

Hey there, beautiful! 🌈 Before you dive in, a quick heads-up: this transcript is a super close-to-verbatim buddy from our podcast, but it's got its quirks! We didn't call the grammar cops on it, so you might bump into a typo or two. But hey, that just adds character, right? 😊 Embrace the wild side of language and enjoy the read! Happy exploring! 🚀



Improve Your Health and Live a Longer Life

Carmen Hecox: Have you started your New Year's resolution? Imagine this, you're sitting at your doctor's office, thinking about kicking off your New Year's resolution to lose those stubborn 10, 20, maybe even 30 pounds. But instead of leaving with a plan to feel great and live healthier, you're walking out with a prescription for a quick fix.

Sounds familiar, right? Today, we're diving deep into the why behind these trends and the real impact on your body, especially your brain.

Joining me is Dr. John Lewis, a health scientist who's been rocking the health world with cutting edge research on nutrition and brain health. Trust me, by the end of this episode, you'll never look at your new year's resolution or even aloe vera, the same way. Let's jump in. Dr. John Lewis, welcome to Create The Best Me. This is a privilege to have you on the show.

Dr. John Lewis: Thank you, Carmen, for having me. It's my privilege and pleasure to be here, actually. Thank you so much.

Carmen Hecox: Great.

Dr. John Lewis' Background and Career Shift

Carmen Hecox: Hey, before we go into what we are going to talk about today, could you please tell the viewers and listeners a little bit about who you are and what you do?

Dr. John Lewis: I'd be happy to do that. I've spent most of my adulthood pursuing health. I would say a combination of both personal and professional interests, both in academics and research, and in my own personal life and exploring different dietary behaviors, dietary supplements, exercise training and really in the pursuit of optimizing health.

The Importance of Health and Chronic Disease

Dr. John Lewis: To me, health is our number one priority, and I don't really care how much money you have, how many homes you own, how many cars you drive, if you're not healthy, what does it all matter, really? And so, you think about health, and unfortunately, a lot of Americans today, we know we have epidemics of chronic disease that really speaks to the idea that people are not putting health, I mean, not even in the top five, you know, let alone the number one priority. I don't even know where people are prioritizing their health with so many people with diabetes and heart disease and cancer and depression and all different sorts of other organ disease. So, I've really devoted most of my adult life to helping people better themselves through health and particularly through their dietary habits and using key dietary supplements and exercise.

I transferred from an academic research career about seven and a half years ago. I quite frankly got burned out on begging the government and foundations and even individuals in some cases for money to do research. It's really not the most pleasurable way to make a living.

And I went into the dietary supplement business. I was fortunate and grateful to have met a couple of people who really not only changed my career, but changed my life in the sense of introducing me to some things that hopefully we'll talk about that just completely changed my trajectory. And with those discoveries, I was able to go into the dietary supplement world.

And that's what I've been doing, running a business for the last few years. So I'm really primarily, an entrepreneur, businessman with a scientific base, but I still have, this nerdy scientific side to me that wants to continue doing research at some point in the future, but research takes a lot of money. It's not something that you can do for free.

Weight Loss and Medication Concerns

Carmen Hecox: Well, being that this is 2025, and you know that everyone's got that New Year's resolution that I want to look my best. I want to be thin. Here's something that I was thinking, because this is why I invited you onto the show, is that because a lot of us want to be thin. A lot of us might go to our medical providers and say, hey, you know, my goal this year is, I want to lose those 10, 20, 30 pounds that I have not been able to get off.

Everybody's doing this, Hollywood's doing this. Why don't you give me some of that weight loss medication so that I can drop these stubborn pounds that I can't seem to get off. My thought is, how are those supplementations or diabetic medication affecting us neurologically?

Dr. John Lewis: That's a great question; I don't even think we know because the research on Ozempic and Wegovy and some of these other GLP 1 agonist drugs is very speculative at this point. It's not, I don't even think it's even really known what some of the other metabolic side effects are, let alone what some of the side effects are related to cognitive function, brain health, central nervous system functioning.

Quite frankly to me, it's like the wild, wild west. And it's one more indictment of the typical Americans mentality of a quick fix. And then also not putting in the work. Like not wanting to address, well, why am I obese or overweight in the first place? Forget underlying, pulling the layers of the onion off and getting to those underlying issues. People don't want to do that. They're lazy. They sink to there are stages of change on, the motivational model that I remember a little bit, from some of my colleagues work where you look at stages of change and then part of that is this so called "Precontemplation Stage" like you said, you have all these people out there that want to lose weight. So they're thinking about it, but it's called Precontemplation because they're really not giving a whole lot of real energy to it.

And then you get to the contemplation stage, that's where you actually think about, well, maybe I need to join a gym, or maybe I need to hire a coach, or maybe I need to hire a dietician.

And then finally you get to the action stage where you actually implement some of those things. So, I think, unfortunately, too many Americans are at that, maybe not even precontemplation. They're kind of going through life and then they see some Ozempic commercial on TV or hear it on the radio or social media or whatever,

and then they think, oh, well that's for me, right? Like they don't do any homework. They have no regard for the adverse effects of this drug. And all of our listeners should remember any material that's classified as a drug; by definition, it has to have side effects. So, remember, just because you think, oh, well, it's a prescription and it's regulated by the FDA, blah, blah, blah; it still has side effects, folks. So, it's going to do something to you that's unintended. And those unintended effects are not going to be nice.

So, for me personally, no one, no human is deficient in Ozempic or any other drug. We have fallen into this Big Pharma's trap, if you will, this Pandora's box of all this messaging, all this advertising. In fact, I hope, talk about the new year and what's going to happen. I hope with the new presidential administration, if, RFK Jr. gets appointed as HHS secretary, I hope that some of the things that he and President Trump are talking about taking advertising of drugs off of TV. I hope that happens because we are one of only two countries on the planet that allow that. New Zealand being the other one. It's time we got rid of all of Big Pharma's tentacles out of our culture. We're way too focused on treatment with medication rather than prevention of disease in the first place, and we can do that with nutrition, dietary supplementation, and exercise for the most part.

So, all of you out there, you know, again, looking for that quick fix with a drug, you have it completely wrong. You need a total 180-degree change in your mindset.

Fasting and Dietary Strategies

Carmen Hecox: Yeah, well, I, stop and think of like, some of us might try, fasting. You know, they fast, you might fast for maybe two weeks and then nothing happened other than you are running around like a zombie because you're so dang tired.

Dr. John Lewis: Have you heard of, um, it's called the "Fasting Mimicking Diet". Have you heard of that one?

Carmen Hecox: No.

Dr. John Lewis: So that's actually, been studied by a guy out in your neck of the woods, Valter Longo, he's a longevity scientist at the University of Southern

California. I really love Longo's work because he doesn't appear to be one of these people conflicted or paid off by Big Pharma. He's actually looking at nutritional strategies to help people live a healthy life, live an optimally healthy life, extend longevity.

And one of the things Longo and his colleagues have discovered is that in a 30-day period, rather than going on a perpetual intermittent fasting diet where you're only eating say for six hours, seven hours, whatever that window is in a 24-hour period and then you just do that perpetually.

What Longo and his colleagues have shown is that you can do a fasting period of five days. So out of any 30-day period in the month, you take five days and then you fast during those five days, and the metabolic and hormonal and endocrine and cardiovascular and all these different effects within that five day period translate to the rest of the month.

And so it gives people an opportunity to exactly counteract what you just said you start fasting and you think this is the thing that you really need to do and it's going to be beneficial, but then you start feeling like crap and then what's the next thing that's going to happen once you start feeling bad is it's going to seriously affect your adherence to that, or that compliance to that, and so you're probably going to quit. But with Longo's intermittent fasting style of this fast-mimicking diet, you really can take advantage of exactly what you're referring to, but you only have to do it for a five-day window or period out of any given 30-day month or 30 day period.

Carmen Hecox: So, is that sort of like a period where you're resetting your body?

Dr. John Lewis: Basically, yes. So, you still would do either like a water fast. Some people are out there advocating for dry fasting, which to me is a bit extreme. If you're like grade three obesity, you weigh 450 pounds or something; maybe a little bit of dry fasting here and there would be something that would help you continue losing weight.

But I don't, to me, I'm not a big fan of that. I think Still drink water, at least, if not a little bit of vegetable juice or something. But, doing this fasting period in a five-day window out of a 30-day window, to me, would help people. And you don't do it necessarily, like, you know, all at once, right? Like, try to baby step it. Like, rather than just doing, having this mindset of, okay, I'm going to do all five days

starting tomorrow, just do one day. And especially for somebody who is very overweight, who struggling with food addiction. They really can't get a handle on, you know, whatever that is. I mean, there's obviously some switch that probably they need some psychological support. But dealing with those kinds of things, just take it easy on yourself. You don't have to go hog wild right off the bat. Just do one day and then see how your body responds. And then maybe the next week step it up to two days and then slowly baby step it to get to a point to where your body will respond to it.

And also remember, the other thing is that it takes time for our cells to turn over. I mean, we have the gut turns over very rapidly. The eyes turn over in some cases in years. I think the liver to entirely turn overtakes something like four years. So, depending on the organ and the organ system, there's a very wide range of how much time our body takes to turn over.

And the other thing that I like to tell people too is, and this goes back to some of my exercise training days, is that usually if you look at the exercise science literature, most any study that will have some level of validity on one level is that you want to give the body about a 90 day period to respond to any kind of new stimulus intervention, training, whatever you want to call it.

So, remember that it takes time for the body to adapt to new strategies and new behaviors. This isn't like getting a headache and then you take a Tylenol and 10 or 15 minutes later, your body responds to that in some way and your headache goes away.

This is using nutrition or other behavioral strategies that take time for the body to adapt. And so, I always encourage people to be patient and be patient with themselves so that they don't get in a hurry.

Most people don't become obese like that either, right? You didn't become obese overnight, it took you years, if not usually decades, for people to become obese. So, give your body time to respond in the other direction.

Carmen Hecox: Mm hmm. But you know, I guess I get hung up with, cause one, we want everything quick and if my friend went and took this drug and you know, she lost all this weight in less than three months. But then, you try this diet, this diet says only eat high protein, no carbs. This other diet says do this and that. And I look at the big picture I'm like, okay, well to trying all these different diets to try to

see which one's going to shed that fat. Instead of thinking about losing weight, and let's stop and think about how is that affecting my brain?

The Role of Carbohydrates and Sugars

Carmen Hecox: And I think about that because sometimes when I've been on some of these diets where I've deprived myself of carbs, I found that I was gone, brain wise, I was just like my brain was non, it's like there was nothing there was mush.

Dr. John Lewis: One thing that people need to always remember beyond oxygen, which is our first nutrient. The brain wants glucose. That's the brain's preferred fuel to function. So, if you go completely devoid of carbohydrates in your diet, you're actually not doing your brain any favor because now your body is sending signals to convert uh fat, muscle, other tissue into glucose, this gluconeogenesis process to try to still get the brain's craving or desire to feed off that glucose.

So, I've been eating a plant-based diet, this is my 27th year of eating a plant based diet. So, when I hear these people talking, especially the carnivore crowd, I mean, that's another level of, that's to me is just so extreme. I don't even understand that. But obviously, the paleo keto crowd, and much more so the keto crowd, they've focusing on all this fat and all this protein to get the body to turn, these fats into ketones that the brain will then be basically forced to utilize for its fuel sources.

But to me that, we don't have to go down the road of ethics or morals or animal rights. I mean, there's so many different avenues to discuss about eating animals or not. But, to me, I think even though carbohydrates are not essential in the sense of an essential fatty acid or an essential amino acid that we do need from the diet, we cannot synthesize those things internally.

But still, there is a reason why our body prefers to utilize glucose as its second fuel source besides oxygen. So, I have a hard time wrapping my mind around why people are so opposed to carbohydrates because, I mean, we also store carbohydrates in our liver and in our muscles for immediate fuel source.

So yeah, you can go completely devoid of carbohydrate, and I mentioned Longo just a moment ago, interestingly enough, in some of Longo's other research, he has showed that the way you improve longevity either in rodents, and then it's a bit

speculative because it's obviously very hard to do longevity research in humans. You just cannot get humans enrolled in a study long enough to really make definitive claims.

But in the lower animals, what Longo and his colleagues are showing is that protein is actually the switch where you can turn on and off your longevity. So, in other words, if you're eating a lot of protein, you're actually turning on all of these growth factors that ultimately contribute to atherosclerosis, carcinogenesis, and a shorter life.

And then also, taking it one step further, if you switch from animal protein to plant protein, it's actually less efficient and it actually also increases your longevity. So, there's a lot of research out there that very much flies in the face of all of these paleo, keto, carnivore people that are just constantly pounding the drum about protein and, how that's the primary or the most important fuel source for humans.

I mean, there's just a lot of research that completely contradicts what these people are saying.

Carmen Hecox: Yeah, and I think about back when I was a child and I remember in school, they used to talk about the food pyramid. You know that you need to have all these different types of food groups daily and certain servings daily. And in that pyramid, carbohydrates, we're getting carbohydrates, or at least the way I saw it, is carbohydrates are coming from grains and they're also coming from vegetables.

You know, because you're getting good carbs, but in this pyramid, they also said fruit, and a lot of people tend to, oh, I can't have that. I can't have fruit, it has sugar, and that sugar is bad.

Dr. John Lewis: Well, sugar is also one of my favorite words because of all the research that my colleagues and I have done on polysaccharides from aloe vera and rice bran. So, sugar to me is potentially, if not the most misused word, it's certainly one of the top five. Every time I hear somebody say sugar is bad for you, it absolutely drives me up a wall.

The reason being is that all sugars are not the same. So, for example, a monosaccharide, mono one saccharide sugar, one sugar molecule like high fructose corn syrup. Sure, most people, we agree that's not something you want to consume

every day. If you're consuming lots of high fructose corn syrup, you're probably setting yourself up for all sorts of metabolic complications later in life.

If you have a little bit occasionally, and I don't know what a little bit is, but depending on how obsessive and compulsive you are, maybe you wouldn't have any. I personally. I don't consume it, just as a personal disclosure. I don't consume it. If I do, it's somebody has given it to, they've slipped it into a food that I wasn't aware of that contained it.

But I certainly, if it's something that I'm buying at the store and I read the label and it says high fructose corn syrup on it, you can guarantee I will not buy it. And then you have disaccharides, DI2, saccharide sugar, two sugar molecules like sucrose. Obviously white table sugar is very commonly used as a sweetener.

And then you have these polysaccharides, poly many saccharide sugar, many molecules of sugar. So, these complex sugars from aloe vera and rice bran, they have hundreds of these glucose units that are attached together by these very sophisticated complex, we call them glycosidic bonds. And I would put these up against anything else known to humanity in terms of what Mother Nature provides for us for healing, for health promotion, to optimize our health. They are just incredibly dynamic, efficacious materials that, again, if you're caught up in the animal food consumption movement, you're going to think, oh, rice bran, I can't eat that. Oh, aloe vera, that's also a plant, I can't eat that.

But that's a very limited and a very narrow view of not just nutrition, but life itself. As a scientist, as a writer, as somebody who's very careful about the way I use language in my own life, I'd never, again, it just drives me nuts when I hear some so-called expert talking head say, all sugar is bad for you. That's number one, it's very ignorant. And number two, it's just not factually true.

Carmen Hecox: I was thinking about, like, I always tell my husband, you need to have more, berries. Because they are good in antioxidants and because you're a male, I want to make sure you take care of your prostate, eat berries. But then you have people saying, no, you can't have it because it's sugar. And I'm like, well, then how are you going to get your antioxidants?

Dr. John Lewis: Exactly. Exactly. The amount of sugar in a handful of blueberries or blackberries or strawberries or raspberries or elderberry or any other berry as to

your point; I mean they have all sorts of incredibly beneficial phytonutrients like antioxidants and the amount of fructose in that serving of fruit is negligible.

It's not eating that every day the benefit that you get from all the other health promoting aspects of those fruits compared to what bump you have in your glucose level or your insulin level from eating that is ridiculous. I mean, to me, it's not even a comparison. I've yet to read an article, peer reviewed scientific article that says eating blueberries causes cancer, causes heart disease, causes diabetes, causes Alzheimer's. I've yet to read that article. That article does not exist. If it does, it's one in, I don't know, a million. Like literally it's, that finding would be like, that would blow me away if there's actually an article out there that says that.

Carmen Hecox: And so being that this is the new year, what should women be thinking about to live a healthy life? Lose the weight that they want to lose, in a way that is also going to benefit their body entirely, especially their brain. And I say their brain because as we reach menopause, we start to get brain fog. And I always fear that brain fog could turn into dementia.

Dr. John Lewis: Brain fog is an interesting topic that it's, it's very abstract and nebulous at this point. I haven't, If you have an article that you could refer to me or send to me after our conversation, I would love, love to see it. I haven't seen any research suggesting that whatever this brain fog is, it's still sort of, actually, it's like dementia. It's still, or more specifically Alzheimer's, it's still not conclusively understood what even causes Alzheimer's disease. But unfortunately, a lot of people are walking around with this foggy, not clear, lack of focused head or mind. And so, there's clearly millions of people that are having this today.

But I think for people that, you know, if you're referring specifically about people, women who want to lose weight, to me the first thing is you got to get your diet under control. And here's one thing that I think people, men and women do make the mistake of thinking about if they're overweight or even obese is that they can exercise themselves to lose weight.

That's actually untrue. There is quite a bit of research that shows that you would have to exercise an enormous amount of time and even intensity at a certain level to really achieve sustainable weight loss. So, what weight loss really comes down to is what we do when we bend our elbow, open our mouths and stick something in it. So, you really have to get a grip on what your diet is. And unfortunately, as it kind of pains me to say this a little bit, there really is something to the effect of the

caloric balance, even though a calorie is not a calorie. I mean, 100 calories of Oreos is not the same as 100 calories of broccoli, obviously.

I mean, there's clearly a difference, not on an energetic level, but on a nutritional level. So, I'm not saying it, that way to be flippant or not appreciative of what the context is. But the reality is, let's say your basal metabolic rate, which is the amount of calories that you burn just lying in bed all day. That's literally did not even get up out of bed, take a shower, go to work, do whatever you do for the day and then come home. If you just lied in bed all day, there is a number of calories that you will burn just doing that.

So, you take your basal metabolic rate. For a lot of people, that's probably around a thousand calories, maybe 1,200. Of course, that's dependent on and related to how much you actually weigh, how big you are, or little, as the case may be. And then you take whatever amount that you would burn if you're not exercising every day, obviously there's a deficit there. But if you're just living life, you're driving to an office, you're sitting there for eight or nine or 10 hours, and then you come home and you have dinner with your family and spend a little time with them before you go back to bed, you might burn another few hundred calories.

Again, it's, I'm just being very general here. These are certainly not numbers I want anyone to hold me to. I'm just kind of giving an example. But let's say your basal metabolic rate plus whatever minimal amount of calories you burn every day is 1,800. Let's just for argument's sake. So, what that means is, if more or less every day your body is expending 1,800 calories, you need to be below that.

And again, you could eat 1,700 calories every day of Oreo cookies and you would start to lose weight, but you will hit a point where just eating 1,700 calories every day of Oreo cookies is going to start to then kick in other problems that you, again, wouldn't have hoped to have happen to you. So, you have to eat a hypocaloric diet, not hyper, but hypo, meaning under the amount of calories that you expend every day.

And then over time, you will lose weight. I mean, that's just physics. That's not anything debatable or argumentative. If you're taking in less than what you're expending, you will lose weight. There's no argument to that. But again, it's what you're putting into your system that will help you to either lose weight much faster, have better outcomes in terms of with different biomarkers that you could look at that would be indicators of your health.

And then that's where you can really start to see, you know, and again, going back to an earlier comment about being patient with yourself, allowing your body to do its job, allowing your body to go through the healing process. But that to me, Carmen, is the most important thing that anybody needs to do in terms of if you are overweight or obese, getting on the track to getting back to a normal level of weight. It starts and ends with what you put into your mouth. I'm not saying don't exercise. But again, most people are just not going to be able to exercise enough to the intensity level enough to really make that the number one factor. The number one factor is what it is that you're putting into your mouth.

Carmen Hecox: So, let's say you're either putting in the 1,700 calories of Oreo cookies or you're putting in 1,700 calories of fruits and vegetables.

Dr. John Lewis: Okay,

Carmen Hecox: Would you see a difference?

Dr. John Lewis: You absolutely would see a difference because again, remember there are two very important things about everything we put into our mouth. The one side is the macronutrition, the protein, the carbohydrate, the fat, but then the other side is the micronutrient content. So, with the broccoli and the healthy grains, everything that's green, some berries, mango, banana, all that plant material. It's not just the macronutrient quality and content; it's all the micronutrients. And those things are so important to how our cells function and how we really create a healthier version of ourselves. If we're only consuming those 1,700 calories of Oreos every day, we are going to lose weight, but we're also probably going to start setting ourself up for all sorts of nutrient deficiencies that will then lead to other problems, not just being overweight.

So, that's where it really is the difference. Again, you could lose weight just eating 1,700 calories of Oreo cookies every day and you probably would enjoy it. I mean, I guess, you know, for all of us out there that have a sweet tooth, you know, people enjoy eating sweet foods, or most people do. But again, over a longer period of time, you are going to be nutritionally deficient.

Carmen Hecox: And then you're going to have other problems, like maybe your hair is going to start falling out. Or your heart is going to start beating real fast because you've accumulated a lot of that visceral fat in areas where they shouldn't be.

Dr. John Lewis: That's right, there'll be a whole host of issues that will come up from that. You mentioned skin of course. Your skin is your largest organ, right? So, you want to be hydrated. We didn't even talk about drinking good, clean, filtered water every day. That's obviously very important as well. So, making sure that you drink plenty of water every day. You want to make sure that is also a cornerstone.

Nutritional Supplements and Their Benefits

Dr. John Lewis: I mean, for me, I didn't, we didn't really go down this road too much, but you have diet, and again, there are certain dietary supplements that we all need, like it or not. And I know there are plenty of people out there that believe you only need to get your nutrition through food. I have several arguments against that, but water is a part of that equation on the nutritional side. And then of course, exercise and physical activity is another foundation or pillar in my own life. And then of course you have other things like managing your stress properly. um Sleep obviously, we know we have millions of Americans today who either, they don't necessarily have insomnia, but they have disrupted, not refreshing sleep. That's a huge problem for people. You mentioned something that leads you down the path of dementia or Alzheimer's. Insomnia is certainly one of them because if you cannot sleep a solid six to eight hours every night, you're not letting your brain; the body clears out the brain's connection to the lymph system. Is that you create all this metabolic waste when you're awake all day.

And then when you go to bed, not only are you resting, but you're allowing the body to help cleanse itself. And part of that cleansing is pulling out all of that metabolic waste out of the brain and then excreting that out the next day. So, if you're sleeping poorly, all of that cleansing gets disrupted.

And then eventually over time, all that metabolic waste builds up in the brain, and that's one of the theories behind why people get dementia in Alzheimer's disease. So sleeping is incredibly important.

Carmen Hecox: Yeah, and we didn't touch on it. I am a big proponent; I don't believe that I'm going to get all the nutrition I need from the foods I eat. And so, I take tons of vitamins every night. I take some in the morning and then I take some in the evening. So, I'm not taking a bunch all at once. But I remember one time my mother-in-law, she saw me taking my vitamins and she says, I'm not like you, I don't take a lot of pills. You know, I only take two pills, that's it. And I'm like, oh

honey, these are not pills because I'm sick. These are vitamins so that I don't get sick.

Dr. John Lewis: That's right.

Research on Aloe Vera and Cognitive Health

Dr. John Lewis: Well, we haven't even really touched on my research today. But the research that my colleagues and I conducted on aloe vera, and rice bran ultimately led to the formula that I now sell as, part of my business, this flagship product that we have called Daily Brain Care that contains the polysaccharides from aloe vera and rice bran.

Now, if you're somebody like me, I eat brown rice most of the days a week. I don't know that I eat it every single day, but if you eat brown rice, you do get some of that rice bran in the brown rice. If you eat white rice, unfortunately that has zero rice bran, so you're getting none of those polysaccharides.

And then, I don't know about you, here in Miami, we have aloe vera growing in our backyard. But I'm not out there, snipping leaves and sucking down the gel. It tastes nasty, besides the fact that it's 99 percent water. So, you could not get enough polysaccharide content in that gel to have any therapeutic or physiological benefit just by consuming it that way.

But if you take a product like ours or some other similar competitor's product, you get those concentrated polysaccharides in a dose that your body can then benefit from that again, you don't get from food.

It's the same thing with vitamin D. We've got like 70 percent of Americans are either insufficient or deficient in vitamin D. So, if you're not getting out in the sun at least 10, 15, 20 minutes every day or every other day, my goodness, take your vitamin D3 supplement every day, it's inexpensive. And vitamin D, we know, is so important. It's actually not even a vitamin, it's a prohormone. It's a, somewhere between a vitamin and a hormone.

But it interacts with over 4,500 different genes. It's way beyond just for bone health. It's literally head to toe. I mean, it interacts with everything in our body. And yet, many people are not getting enough vitamin D in their diet. So again, if

you're not getting it from the sunshine or from your food by all means take it in a dietary supplement.

Same with magnesium, many people are magnesium deficient. My goodness, take your citrate or your glycinate or your propionate or one of the good forms of it and make sure you get enough magnesium every day.

Carmen Hecox: Let's talk about, an aloe vera, because I don't want people to think that because I remember when I was a kid, my parents were big proponents that aloe vera it's the healing property, and it's what everyone needs in order to get better. I remember my mom used cut a slice of the aloe vera, take off the outer skin, and she put it on my dad's head because he was losing his hair. Because they were so convinced that this was good. Or they would go out and buy an aloe vera jug, and it was so gross. My father used to drink this stuff, and it doesn't smell good. It didn't, and he used to make faces like it didn't taste good. But your formula is not that.

Dr. John Lewis: Correct. So, we've taken all the hard work out of the equation. Unlike, again, talking about snipping leaves and sucking down that gel, I mean, it's just like you said its smells bad, it tastes even worse. Nobody's going to do that. Only the hardcore people are going to do stuff like that.

But it's 99 percent water. So, imagine how much of that gel you would have to drink and consume to even get enough polysaccharide content. But we've known literally for millennia, humans have been using aloe vera for millennia. Obviously, somebody at some point in humanity's journey said, hey, look at that plant. Let's see what, what it does for us.

And fortunately, they did. So, the research, not just from our work here at the University of Miami over the last almost 20 years, but scientists from around the world have been looking at how, in particular, there are other things in the aloe vera, not just the polysaccharides. Actually, it has amino acids, fatty acids, vitamins, minerals, elements, cofactors. I mean, it's literally a nutritional powerhouse.

But in particular, what we've focused on is the polysaccharides. So, you first dehydrated, strip out some of those other materials, and then you concentrate those polysaccharides into a dose of a few hundred milligrams, maybe even a gram or

two per day, depending on your age and your health status or whatever it is, health challenge that you're dealing with.

So generally speaking, I would say that these things function as like signaling mechanisms for the immune system, among other things. I mean, they have incredibly anti-infectious effects like against virus, bacteria, fungus, any kind of pathogen. But generally speaking, these things actually signal to the immune system and there are so many different components and subsets of our immune system, it's just fascinating how our immune system works. It's actually way more than our first line of defense against infection. It does so many other things.

But when we consume these polysaccharides, again, it just signals to the immune system, hey, look for this, hey, rebalance that, hey, turn on inflammation, hey, turn off inflammation, it's just incredible. And again, just in our research, we published four articles from our Alzheimer's study, three articles from our MS study. And Carmen, what we showed with our formula in the people with moderate to severe Alzheimer's disease, at 9 and 12 months on our formula, they had clinically and statistically significant improvement in cognitive function.

Now, that's unheard of. You can compare our work to any type of diet. Certainly, forget the five FDA approved drugs for dementia. They don't do anything. You're lucky if you sort of have stabilize the progression of the disease for a few months, but then after that, the person continues falling off the cliff.

So, they don't do anything, any type of diet. I don't even know if there's any real work that's been done looking at a diet in people with moderate to severe Alzheimer's. There's some dietary supplement, nutrient research, but an entire diet, I haven't seen it.

I know Ornish's group did some work. They just recently got some notoriety over a study they conducted in people with mild cognitive impairment, but that's way before moderate to severe Alzheimer's disease. That's not even dementia; that's a different diagnosis. But compare our work to any type of diet, any dietary supplement, exercise, hyperbaric oxygen, acupuncture, red light therapy, sound therapy, music therapy, regardless of any other type of therapy or treatment, do your own homework on PubMed. Go to pubmed.gov. You can search the National Library of National Institute of Library of Medicine. And that's where basically any journal worth its weight in salt is going to be indexed. You do your own

homework, don't take my word for it. But you will not find any other research that showed the same effect that we did.

So, for any of your listeners who have had any person, his or her family with Alzheimer's, you know exactly what I'm talking about. It's absolutely the worst. In my opinion, it's the worst fate. Like I would rather have cancer or heart disease or anything else, but to have Alzheimer's to me is just the absolute worst.

And it's now the sixth leading killer of Americans. I say, we as a scientific community we can't even come up with a consensus on what causes it, let alone what to do for somebody with it. But when you think about how poorly efficacious the five FDA approved drugs for dementia are for treating people with Alzheimer's and what we showed, again, clinically and statistically significant improvement in cognitive function, that's unheard of.

And I also want to make sure that people are clear, please, no one go from our conversation today and say, oh, Lewis said you could use nutrition to treat disease. I'm not saying that at all. What I am saying is that we use nutrition to provide the raw materials that the body needs, that the genes interpret. When you stick something in your mouth or when something gets absorbed through your skin the genes interpret that information. That's coded information that the genes look at and say, hmm, what do we do with this?

And so, then they instruct the genes instruct the cells in how to function once they receive that information.

And so, when you provide, the raw materials like these polysaccharides to the body, the genes recognize those things. It's like giving your car engine rocket fuel. It does incredible things because it turns on all of these healing components and healing processes. Again, this is not my opinion. This is what we've actually published in our work.

So that is a far different paradigm from taking a drug where you alter a metabolic pathway to treat a symptom of a disease. That's the pharmacological model. The nutritional model is completely different. So, please don't anyone put words in my mouth and say that I was referring to using nutrition to treat disease. This is a far more fundamental foundational approach than that.

Carmen Hecox: And I think something important to add here is that, and I want people to know this because we've seen this, Dementia, Alzheimer's is not an old person disease anymore. Because I have seen, and I have read that people as early in their mid-40s are currently being diagnosed with dementia which is the main disease and then you have all the other cognitive diseases that come from it.

Dr. John Lewis: You're absolutely right. This type of neurodegeneration doesn't, it's like obesity. It doesn't just happen like that. It starts decades before and unfortunately, with neurodegeneration, we can't see it. We might start recognizing, well, wait a minute, she sounds a little funny. What was wrong with her? She looked a little off or, you might have subtle clues like that or cues.

Unlike obesity where you can, you know, you really see, wow, like so and so got really obese. You really see it on the outer surface, but with neurodegeneration, it's a lot more subtle. And to your point, it's now being thought that neurodegeneration actually starts way younger in life than what people had originally thought, say 10 years ago, where maybe, up until about 60, you were okay, and then it really kicked in. No, that's not what's happening. It's actually kicking in way earlier. And so, when you look at your life, and I don't know how many of your listeners are say, you know, late teens or early 20 somethings, but you know, when we're at that stage in life, we think we're invincible. We can basically treat our body any way we want it to. No problem, I wake up the next day I keep going. That's the time in your life where you really need to start making your behaviors foundational to set yourself up for the rest of your life to be healthy and not end up with diabetes, not end up with heart disease, cancer, dementia, any other type of neurodegeneration, certainly overweight, obesity.

I mean, all those things will start kicking in way earlier than you might think, and you're not actually as resilient as you think. It's just like what Hippocrates said way before our calendar started, let food be thy medicine. That's really how we need to look at nutrition. Yes, of course, we want to eat something that tastes good and is pleasing at that level. But at the end of the day, everything that we stick in our mouth is ultimately, as I mentioned a moment ago, coded information to the cells to function either to our benefit or to our detriment. And so, please remember this. I mean, this is so important and I'm glad you've made that point because it's not just about neurodegeneration.

It's actually everything. We want to be as healthy as we can through the remainder of our lives. And of course, there is no cure for mortality, but at least looking at

your life in terms of quality of life and health span rather than lifespan and then how we achieve that. And again, it all starts with nutrition. It all starts with what we put in our mouths.

Tips for New Year's Resolutions and Weight Loss

Carmen Hecox: So, for people that are ringing in the new year with their new year's resolution, what are three tips that you would give them to lose weight on the right foot?

Dr. John Lewis: Three tips. Well, I alluded to this a bit you really have to be objective as much as you can. Scientific, maybe that's taking it to a little bit of an extreme level for most people. But the only way that you can really evaluate if some program or some treatment or some intervention works is if you have data, right?

You can think that something's working, but if you're not actually tracking results, to me, you're just kind of fishing in the dark. You really need data. So, what I would suggest people to do, and of course this may be dependent a bit on finances or, whatever and if that's true, then, you know, please forgive me here.

Dr. John Lewis: But I would say for people, thinking about New Year's resolutions and starting off 2025 in a direction of trying to get healthier, we'll take some data. Like go to your primary care physician or whoever your preferred healthcare provider is and say hey, I want some blood work. I want some anthropomorphic data tested. I want to have a baseline so that I know that when I start making changes, I can say, okay, we're doing this right now in January, we're making all these assessments. So, February, March, April, I can come back in April or May or so after I've given my body 90, 100, 120 days. And then I can collect the same data again and reevaluate. Because again, that's really the only way you're going to know if whatever changes you've made have actually worked.

So, I would say a very good tip is to collect data. Like again, make it as objective and as unbiased as you can so that you actually know what it is that you're doing actually works.

Along those levels, tip number two would maybe be to reach out to somebody who, either through a family member, one of your close friends, somebody in your circle who can help you with coaching. I mean, I think a lot of people, I mentioned food addiction earlier in our conversation and I didn't mean to be dismissive of that because I believe that it's true that we have more food addicts than we do cigarette smokers, tobacco users, alcoholics, illicit drug users. There are way more people addicted to food than there are to these other substances.

So, a lot of people really need that type of coaching or therapeutic support from you know, somebody, a social worker, a psychologist or whatever.

Again, if you can afford to do that, if you have it within your means, if you have it through your insurance, man, get yourself some psychological support to help you work through these changes in the way you look at food, the way you look at activity, the way you look at putting health as a very key component to your life. Because again, I would argue without good health, you really don't have a lot.

And then number three, take personal responsibility. I mean, to me, just like we have too many Americans looking for the quick fix, looking for oh, well, just give me a drug. I don't care how I got here in the first place but just give me that drug. Take personal responsibility for yourself. When you look at the state of our country, and I'm talking about, spending 4 point, whatever that number is now, 4.4 or 4.5 trillion dollars per year on what we call a healthcare system, which is not what we have, we have a chronic disease management system. But every single one of us, all 300 and whatever we are today, 330 million people, every single one of us, is contributing to that number in some level. So take personal responsibility for your own health because it's not just enough to say, well, I'm going to go to this person in a white coat who has doctor in front of his or her name, and I'm going to just take it for granted that everything that person tells me is the gospel truth or the way it should be.

No do your own homework! Take personal responsibility for your own health and then apply it because it's ultimately up to every one of us to reverse this crazy trend that we have going that's completely unsustainable. We're one of the unhealthiest countries in the world and so we've got to reverse all of this otherwise our country is going down the tubes, not due to terrorism, not due to climate change, not due to all these other things that people get whipped up into a frenzy about. We're going down the tubes because of chronic disease. And that starts with personal

responsibility for each one of us. So, take personal responsibility for yourself and your health.

Carmen Hecox: Very good advice.

Upcoming Projects and Final Thoughts

Carmen Hecox: John, what are you currently working on and when can we expect to see your future projects?

Dr. John Lewis: Well, I'm all, I'm always working, right? I'm always beating my drum of helping people get healthy. At Dr. Lewis Nutrition, we've got some new products, coming out this year. So, [Daily Brain Care](#) has been our flagship product for all these years now, based on all this work that we've done.

But we've got some exciting new products coming out with some really cool technology that enhances the bioavailability and the absorption. We mentioned vitamin D a little while ago, so, we have the ability to take this technology that's all natural to enhance the ability of vitamin D to do its job in the body.

So, we're going to be launching a vitamin D3K2 product, a curcumin product, an EGCG product, which is a green tea extract.

We've got daily immune care coming out. We've got daily eye care. So, we've got a number of new products that we're launching. Hopefully, well, definitely, D3K2 and the Curcumin will be this quarter.

And then hopefully by second quarter of 2025, we'll have those other products. So that's really what I'm focused on at this point is bringing new products to the forefront that can help people again, achieve health because Daily Brain Care is an awesome product, but you need other things to go along with it. It's not intended to be like a Centrum or a One A Day multivitamin. It's really a polysaccharide focus. But you still need lots of other things as well.

So that's really my focus at this time up until the point where we do have the money and the funding to do more research but continuing to leverage the science that we already have and then bringing more products to the market is what we're focused on at [Dr. Lewis Nutrition](#) right now.

Carmen Hecox: That's exciting and I love that you're coming out with the vitamin D3 formula because I always get on my husband, I ride him like a roller coaster. This is just something I say I have nothing to stand on, but I always tell him you need to take at least 10,000 UIs of vitamin D3

Dr. John Lewis: Yep, I agree. It's very important. And get your and get your D3 checked once a year. I mean, I try to check mine about once a year. I try to keep it around the 60 range. I know that's a debatable value as well. So I've got a couple of friends who they think it should be over 100. But I think if you're at least in the 50s and up, you're at a good level.

So, for anybody out there who's wondering about what their vitamin D level is, please go get it checked. It's not a lot of money; get it checked and then start addressing it if you are low.

Carmen Hecox: I just did that this morning. That's what I was doing when we were emailing each other.

Dr. John Lewis: Excellent. Fantastic.

Carmen Hecox: Yeah, John, it has been a pleasure to have you on. I will make sure to link all of your information in the show notes so that people can hop on your website because you have a really awesome [video about how brain health supplement changed a woman's life](#). And I think people need to watch that.

Dr. John Lewis: Thank you so much. It's been a pleasure for me being on your show, and I look forward to seeing you again soon.

Carmen Hecox: Alright, thank you.

Wow, wasn't that eye opening? Who knew the key to better health and brain power might just be in something as simple as rethinking your nutrition and supplements. No quick fix is needed. And remember, if you're ringing in the new year with goals to get healthier, take Dr. Lewis's advice. It starts with small, sustainable steps, not shortcuts. If you want to learn more about Dr. John Lewis and watch the amazing video I mentioned at the end of the show, head on over to createthebestme.com/ep098. Trust me, the video shows the incredible power of Dr. Lewis's Daily Brain Care supplement. You don't want to miss it.

Next week, I have an incredible episode just for you. So don't forget to hit subscribe and share this episode with a friend who might need a little inspiration.

Until then, keep dreaming big, take care of yourself, and remember you are beautiful, strong, and capable of creating the best version of yourself. See you next week. Bye for now.