

[Music]

Female: Welcome to Conversations on Health Care with Mark Masselli and Margaret Flinter, a show where we speak to the top thought leaders in health innovation, health policy, care delivery, and the great minds who are shaping the healthcare of the future. This week, Mark and Margaret speak with Dr. Sanjay Gupta, Neurosurgeon and Chief Medical Correspondent for CNN. He has launched a new series called “Chasing Life” which takes viewers to far flung places around the world that enjoy extreme longevity and exceptional quality of life. From Okinawa, Japan, we’re living to 100 commonplace to Norway, deemed the happiest country in the world. They’ll learn the secrets and the science behind these so called Blue Zones. Lori Robertson also checks in, Managing Editor of FactCheck.org, looks at misstatements spoken about health policy in the public domain, separating the faith from the facts. We end with a bright idea that’s improving health and well-being in everyday lives. If you have comments, please e-mail us at chcradio@chc1.com or find us on Facebook, Twitter, iTunes, or wherever you listen to podcasts. You can also hear us by asking Alexa, play the program Conversations on Health Care. Now, stay tuned for our interview with CNN, Chief Medical Correspondent, Dr. Sanjay Gupta on Conversations on Health Care.

Mark Masselli: We’re speaking today with Dr. Sanjay Gupta, Staff Neurosurgeon at Emory Clinic in Atlanta and Multiple Emmy-award winning Chief Medical Correspondent at CNN. He has written several books including Chasing Life, which is the basis of a new series running on CNN, exploring so called Blue Zones around the world with exceptional health and longevity. His current HBO Documentary, One Nation Under Stress examines America’s epidemic of stress. He was named one of Forbes Magazine’s 10 most influential people. He earned his medical degree from the University of Michigan School of Medicine. Dr. Gupta, it is a pleasure to have you on Conversations on Health Care.

Dr. Sanjay Gupta: Thank you very much.

Mark Masselli: You know, first of all, you’re a great storyteller and that is on full display in your compelling new series on CNN “Chasing Life” where you explore the so called Blue Zones in far flung places around the world, known for their exceptional health and longevity, and you really broaden the viewers’ horizon by taking them to places in Bolivia where there’s virtually no heart disease to Okinawa where aging past the 100 is not uncommon. You go to the happiest country on earth Norway to unlock the secrets and I’m wondering if you could tell our listeners about this journey and what evidence you’ve uncovered in your exploration?

Dr. Sanjay Gupta: Well, as you mentioned, I practice medicine in the United States. I

love our health care system. I think there's a lot to love about it, but we also recognize that we spent \$3.5 trillion dollars on health care every year in the United States and life expectancy has gone down three years in a row in the United States. It's sort of raised this question for me and I think a lot of people, are there things to learn from other countries around the world, places where they are living longer, yes, but also happier and healthier lives. Why are they continuing to go up in life expectancy while we continue to go down? That was really what we wanted to explore, and we spent a lot of time planning and doing homework and research and then chose these six countries for all sorts of different reasons, but all driven by that same theme.

Margaret Flinter: Well, Dr. Gupta, you take us to some pretty disparate locations around the world that are quite different from each other geographically and culturally. But these commonalities that you find in these Blue Zones, this synergy between locally cultivated diets and shared physical activities, all of these are things that we believe support, not just health but true well-being. Maybe you could talk with us about some of these lifestyle components that you experienced firsthand and the role they may play in leading to longevity?

Dr. Sanjay Gupta: Yeah. Some of these places are true Blue Zones where people live exceptionally long lives, but not all of them. Sometimes it's a question of living incredibly healthy lives, incredibly happy lives. So take a country like Italy. If you think about it sort of broadly, Italy is a country that is known for people smoke there, they drink there, they eat all kinds of different foods there, they are not known for exercise and yet they are considered the healthiest country in the world. Why is that, right? All those things that we're told that we should pay attention to and we should in terms of diet and activity and everything, why do they not pay as much attention to these things and they're still healthy? One of the key ingredients really seems to be this idea of a real social fabric, really tight knit communities. Even if you look at certain communities in the United States that are made up primarily of Italian immigrants, there was this town in Pennsylvania called Rosato, you'd look at this population that high cholesterol, they ate all sorts of different foods, didn't go to the gyms and yet they had some of the lowest rates of heart disease in the United States as immigrants here. What is the real value of being part of a really tight social fabric? I mean, in the United States, rugged individualism became the mantra on the aspiration and yet you realize it in countries around the world that are again not too different than the United States in terms of their overall structure. The reason they continue to go up in life expectancy is do a lot of things, but one of the big ones is people really thinking about how to build community. We haven't done that as much and I think we're paying the price a bit with regard to my

expectancy in this country.

Mark Masselli: Yeah. Dr. Gupta, one of the lenses that you see the world through is as a physician neurosurgeon and you approach topics with scientific curiosity. It's really interesting to see how you utilize some of these modern technologies on your journey there. We see you wearing a skull cap with all these sensors in it and in many scenes and engaging in activities like yoga and mindfulness and we're just gathering important real time neurological and physiological data set. Tell us a little more about that approach to try and to unlock some of these secrets to longevity in these unique cultures.

Dr. Sanjay Gupta: Mark, it's interesting because you go to certain places around the world and if you take practices like yoga, which in India, is something that they've been using for thousands of years, and you say, well how did this come about? What's the real science? You get sort of two versions of the answer. One is that, look, we've been doing this for thousands of years. It works. The proof is in the populations of people that it serves. But I think a newer and more emerging answer is that we realized that we need to have scientific evidence here. We don't want to just keep saying trust us. So that was sort of more the approach that we took as well to say, look, we should see evidence around these things. So when someone says yoga can do the following things for your body and your brain, where's the evidence around that? So when you look at the skull cap, which is measurements of all these different brain waves, you get an idea looking at me as an example, but thousands of people who've gone through these studies, what does it really do to the brain. When they say it quiets the mind, what does that even mean exactly? How can I actually explain this to the viewers? Is it going to work for lots and lots of people? Or is it just for a few very well-trained yogis? These were the sort of questions that we wanted to answer.

Also when there were claims that were made that did not pass muster and where the scientific evidence did not show this to be true, we sort of talk about that as well. We approach it like any other story in a way when we present something to the viewers, we want them to have some degree of confidence and what they're seeing and watching.

Margaret Flinter: Well Dr. Gupta, you've covered a lot of health stories in your career, but you say that perhaps the least analyze condition underlying most disease in this country particularly is stress. So in addition to the series Chasing Life as CNN, you also have a documentary airing on HBO called One Nation Under Stress, which probably should be required viewing for anyone working on the front lines of healthcare. You note that stress is an underreported contributing factor to death and illness. It underpins much of the disease we treat in our practices

and health centers every day, and you point to arise out of the so called Deaths of Despair that are bringing life expectancy down. Talk with us more about this research on the stress epidemic. Why we as a nation have just got to be very vigilant in addressing it?

Dr. Sanjay Gupta: It's a big topic and some could argue it's one of the biggest most urgent topics of our time. What's driving the drop in life expectancy and the increase in mortality are really three things. Death by suicide, which has gone up from 30% over the last 20 years, Overdoses primarily opioids, but that's gone up significantly and Liver Cirrhosis typically due to alcoholism. Those are the Depths of Despair and you can right away see why their name that they're all reflective of self-medicating and trying to ease a deep rooted pain that I think many Americans are suffering from, and I think stress is an underlying problem there. But you look at other countries around the world and other countries you say, well they've had similar challenges economically in terms of the changes in life and fast food and lifestyle changes and all that, and yet they continue to increase in life expectancy and decrease in mortality. We know what's happening in the United States. In some ways, the question is why isn't that happening other places? You realize that there is this undercurrent of stress in the United States that is a much higher than other similar countries.

Our perception of pain, for example, much higher in the United States than other than other places, our self-reported stress much higher in the United States than other countries, our willingness to try and medicate that stress away with drugs and alcohol. If you look at the entire world 80% to 90% of some of the world's opioids are consumed in the United States. We're not even 5% of the world's population and we're consuming 80% to 90% of some of these medications. It's a symptom of a much larger problem and I think stressors is the common denominator.

Mark Masselli: We're speaking today with Dr. Sanjay Gupta, Multiple Emmy-award winning Chief Medical Correspondent at CNN and Staff Neurosurgeon at Emory Clinic. He has a new series on CNN Chasing Life, which explores remarkable examples of health and longevity around the world. Dr. Gupta, you framed it up really well. We're spending \$3.5 trillion on our health annually and yet the outcomes are bad, particularly access to things like behavioral health, addiction services, all remaining out of reach for this population. I'm wondering the health industry itself, what's the prescription you would sort of give to the industry itself to say, look it, we need to head in this direction and what do you draw from other countries as you think about that prescription?

Dr. Sanjay Gupta: Well, there are many things that are our health care system in United

States can do remarkably well. I mean in terms of life shortening, life ending diseases, certain cancers, some of our progress in catastrophic heart problems, but I think a lot of the attention is sort of on this home run mentality. We want to get the home run and take care of patients who are the sickest and sometimes dealing with the more chronic disease in a meaningful way or truly optimizing people's health all along their journey often gets short shrift in the United States. I think that's one thing you see in other countries that's different. Health care is not a necessary evil in other places where you just go, if you're sick or you've had some sort of injury, it's a more frictionless, seamless part of life. You're constantly thinking about what am I doing in terms of my health today? Why am I eating this particular food? What function does it have besides just providing me calories?

If you look at the United States, 70 to 80% probably of chronic disease in the United States is entirely preventable. You'd think it's not just the medical establishment, but it's the entire way in which we live from the food that we're eating, the air that we're breathing, the medications that were sometimes taking unnecessarily. All these things in aggregate lead to a problem where what most doctors are taken care of in the hospital are entirely preventable diseases. People talk about prevention all the time on the individual level. I think talking about it on a societal level requires a lot more insight. You got to look at these other countries, see what they're doing. Small changes can make a huge difference. I never really thought about this that much. I'll be honest with you until I started working on this, but I thought about it a lot after I started learning this and now I have three girls that are all ones, a teenager already. I'm going to have three teenage girls.

Mark Masselli: That's exciting.

Dr. Sanjay Gupta: Yeah, it's pretty much, yeah, well that's another [inaudible 00:13:12], but in terms of their lives and what their lives are going to be like when they're my age, sometimes I feel like the system is rigged against them a little bit. Even if they want to do the right things for their bodies and their brains and they want to be healthy. It's sometimes hard in the United States. The United States is a way of life doesn't always lend itself to that so easily as it is in other countries.

Margaret Flinter: Well, I want to give a shout out for something that's worked exceptionally well and that is prevention in the area of vaccines, but it's under threat. We have whole generations of our young health care professionals who I don't think we'd know measles or mumps if they tripped over it because they've never seen it. We've made such enormous progress, saves so much suffering, and yet we see the reemergence of these conditions due to the beliefs in messaging

that's out there around vaccines. You have such a unique role in this country as one of the most recognizable and I think trusted, health experts and it can do so much to help drive the point home that vaccines are safe and save lives. How are you using your pulpit to do this?

Dr. Sanjay Gupta: It was surprisingly challenging to understand why there were pockets and populations of people who did not want to vaccinate, the belief that vaccines would cause some sort of harm has been widely debunked. By really good important studies where they actually look at millions of people who've gotten vaccines, looked at rates of autism and other adverse things and said, is there a connection here? There is not. There's also, you don't want to establish some sort of false equivalency that people say, Hey, look, I just want to be careful. I just want to be safe. Oftentimes I feel like people hedge them. They say, well, no, we understand that you just want to be safe. Why don't you skip the vaccines or whatever. There should be no hedging here. Vaccines have saved millions and millions of lives around the world and nothing is a 100% safe, but you have a literally a one in a million chance of having some sort of serious adverse effect from a vaccine.

Out of 10,000 people who take an aspirin a day 12 will have an adverse thing. If you look at liver failure in the hospital, most of it comes from taking too much Tylenol. You're more likely to get hit by a car walking across the street than to have an adverse event from a vaccine. Yet people look at the risk of vaccine as somehow much, much higher. I don't think that there is large percentages of the population who believe this. I think it's small percentages, but the problem with that is that vaccines are this perfect example of something that is both an individual health decision as well as a public health decision. I have three girls, as I mentioned. I got them all vaccinated on schedule and part of me realized that I was not only protecting them, but you're also protecting the people around them as well.

I've traveled to countries around the world where people don't have vaccines and they die. I've talked to these families and man, they wished they could have had vaccines for their kids. They didn't and sometimes they lost their children as a result of that, we have this in this country, how do we not take advantage and something that is so available to us.

Mark Masselli: You were talking earlier about the health system trying to hit home runs. You were saying that small changes can make this difference, I wondered if you think about the changes that need to take place. It may not be completely the responsibility of the health industry though they play a role.

Dr. Sanjay Gupta: Sure.

Mark Masselli: But you really talk to people in your show. So talk to just the individual who's listening. What's the journey that individuals in America should take as they try to think through ways to be healthier and live longer.

Dr. Sanjay Gupta: Yeah, and I'll just say we all have a responsibility certainly in terms of managing our health, but it is worth looking at the environment in which we live sometimes and saying, here's some things that we could change that could benefit large populations of people all at once, but when it comes to individuals, you think about the fact that we are one of the most overmedicated countries in the world. Again, a lot of times these medications are completely necessary. I'm not telling anybody to stop taking their medications, but if you are being prescribed a new medication, I think it's often worth taking the extra beat and saying, do I really need it? Obviously, most countries don't take nearly as much as we do.

I think when it comes to how we eat and how we move, think about how humans evolved. Right now the life we're leading is but a blink of an eye in the human existence on this planet. For most of our existence, we lived very different lives as human creatures. We weren't designed to sit or lie for 23 hours a day and then get up and go to the gym for an hour. We were moving, I mean people sat only when they were older, when they were getting ready to die.

The Ayurvedic Diet in India, which is thousands of years old, how does a diet get created for a culture? Mostly it gets created because of taste, but then if you look at diets from before thousands of years old, it was all about the functionality of the food. I know these sound in some ways like silly things because we don't think about it, but in other cultures around the world it's all they think about. It's not just about energy from calories, it's about truly thinking of food as medicine and we can do that too. I also think that, look, stress is not the enemy. We all need stress. People come to me and they say, I want to live a stress free life, that's not possible and it's probably not a good thing because we need a certain amount of stress to survive and thrive.

The problem is when the stress never turns off. If you can find time, whether it's meditation, Yoga, maybe it's just being outdoors and smelling the aroma of the forest, you can get these little breaks from stress that we now objectively show makes a change in your brain, the parts of your brain that are responsible for your judgment, change. If I can relieve your stress even for a little bit of time right now, you're much more likely to make good sound decisions. Stress is not the enemy but find time to try and break that cycle. It'll make you a much happier, more productive person and probably help you live longer as well.

We've been speaking today with Dr. Sanjay Gupta, Multiple Emmy award winning chief medical correspondent at CNN who has an important new series Chasing Life. You can find him most days on CNN. You can follow him on Twitter at Dr. Sanjay Gupta. Dr. Gupta, thank you so much for sharing some time with us today, for your gifts as a physician, as a communicator and for joining us on Conversations on Health Care. Thank you so much.

Dr. Sanjay Gupta: Oh, it's my pleasure. I really enjoyed the conversation.

[Music]

Mark Masselli: At Conversations on Health Care we want our audience to be truly in the know when it comes to the facts about health care reform and policy. Lori Robertson is an award winning journalist and Managing Editor of FactCheck.org, a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in U.S. Politics. Lori, what have you got for us this week?

Lori Robertson: During a speech to the National Republican Congressional Committee, President Donald Trump, once again attacked Wind Power falsely claiming that noise from turbines causes cancer. There is no evidence that wind turbines cause cancer and in fact there's no direct evidence that the sound is harmful in any way to human health. The American Cancer Society told us in the statement that it is "unaware of any credible evidence linking the noise from windmills to cancer." We also searched the biomedical literature for any studies investigating a link and couldn't find any cancer or what scientists think of as uncontrolled cell growth is at heart a genetic disease because it starts when a cell has or acquires a mutation in its DNA that allows it to grow unchecked. The mutations can be inherited come about naturally as cells replicate or can come from environmental exposures such as cigarette smoke, pollution or ultraviolet light. Sound waves, however, aren't thought to mutate DNA or to cause cancer in any other way. In fact, some sound waves help diagnose cancer. The only plausible way wind turbine might contribute to even a small amount of cancer risk is by increasing stress or disrupting sleep, but it hasn't yet been demonstrated that those problems do contribute to cancer risk or that they are caused by turbine noise. Studies indicate that people living in near your turbines are rarely exposed to average sound levels beyond 45 decibels similar to the home of a refrigerator. Trump's claim is baseless and that's my fact check for this week. I am Lori Robertson, Managing Editor of factcheck.org.

[Music]

Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact that you'd

like checked, e-mail us at www.chcradio.com, we'll have FactCheck.org's Lori Robertson check it out for you here on Conversations on Health Care.

[Music]

Margaret Flinter: Each week Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. Louisville, Kentucky has consistently been on a top 20 list of US cities you don't want to live in if you have a lung disorder surrounded by the nation's leading rubber manufacturing entities. This is a city that has grappled with pollution. Several years ago, the city's newly hired chief of innovation made a decision to tackle the issue.

Ted: Maybe the risk is concentrated in certain places and if that were true, maybe there would be something we could do about it.

Margaret Flinter: Through his work in public health research, Ted Smith had learned of a tech enabled smart inhaler that when sync to a person's phone acted like a GPS for whenever that person needed to use their rescue inhalers.

Ted: That kind of real time monitoring of asthma events, especially those rescue inhaler attacks is really high value signal and you're capturing it in real time.

Margaret Flinter: Smith dubbed the Program Air Louisville and tracked 1,100 participants over the course of a year. He said they were able to chart environmental triggers in any given area where an asthma attack occurred. Realtime data on the conditions and the location, giving them some great public health epidemiology data.

Ted: We ended up with a very high spatial resolution map of the burden of asthma in Louisville, Kentucky and then that led us to explore, you know, where those little micro areas are that are problematic and what we might be able to do about it.

Margaret Flinter: More importantly, the smart inhalers gave users a feedback loop of information which allowed them to better manage their exposure to known asthma triggers.

Ted: There is an immediate effect. People end up getting better control of their respiratory disease.

Margaret Flinter: Reliance on emergency inhalers dropped 78% among participants. A tech enabled smart inhaler that gathers meaningful data, that informs public health officials how they might reduce the burden of asthma health costs while teaching asthma sufferers to better control their disease and stay healthier. Now, that's a bright idea.

[Music]

20190422Gupta

Mark Masselli: You've been listening to Conversations on Health Care. I'm Mark Masselli.

Margaret Flinter: And I'm Margaret Flinter.

Mark Masselli: Peace and health.

Female: Conversations on Health Care is recorded at WESU at Wesleyan University, streaming live at www.chcradio.com, iTunes, or wherever you listen to podcasts. If you have comments, please e-mail us at chcradio@chc1.com, or find us on Facebook or Twitter. We love hearing from you. This show is brought to you by the Community Health Center.

[Music]