: Wow. I'm just ... This is, it's a proud moment, I think. It's, it's, that's pretty awesome. I never-

DR. RENA MALIK: And the, and the clitoris does the same thing, although you can't see it as much. Yeah. The clitoris does the exact same thing.

SHAWN STEVENSON: Yeah. I never looked at it as so majestic before.

DR. RENA MALIK: It's majestic.

SHAWN STEVENSON: So I wanna go a little bit deeper into, you know, just mentioned the, uh, premature ejaculation possibly helping with the Kegels, but there's far more to this story. And again, you, you, you detail so much of this in the book. And by the way, The Hard Truth, you need to get a copy. Staying in control and enhancing climax.

Mm-hmm. This is another topic that you cover in the book. So staying in control. That's something that I think that e- especially men, obviously, would want to aspire towards. And I think that a lot of what happens with sex is, I, I think we're, we, we might feel that we're not really in control of it. Mm-hmm.

It's just, you know, it just, it is what it is. But there are some very specific things that you detail in the book to help men to feel more empowered. Yes. Let's talk about that.

DR. RENA MALIK: Yeah. So there are some people where, you know, they ejaculate too soon, and that is, uh, you know, a, a subset of people where there's a clinical problem, right?

They're ejaculating within one minute or within three minutes. There's a new change in their life, and that's causes a lot of distress, and that's, that's called premature ejaculation, and that's a real, you know, problem that people struggle with. Now, it's only a problem if it causes you distress. If you're someone who likes to ejaculate quickly and your partner enjoys that, it's not a problem, right?

It's great. And so I think that that's important to realize, that there are people who struggle, and it is something that is very difficult for people to struggle with, and they do. And there is sometimes a biological reason for it. And so, while we give a lot of techniques to help you last longer in the book, there are some people where those techniques are not gonna work because there's a biological problem, and that's usually th- a sort of a signaling issue from the head of the penis to the brain that, you know, is, is causing rapid ejaculation.

Um, and sometimes it's more of a behavioral thing. And so we can work through different ways to allow you to last longer. And some of that is, um, there's things that you can do that I, I didn't even realize. And I, I realized as I was studying and learning about these issues, that there was actually techniques that you could do outside the bedroom that would help translate to you lasting longer in bed.

And it was because these techniques would help you sort of understand your body and mind and space, and learn how to sort of balance the sympathetic and parasympathetic nervous

system. So earlier I said point and shoot. Shoot is ejaculation. So it's because your sympathetic nervous system is, is activated.

So we just wanna keep you in that parasympathetic nervous system longer so you can last longer. And so these things were things like high intensity interval training. So there was a study where guys did high intensity interval training for seven minutes a day. Really not a long time. Seven minutes a day for two weeks, and they saw an improvement in how long they lasted in the bedroom And again, it's because they're learning to balance those nervous systems better.

They're learning their body in space and, and how it's moving in space and understanding their i- how their body reacts internally. And so all these things are helping them in the bedroom. Same thing with yoga, also they saw some benefit, and with running they saw some benefit. High intensity interval training was the most benefit in terms of the quickest they saw an improvement.

But all those things were helpful. The other thing is, you know, doing things to help you stay calm and relaxed and a, during arousal, which is, you know, hard to do, but also, like, I think a lot of times we're, like, anxious. You're nervous. You're like, "Oh my God. Oh my God. Is it gonna, is it gonna happen?" And, and that is actually making you ejaculate sooner.

So learning how to stay in that mind space.

SHAWN STEVENSON: So how do you do that? Maybe breathing? And-

DR. RENA MALIK: Yeah, breathing. So diaphragmatic breathing is another technique that actually shows that you can last longer with doing sort of big, deep breaths that are sort of into your diaphragm. And even doing it outside, um, the bedroom has shown to be beneficial.

So it's practicing these techniques when you're alone but also when you're with your partner And then there's other techniques you can use with a partner or by yourself. And so there's things that we prescribe often. There's one thing that's called the start-stop technique. So you go with yourself or with a partner, you get close to ejaculation, but you stop

And then you, you let the arousal come down, and then you go again. You do this three times, and people do this, uh, recreationally. Sometimes they call it edging. Um, but you can use it sort of in a, in a, in a formatted way. And then on the fourth time, you let yourself ejaculate. And over time, this is sort of retraining your brain a little bit- Mm

to allow yourself to last longer. You can add a variation to that, where when you stop, you squeeze the head of the penis, and that also sort of helps dec- se- decrease that, that signal from your penis to your brain. And so that also can help as well. And so these sort of techniques, and you can do it, like I said, with a partner who's, you know, motivated to help you and wants to work with you on that, or you can do it by yourself, and there's even sort of tools you can buy, like fake, like masturbators that can mimic, you know, a real person if you're doing it by yourself, 'cause that's sort of more like what a...

It, it mimics more the real thing than your hand. Um, and so there's, there's ways to do it by yourself and ways to do it with a partner.

SHAWN STEVENSON: Okay. Wow. So edging sounds like penis yoga.

DR. RENA MALIK: It c- people can sometimes take it too far. So there are people where they'll edge for days, and-

SHAWN STEVENSON: What?

DR. RENA MALIK: And yeah. I'm sorry.

There's a whole thing. Sorry. Um, there are people who will, who will take it to an extreme. I mean, there's, like, a, a thing right now, like gooning, where that's sort of what they're doing. For days and days, they're edging, and they're masturbating. And, um, I think if you're enjoy- Is

SHAWN STEVENSON: that gooning? Is that what that is?

DR. RENA MALIK: I- it's sorta, yeah, it's kind of. There's p- there's a, there's a component of that, let's say.

SHAWN STEVENSON: And,

DR. RENA MALIK: uh- Where

SHAWN STEVENSON: does that name come from? Hope it's not The Goonies.

DR. RENA MALIK: No, I don't think so. I hope not. I don't, I don't know where the name came from. Um, but anyway, so i- i- in these situations, if you're enjoying yourself and you're having pleasure, I will never, I will never say there's shame in that.

Like, if you're having pleasure, you're not h- causing harm, by all means, do whatever you want. But in some cases, people, when they're really trying to hold off ejaculation for days, they are now tensing their pelvic floor over prolonged periods of time because they're not relaxing, 'cause they're worried that they might ejaculate.

And that's where I start seeing those other problems come up, where now they're maybe having trouble getting erections. They're starting to go to the bathroom all the time. They're constipated. Mm. They're having pain with erections, pain with ejaculation. And so I don't want people to get into that situation where they've now made a, a dysfunction of their pelvic floor.

SHAWN STEVENSON: Yeah. This is great advice, you know. Because initially when you said, it's just like, well, you know, whatever people are doing that's safe, you know, people meditate for days at a time, you know. Mm-hmm. There's that kind of stuff. And I was thinking about, well, what about, you know, this is different- Mm ... because we're talking about, uh, different machinery.

We're talking about the blood flow. And yeah, it's being mindful of that stuff. But also, again, there's many different ways of being, you know? Yeah. And that's something that also I

appreciate you highlighting Because I know that a lot of people struggle with, like, is there something wrong with me, you know?

Mm-hmm. And of course, there are extremes that are just, like, w- wildly inappropriate, but there's a lot of stuff that if, if it isn't, you know, this thing that you've been, um, inundated with this is how it's supposed to be, I know a lot of people that come to you struggle with, you know, the thoughts and things that, their desires and that kind of stuff, and really feeling like there's something wrong with them.

DR. RENA MALIK: Yeah. And, and I think ultimately if you are having pleasure, your partner's having pleasure, you're not harming anyone, it's consensual, you're not harming yourself or others, it's fine, right? Who am I to judge? You know? I- if, if you are having pleasure and you're feeling good, and there's no harm involved, like, it's okay, right?

The, w- who, w- w- w- I'm not the morality police. Like, you know? I think it's just really important to s- to let people enjoy the way they want to enjoy. But also, uh, I think there's so much harm from shame, and that's part of the reason that I wrote the book. Part of the reason I started being on social media is that I see the product of that shame all the time, where, you know, people are devastated because they feel shameful, and it, it percolates their entire being.

Their sex life is not something that just stays in the bedroom. It becomes this thing that they're, that they identify with as part of who they are, and when that's not working, it, it percolates in everything. They're less productive in life. They're a le- less better partner. They're a less better friend.

And, and so these are things that affect society as a whole.

SHAWN STEVENSON: Yeah The Hard Truth, it's the new book. Is there anything else you want people to know, um, or to look forward to in the book?

DR. RENA MALIK: I think this book, for me, is, is like my love letter to my, my partner, my kids, my dad. Uh, it is what I want all men to have because I think it allows them to understand the,

the levers they need to pull if they really wanna have a great sex life, and not just today, but well into their 90s.

I think the other thing is wherever you are, this book meets you there. So you might be someone who's like, "Man, I've been eating ultra-processed foods for decades, and I'm u- unhealthy, and I have multiple medical problems," this book will still help you. Or you could be, "I've got everything dialed in," and this book is gonna help you sort of keep things staying that way.

And then for the, for the women listening, um, this book is for you just as much as it is for guys because, one, as a woman myself who takes care of my family, I'm the one who makes all the doctor's appointments. I'm the one who encourages them when something is wrong. And in the book, there's things that are relevant to you, too, and we have, like, a little female emoji in there that tells you, like, "Hey, this, this part is ex- you know, appropriate for you to read, too."

Um, so I think this is a, a book where everyone can find help in a place of learning that sex, sexual health is health, and, um, and it's, it's okay to want to have a good sex life, and we should celebrate it.

SHAWN STEVENSON: Yes. It's crazy that we don't have a manual like this- Yeah ... until now, but, you know, truly, you were born to do this.

This is, you know, your gift, as you mentioned. And being able to... A- and, uh, somebody else that I thought about, like a, a, a demographic would be moms- Mm-hmm ... as well. Mm-hmm. You know, to know what your child is dealing with is, and, and to, to be able to share that education in some form or fashion- Yeah ... you know, because again, most young men are just getting educated by the streets.

DR. RENA MALIK: Yes.

SHAWN STEVENSON: And it might turn out, well, largely turns out kind of crazy and dysfunctional.

DR. RENA MALIK: Yeah.

SHAWN STEVENSON: And so being able to also, um, open up this conversation to a broader audience, to help to turn down the value of the shame, because the shame, a lot of the shame creates more dysfunction. Absolutely. You know? And just really feeds into that.

What if we can have more education? What if we can have more communication? And you've done a great job of just also making it very interesting, is a very, like, it's a page-turner of a book. Thank you. And so as of this recording, you also have a ton of incredible pre-order bonuses, like hundreds of dollars worth of stuff.

Talk about that.

DR. RENA MALIK: Yeah. So we have, if you pre-order the book, you get the erectile mastery course, which is, like, everything I tell all my patients to either deal with erectile dysfunction or maintain strong erections. We have two free chapters of the book, so you can start reading right away. We have a live event on October 2nd that if you sign up before October 2nd, you'll have access to that, but even if you sign up after, you'll have the replay for life, and we have seven great world-renowned experts to help us talk about each of the pillars of sexual health that are gonna be there, so I'm so excited for that.

And, um, and then we have, if you are a provider, I have a, um, a CME course which you can get a discount on.

SHAWN STEVENSON: Amazing. And where can people get access?

DR. RENA MALIK: You can check it out on renamalikmd.com/hardtruth, or buy it wherever books are sold. You will find it, um, Amazon, Walmart, wherever.

SHAWN STEVENSON: You're amazing.

DR. RENA MALIK: Thank you.

SHAWN STEVENSON: Truly. Like, to do this work, and also you share your story, because you didn't just show up like this. Yep. You know, having, you know, uh, complicated conversations about penises. You know? Like, this, this is, like, difficult for me, of course. Yeah, of course. You know? And so it's really an incredible gift and a skill, and you're so knowledgeable.

And what you've done is you've taken so many of these, uh, you know, burning questions, very, you know, difficult and very varied questions, and you did the research, and also your clinical experience, and being able to package it up to answer these questions so you have somewhere to turn. And also, I highly recommend people checking out your YouTube channel, which is just incredible.

Like, it's off the charts amazing. Follow you on social media and all that good stuff. We'll put the links. And I just appreciate you. Thank you. Thank you. I know it's a truly a labor of love to put a book together like this. Mm-hmm. And to do it so elegantly, you know, with this subject matter is, it's really special, so thank you.

DR. RENA MALIK: Thank you so much for having me. It's always so fun to sit down and chat with you.

SHAWN STEVENSON: It's my honor. The one and only Dr. Rena Malik, everybody.

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. Share this out with the people that you care about.

You can send this directly from the podcast app that you're listening on, or of course, take a screenshot of the episode, share it on social media. You can tag me, of course. I'm @ShawnModel on Instagram, and tag Dr. Malik as well. She's @ReenaMalikMD, and I know that she would love to see the love. Again, I hope that you enjoyed this conversation.

We've got some epic, epic masterclasses and world-leading experts coming your way very, very soon, so make sure to stay tuned. Take care, have an amazing day, and I'll talk with you soon