

Dr. Oz's Ultimate Health Checklist
January 13, 2009

Oprah: Welcome to night number 2 of our week of Best Life webcasts. All week long we're giving you the tools and inspiration to look at your life in a different way and make the changes you need to live your Best Life in 2009. I'm laughing because—anyway. Right now, thousands of people are online with us from every corner of the globe China, hi. Iceland, Kuwait, Japan and Botswana. And, of course, all 50 states here in America. Welcome to our Web class, planet Earth. Last night we found out how to get back on the weight loss wagon with Bob Greene. Tonight, we're building on the momentum to get healthy with Dr. Oz. Hello.

Dr. Oz: Thank you very much.

Oprah: Hello. Hello. So let's tell the people just what happened. I just woke up, you know, because I just got in from Africa the other day, so my schedule is all flipped around. So I'm doing live shows in the day and then webcasts at night and so—

Dr. Oz: And my big question was who would be brave enough to wake you up?

Oprah: Well, I actually woke myself up because, you know, I had to do this. So I'm napping in the middle of the day because I put myself back on the list. Normally, I would just, you know, trudge through the day, trudge through the day, trudge through the day.

Dr. Oz: A lot of people.

Oprah: So—

Dr. Oz: I'm really excited about this today because in medicine it's so often that we'll have an ovarian lottery. You know, wherever you're born, that's the healthcare you get. But today we're all over the planet, and so we may have great questions from Iceland that might generate a good response in Chicago that someone in China has got a better idea on, and that's actually how we're going to change medicine around the planet.

Oprah: Doesn't it feel like Iceland here right now?

Dr. Oz: It does exactly. It does.

Oprah: So cold. We've got Skypers standing by, and we're going to also be taking your phone calls tonight live. The number to call, 866-677-2496. That's 866-OPRAH-XM. So you might remember last week Dr. Oz gave us his ultimate checks list. The most important steps to turn your health around in

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2009. We're going to be answering your questions about that and anything else on your mind about health. After the webcast, you can print Dr. Oz's checklist on Oprah.com and just put it rightful on your refrigerator with all the pictures and—

Dr. Oz: And then look at it and act on it.

Oprah: And act on it. Don't just have it there on the—as a sticky thing on the refrigerator.

Dr. Oz: It's not just good for decorative purposes.

Oprah: Kim has been following Dr. Oz's ultimate checklist for two months now, and she's Skyping from her—where are you? You're right here in Chicago, right?

Kim: I am.

Oprah: Oh, hi.

Kim: Hi, Oprah. Hi, Dr. Oz.

Oprah: How are you?

Dr. Oz: How are you?

Oprah: So how's it been working, the checklist?

Kim: It's been going really great for me. I've been working out on a regular basis. I've been taking my vitamins. I've been reading labels, which is something new for me in trying to make healthy choices in my diet. I've lost 8 pounds, and I feel great.

Oprah: Wow. Where are you working out? Because it's so—it's like a frozen tundra here. Where are you working out?

Kim: Well, I belong to a gym and it's— you know, it's a chain gym but it's pretty inexpensive and my health advocate, who is also my neighbor, goes with me. We get up at 5 in the morning, and we drive and we work out for an hour, and then we get home and go to work so—

Oprah: That's fantastic. I love the health advocate. So you also have a question for Dr. Oz. Let's hear it.

Kim: I do, Dr. Oz. I have some pretty large weight loss goals. I'd like to lose another to 60 pounds and I just wondered if you had any advice or recommendations for me going forward because I've been setting small goals, and when I look at it in little small increments, it's not so overwhelming, and when

I think about the ultimate goal, it seems kind of overwhelming for me. So, how long do you think it will take, and what advice do you have for me going forward?

Dr. Oz: What's your target weight? Where do you want to end up?

Kim: I—do I really have to say that on television? On—

Dr. Oz: It's just the Internet.

Kim: Okay. I would like to end up like at around 190.

Dr. Oz: All right.

Kim: I think that's a reachable goal for me.

Dr. Oz: That's fine. I wanted to make sure 90 pounds wasn't your goal, because if you've got a real goal, you can get there. Let's do a little bit of math. So a pound is about 3,500 calories. Right?

Oprah: Right.

Dr. Oz: So if you're going to lose a pound a week, even that seemingly small amount, that's 500 calories a day that you have to lose.

Kim: Okay.

Dr. Oz: That's a significant jump. So for most folks, once you get the low-lying food out of the way, the initial weight loss, of course, is relatively easy. Then you also sort of get into a stable program. And let me share something with you. Every long-term study on weight loss, so in other words, people who have lost weight and kept it off for two years, has shared one basic insight. That every day you try to shave off a hundred calories a day, and you don't try to get past that because if your body knows you're trying to diet, it's going to think you're fasting because there's a famine, so it's going to rebel against you.

Oprah: That's the same thing Bob Greene said last night.

Dr. Oz: He's absolutely right. And I think: across the board if you just do the math you'll realize it's going to be hard to lose more than a pound a week. That stated, that's still a significant amount and in a year you will be where you want to be. The challenge is not to get there. It's to stay there. And if you change your lifestyle, remember it's not a wind sprint, but it's a marathon you're embarked on, and you'll be able to stay there.

Kim: Great. Thank you so much.

Oprah: So it's about looking at it for the long term and not, you know, dropping 8 pounds or 4 pounds in—because you can in the beginning. You lose water weight.

Dr. Oz: You can, but it's really about automating things in your life, because if you can make it subconscious that it happens naturally, then it's going to keep happening. Then it's not a struggle. You're not on a diet anymore. You're just living life. And, by the way, you're headed toward your playing weight. Thank you, Kim.

Kim: Thank you so much.

Oprah: See you the gym.

Dr. Oz: Congratulations.

Oprah: One of the first things on Dr. Oz's checklist is schedule a checkup. Sharon is calling us from outside Dallas, Texas. She has a question about that. Sharon?

Sharon: Yes, hi, Dr. Oz. Hi, Oprah. How are you?

Oprah: Hi, Sharon. I'm good.

Sharon: Well, I was watching your program last week and I've been watching all week, but you mentioned that, you know, to get a basic checkup and some—mentioned some, you know, various tests that should be taken. What about those of us who are not insured—make a little too much for Medicaid or any assistance but not enough money to pay for these tests for, you know, for borderline healthcare?

Dr. Oz: Well, every day we have—

Sharon: What can we do?

Dr. Oz: Every day there are more people like you, and I completely understand the predicament you face. The good news is there are some real solutions out there most folks don't realize they can access. The first, by the way, you can negotiate. Doctors are human beings. So are hospitals. You know, and so are pharmacists. You can go into places where you're normally forced to pay whatever is charged and say, "Listen, I don't have the money to afford that. Can we figure out something that makes more sense?" And you'll be surprised how frequently you can get folks to work out terms that are acceptable to you. Even if you're not going to go through all that, we'll give you three things right now that you can go through after the show. The first is the reality that about 20 percent of all the money we spend in healthcare is in pharmaceutical products and drugs. So there are actually programs to help you buy these. The Partnership for Prescription Assistance is a coalition of pharmaceutical companies but also patient advocacy groups, and the link you're going to see on your screen now is the website for this

group. You can go there and if you're a candidate, you can get very discounted medications. If you've got kids.

Sharon: Excellent.

Dr. Oz: You can go to Insure Kids Now, which is another government group that can help the many American children who are not insured. By the way, I just read today in the paper that one of the first things that we think the Obama Administration is going to do is cover children of immigrants. My personal belief, and I think a lot of Americans feel this way, is if you're under the age of 21, you ought to just get healthcare coverage. These kids are inexpensive to cover. We ought to help them as best we can. So InsureKidsNow.gov is a wonderful site that you can take advantage of even today. But ultimately I think if you can prove you were born within 21 years, you ought to get healthcare in this country and it will be there. And finally, there are 30 states in this country that have the ability to help you, and you can call the insurance commissioner's office and get help but there's also a website, Find a Health Center, which is on your website right now which is a health and human services group, which can also help you find someplace that you can walk to today and get the care that you desire.

Oprah: This is so interesting for people who are listening from places like Canada and France who are, like, "Gosh, you all are still talking about healthcare."

Dr. Oz: I can tell you were smirking.

Oprah: I was thinking if you're listening and people are listening all over the world people in France, this is how lucky you are that you don't have to discuss, "How do I pay for getting a test?"

Dr. Oz: I suspect that the biggest change that will happen in the next eight years is going to be a dramatic reshaping of the way we pay for healthcare. It's going to be a much easier and safer way to provide health in this country.

Oprah: Well, thank you, Sharon. And I always get all my tests for my birthday. I give it to myself as a gift to myself. So, you know—

Dr. Oz: Very wise.

Sharon: Great. I just turned this 50 year, so that gives me some great ideas too. Thank you, Dr. Oz.

Oprah: That's a great thing to do for every birthday, you know? Give up a pocketbook or give up a pair of shoes maybe and—

Dr. Oz: Exactly right. Put in those terms you give an example but a lot of folks say I can't afford nicotine patches. But you know what? They price those patches to be exactly the price of cigarettes.

Oprah: Really.

Dr. Oz: So you're not actually doing anything but exchanging where you're spending the money.

Oprah: Wow. That's interesting.

Dr. Oz: That's a great idea though.

Oprah: Dr. Oz told us it was important to know our numbers. Everything from waist size to blood sugar. Christine is joining us on Skype, and your question for Dr. Oz is?

Christine: Hi, Dr. Oz. My question is: I've heard you talk about waist size as opposed to weight. So I want to know do you determine my ideal waist size, and how do I achieve that, losing that weight around the belly area and how do I maintain it?

Dr. Oz: All right. So the first is to measure your waist size you've got to get a measuring tape. You can't use a belt. You have to actually take a tape and put it on your belly button and then put it over your hips and you can suck in a little bit. You can be like Scarlett O'Hara. I want to know what your actual belly fat looks like, and that number has to be less than one-half your height. So how tall are you?

Christine: I am 5'10". So 70 inches?

Dr. Oz: Seventy inches, divided by two.

Christine: Thirty-five.

Dr. Oz: Good. So is your waist size less than 35 inches?

Christine: No.

Dr. Oz: No. So why do you think it's not less than 35 inches?

Christine: Because I eat too much. I'm a comfort eater. And I guess I'm just—I don't take care of myself the way I should, and I need a little assistance.

Dr. Oz: Are you gaining weight? Are you losing weight? Are you treading water?

Christine: I am gaining weight. I'm gaining weight. I am. I've quit smoking in the last month, so has definitely been a factor and, you know, I got married and I moved, so there's been a lot of stress in my—right now I open the fridge to comfort it.

Dr. Oz: Well, two bits of advice. Marriage, interestingly, in fact any time a male and a female move in together, the guy gets healthier. The woman gets sicker.

Christine: Tell me about it.

Dr. Oz: Because—

Oprah: Tell me about it. Really. The guy gets healthier, and the woman gets sicker and sicker.

Dr. Oz: Because the guy will draft on your healthy habits and probably warp some of yours. But you know, I think a lot much it, especially when you enter into married life and you start giving up other things, is you're giving, giving, giving, giving, giving, and then when it takes time to give back to yourself, the only thing you do is give it is food.

Christine: I give it chocolate.

Dr. Oz: You give it chocolate. Right. I think you're wise enough to figure out that's not the best solution.

Christine: I know. I know.

Dr. Oz: Well, Act on it.

Christine: I will. I am. That's why I'm here.

Dr. Oz: This is your year.

Oprah: This is your year. This is your year. Thanks, Christine.

Christine: That's it.

Oprah: Thanks, Christine.

Christine: Thank you.

Oprah: Okay. Okay?

Dr. Oz: One last thing for Christine. Part of the story, really, is that when you feel stress, it's the equivalent historically of us being in the time of famine, because that's what stress was, right? It wasn't a deadline to get somewhere.

Oprah: Oh, yeah.

Christine You're still talking to me.

Dr. Oz: I'm still talking to you. And so if you feel stress, then your body's natural response is to try to store calories. So when I see two people that have a lot of belly fat, to me it means they're not coping with stress well because they're releasing chemicals, they're actually called cannabinoids, like from the pot plant—

Oprah: Uh-huh.

Dr. Oz: —give you the munchies, so you eat more things and you eat everything and a lot more of it because your body is saying, "Hey, eat whatever you can because who knows where your next meal is coming from."

Oprah: What do you know about the pot plant?

Dr. Oz: I just heard about it. Co-workers.

Oprah: Yeah. Yeah. Didn't inhale. (Laughter.) Val from Benson, Minnesota, is on the phone with a question for Dr. Oz.

Val: Hello, Dr. Oz, and Oprah.

Dr. Oz: Hi, Val.

Oprah: Hi, Val.

Val: Thank you for taking my question today. My question is: I'm a 46-year-old woman in menopause already, and the two issues I have is what can I do for diet and nutrition to try to keep off that extra pounds that seem to keep sneaking on? I do work out four to five days a week. I'm not really overweight, but I keep getting thicker in the middle and that kind of thing. And the second question is, I am plagued with hot flashes. They keep me awake at night. Do you have any advice?

Dr. Oz: Well, lots of advice. And just to start off, the key to long-term shapeliness is a physical activity plan that puts muscle on your bones. There's just no way for you to continue to eat any reasonable amount of food without muscle mass, because muscle burns so many more calories than fat does. Now, that in mind, you've got exercise. Interestingly, when you exercise you also build testosterone levels, you stimulate growth hormone, and if you combine it with sleep, you'll actually reshape some of the hormones in the body. If you're going through menopause and you've already sort of shot your adrenal glands, then you're going to be more prone to some of the sequelae, some of the complications of losing estrogen and losing progesterone. So for some people, once they've checked their thyroid glands and once they've made sure that the other major issues in their life are taken care of, it does make sense for a short period, I think, to add hormone replacement therapy. But then that

becomes a little bit of a tug-of-war as you figure out how long you need to be on it and what the right dose is for you.

Oprah: Okay. All I have to say, Val, is this Thursday on *The Oprah Show* we're doing the entire show devoted to hormone replacement therapy and what that can mean in your life. That is this Thursday, day after tomorrow. What day is this?

Dr. Oz: Day after tomorrow.

Oprah: Okay. Day after tomorrow. Really big show on it. Okay?

Val: Okay. I'll be watching.

Oprah: You should be watching that. You'll get lots of information. And I would say the best book I've ever seen on this is Dr. Christiane Northrup's book called *The Wisdom of Menopause*. Do you have that book?

Val: No, I don't.

Oprah: That is worth—it's in paperback now, and it is the Bible to women who are perimenopausal or—or menopausal because, you know, you're perimenopausal for sometimes 10 years before your period actually stops. And go to Chapter 5 in that book, and it will explain everything you need to know.

Val: Okay.

Oprah: *The Wisdom of Menopause* by Christiane Northrup. Okay? Thank you, Val.

Val: Thank you. I'll check it out.

Oprah: And watch Thursday.

Dr. Oz: It's also a soulful book, and what I love about it is it talks through all the aspects of changing your life when you're going through menopause.

Oprah: It's emotional, spiritual, physical. It recommends things, you know.

Dr. Oz: Sometimes you do knees the hormones, and when that's there you actually need to take them. I think Christiane is right on track with that.

Oprah: Okay. So you're in favor of hormones if you need them.

Dr. Oz: Absolutely. I think just putting numbers on it, I bet you that just a third of women probably just have no problems at all going through it. Understanding why that's so is pretty cool.

Oprah: Yeah. Why? Why is that so?

Dr. Oz: Well, I think part of it's dietary. I do think that the kinds of fats you have in your body are important predictors of how you're going to be able to cope with menopause. So if you have a lot of the omega-3 fats, you don't have a lot of saturated fats, those people seem to have less issues. With the hot flashes in particular because, you know, these hormones, they're changing, and as they change, they cause a disharmony. That's what causes the symptoms more than the actual values. Some people have adrenal glands that are shot. They're just completely washed out. And so you don't have the reserves to back up the ovaries when they stop making the normal amounts of progesterone, which is the first thing to fail, and Christiane goes through this in great detail. And then when you lose the estrogen, you don't have anymore backup, and of course the big problem losing estrogen is you also lose testosterone. And that's where the muscle mass is important.

Oprah: And estrogen seems to be the juice of life because when you lose the estrogen, you lose not just—for me it was a look of sleep, not being able to sleep for two years. You also lose sort of your zest. You lose your, you know embracing life. You lose a lot.

Dr. Oz: You don't lubricate as well. You get joint issues. Probably heart issues, which we link to your bones get weaker. It's critical. However, I don't want to paint it as just an estrogen issue.

Oprah: No, it is not. It's a hormonal balance issue.

Dr. Oz: So the key is make sure the thyroid's okay—

Oprah: Every woman's different.

Dr. Oz: Exactly right. And progesterone and estrogen and—

Oprah: Testosterone.

Dr. Oz: —testosterone across the board. And once those are in balance—

Oprah: And the adrenals.

Dr. Oz: And the adrenals, of course. They are the hardest ones to measure actually.

Oprah: Yeah.

Dr. Oz: And that's actually where—

Oprah: It's a saliva test. Can't you get it through—

Dr. Oz: Yeah.

Oprah: It's a saliva test.

Dr. Oz: But the accuracy of it, because it changes. Your adrenal glands secrete much more in the afternoon than in the morning, so it's a moving target for doctors to try to aim at. And doctors—this is the big battle I think your show is going to start in this country. We're used to as physicians measuring numbers out and say, "Okay, you're within the normal range."

Oprah: Absolutely.

Dr. Oz: What does normal mean?

Oprah: Absolutely.

Dr. Oz: What's a normal shoe size?

Oprah: Absolutely—right. What is a normal shoe size?

Dr. Oz: It's between 4 and 12. Give me your shoes.

Oprah: I'm not going to give you these shoes.

Dr. Oz: They're not going to fit me.

Oprah: I barely have on shoes coming down here.

Dr. Oz: They're not going to fit me. Mine won't fit you. So when we say, "Hey, it's normal," all we're really saying is that you're a normal human being.

Oprah: Yeah, normal for whom? Normal for whom?

Dr. Oz: Exactly.

Oprah: Because every woman's body is different.

Dr. Oz: And that's the tug-of-war.

Oprah: Yeah. But wouldn't you say, though, that your profession has not really done its—us a full service in this because I, like so many other millions of women, have been completely frustrated

because when you go to the doctors, they do say you're in the normal range. They don't say but normal for whom. They don't ask you about your quality of life.

Dr. Oz: It is—I think one of the biggest opportunities to improve medicine.

Oprah: Yes.

Dr. Oz: For sure when we shift away from just saving lives to preserving the quality of life, which we are doing now, then I think this becomes front line medicine. But you know we weren't trained to do this.

Oprah: That's right.

Dr. Oz: When we went through medicine, in my case, learning how to fix blocked arteries that were about to kill you. The last thing on my mind was whether estrogen worked or not. And the large trials that were done misled us.

Oprah: Yeah.

Dr. Oz: Because instead of using natural products, bioidentical products, that would—by the way, aren't patentable, and for that reason people aren't going to do big studies on—

Oprah: Right.

Dr. Oz: —we ended up doing the clinical trials—

Oprah: And they're not patentable because bioidentical—because for those of you who know the difference between bioidentical and synthetic products—

Dr. Oz: Right.

Oprah: Yeah.

Dr. Oz: Go ahead.

Oprah: No, you go ahead.

Dr. Oz: You know better than I do.

Oprah: No, I don't. You're the doctor.

Dr. Oz: "Bioidentical" means it's the exact same hormone as in your body, which means you can't patent that. That's the property of the human race. But if I were to modify just a little built so that it's mine, now I own it, now I'll pay a lot of money to see if my version is better than what you were born with. And that gives us data that as doctors we have to use.

Oprah: Yeah.

Dr. Oz: And by the way, before we start pointing fingers, all of us invest in companies that do trials, if you invest in pharmaceutical companies that are designed to show that a product that might make money for the company is worth using. And so all of us are involved in this discussion.

Oprah: Okay. Well, we're going to have the full discussion on Thursday about whether bioidenticals or synthetic hormones—versus synthetic hormones. And also just balancing your hormones, because I really believe there are millions of women out there who are taking antidepressants and—

Dr. Oz: Yes. Yes. Yes.

Oprah: —taking antidepressants—

Dr. Oz: Sleep meds.

Oprah: —and sleep meds when really it's a hormonal issue.

Dr. Oz: I'll tell you the big problem you're going to have?

Oprah: What?

Dr. Oz: The delivery of that kind of care because it's very customized—

Oprah: Yes?

Dr. Oz: —is very intensive in resources. So you've actually got to sit with somebody and work with them very carefully, and it takes a long time to get them on the right program. I can't just give you a pill.

Oprah: Yes. And it's also not just one size fits all.

Dr. Oz: Exactly.

Oprah: Yeah. Yeah.

Dr. Oz: So it's much more difficult to help all the people out there who have problems. So it's going to challenge us.

Oprah: Yes. Challenge us meaning you medical folks.

Dr. Oz: All of us because now I've got to go to you and say, "Oprah, tell me if you've got a problem." You have to be a good enough historian to tell me a story that convinces me you have a thyroid problem or estrogen problem or progesterone problem that I have to be insightful enough to listen to you.

Oprah: And you also, as—you have to be in—aware of your own body, because as you said yesterday, I kept insisting, I kept insisting, I kept insisting that, you know, "I still don't feel great. I still don't feel great."

Dr. Oz: If you hadn't insisted, you'd be taking more sleeping medications, you would have added an antidepressant and you would be like millions of other American women. And men.

Oprah: Horrible. Horrible.

Dr. Oz: It is the biggest message of all here.

Oprah: Okay. So last week we told you we would give you the full list of vitamins and supplements Dr. Oz recommends for ultimate health. So tell us.

Dr. Oz: All right. So this is, by the way, a question I frequently get asked, so we'll break it down real simple. Two categories of people. People who might get pregnant and people who aren't going to get pregnant, which means older women and men. So if you're a female who's of an age that might become pregnant, it is important, first of all, because you're having menstrual cycles, that you get a multivitamin that has iron in it, and then you want to get less than 5,000 units of vitamin A. You don't want too much vitamin A, but you need a little bit more than the other group is going to get.

Oprah: There you go.

Dr. Oz: That's across the board. Now these folks also in their multivitamin will get folic acid, and I'm going to come back to that in a second. The group that is postmenopausal or are men also take a multivitamin.

Oprah: "Postmenopausal" means you are no longer having your period.

Dr. Oz: The period has started—I'm sorry has stopped.

Oprah: Stopped.

Dr. Oz: So the period has stopped, you're not losing blood, so you don't need the iron. Because the reason we're giving you a multivitamin with iron is to be able to restore those losses from menstruation. So when you're postmenopausal after the bleeding has stopped or you're a male, you take a multivitamin but no iron.

Oprah: No iron.

Dr. Oz: And then you need only about 2,500 units of vitamin A. Now, thankfully, there were people watching last week on our show and we got a phone call from the Folic Acid Council. I didn't even know that existed.

Oprah: There is a Folic Acid Council.

Dr. Oz: Yes. And these nice people said that I was warning folks against eating some of the foods which on the food label stated, you know, saturated fats, trans fats, all these things agreed aren't good for you. But it also said on there enriched flour. Now, I wrote that because I'd much rather that people eat whole grains than enriched grains because enriched grains are whole grains, they've got the good stuff taken out of them. Right? And that's an issue for us because when you take the good stuff out and add just a little bit back, then I say to myself, "Why not just take the original food, the natural food you were supposed to be born with?" So just to clarify for the Folic Acid Council, I don't mind enriched flour if your only other option is nonenriched flour, which is these days not what most people eat. But I'd rather you eat whole grains than enriched flour.

Oprah: Okay.

Dr. Oz: Now back to—

Oprah: That's usually the first ingredient when you look at bread.

Dr. Oz: Look at all these—bread for sure. All these flour products. If it says enriched flour, just be aware you're getting simple carbohydrates. You're better with whole grains if you can.

Oprah: What you want is complex carbohydrates.

Dr. Oz: Exactly.

Oprah: Got it.

Dr. Oz: The other things we talk about omega-3 fats. Probably the most important supplement of all. It's important for the brain. Eighty percent of our brain is made from omega-3s. You want calcium and magnesium. These are important minerals that we use to build our bones, and of course to build your bones right you need vitamin D.

Oprah: Yes.

Dr. Oz: And vitamin D. is incredibly important not just for bones but for your immune function.

Oprah: You have to take the calcium and magnesium together otherwise you will get so constipated you will need surgery. You will really think you're in the delivery room, so you've got to take them together.

Dr. Oz: Right. And by the way, all these vitamins are found in foods. But to be sure that you're getting them, just take the multivitamin.

Oprah: Almost everybody's vitamin D deficient if you're living in a place like Chicago because we just don't get enough sun.

Dr. Oz: If you live north of Atlanta, you are vitamin D deficient. And vitamin D deficiency is linked to thyroid disorders because it's allowing the autoimmune process to rage. Right? That's why multiple sclerosis and other autoimmune problems are also linked to vitamin D and cancer, by the way. But thyroid in particular I mentioned for you.

Oprah: Okay. All right. I hear the phone lines are just, what, off the—raging here? Flooded. Here we go. We know you have great questions for Dr. Oz, so I'm going to talk less and let you talk to him. If you're trying to call, again the number's at the bottom of the screen. So that's 866-677-2496. And if you get through, send us your question by e-mail to the right of the screen. So Karen from Ontario, Canada, is on the phone. There you go, Karen. Hi.

Karen: Hi. My husband and I have recently—(inaudible)—and had started eating a lot of soy products. However, we've recently become aware of several studies that talk about the harmful effects of eating soy. And I just wondered what Dr. Oz thought about that.

Oprah: Good.

Dr. Oz: Soy products are a popular topic. They became of interest to physicians because we knew that people who came from societies where there was a lot of soy seemed to have less cancers, in particular, for example, Japanese women just didn't have a lot of breast cancer. And we thought the soy products were protective because they do, in fact, have phytoestrogens in them. One of the problems, though, is when you take a ton of soy and you replace all your beverages with soy milk and you start getting them in concentrated packets like in tofu, then we start to get a bit more concerned there might be too much phytoestrogen for you, and so we actually don't know the answer to your question in a definitive way. I still think soy products are of great value. I don't dissuade the people in my family from eating them. I do think if you're drinking a lot of soy milk, you might want to diversify a little bit so you're not getting too many phytoestrogens in your diet and just think about how soy used to be eaten historically.

They would be eaten in edamame and, you know, bean form and more natural forms. It's harder to concentrate too much of this if you eat those natural forms.

Oprah: Okay, thank you.

Karen: Super. Thank you.

Oprah: All righty. All right. Our next phone call. Who's our next phone call? You tell me the phone lines are flooded. In the meantime, can you tell Andre to get me some rooibos tea upstairs because—okay because—

Dr. Oz: Rooibos tea. Great.

Oprah: I love rooibos tea because it's non—it's decaffeinated and it's—

Dr. Oz: Let me tell you about something that I have been trying to get and talk about on the show for a while but it might be of interest. Probiotics. Do you know much about them?

Oprah: No, not a thing.

Dr. Oz: All right. Folks who have irritable bowel who are tuning in today. People who have chronic fatigue syndromes. People who have a lot of these inflammatory conditions like vaginosis and the like, one of the things that we think might be happening in you, if your immune system is generally depleted, is that the bacteria in your intestinal system aren't growing normally. Now when we're born and we go through the vagina of our mothers or we breast feed, we actually pick up bacteria from there and that colonizes our intestines. And those good bacteria grow in there and eventually there are about 10 times more bacteria living in our gut than cells in our body and that allows us to absorb all of these great nutrients that we need.

Oprah: Isn't the body something? Aren't you still fascinated daily?

Dr. Oz: The reason I went into medicine, Oprah, is because I knew I'd never learn it all.

Oprah: Really.

Dr. Oz: Honest. That's the number one reason I went into it.

Oprah: Did you do surgery today?

Dr. Oz: Yesterday—actually till this morning.

Oprah: You did—

Dr. Oz: Till very early this morning.

Oprah: You did surgery.

Dr. Oz: Yes.

Oprah: Oh, wow. Is it still—every time you open up somebody's chest cavity and there you are in the heart, is it still magical for you?

Dr. Oz: Absolutely. It is the biggest chi source you can imagine. It gives you energy beyond belief. First of all, the fact that people would trust you to help them is very rewarding. But then it's magical. I mean this heart's twisting in there and turning in there, and you have to make peace with it. You can't beat the heart. You've got to sort of coax it to work with you.

Oprah: So how many surgeries do you do a week?

Dr. Oz: Five, six.

Oprah: Really.

Dr. Oz: When I was doing—before I met you I used to do closer to 10 a week. But it's a lot of fun.

Oprah: What's the longest you were ever in surgery?

Dr. Oz: Oh, 24 hours.

Oprah: Twenty-four hours.

Dr. Oz: Yeah.

Oprah: And how do you do that?

Dr. Oz: You know obviously you don't—

Oprah: Do you get to take a nap somewhere and bring somebody else in?

Dr. Oz: A lot of this is the surgical ethos. You would never—it would be a sign of weakness to go sleep. You would absolutely focus.

Oprah: Really.

Dr. Oz: The particular case I'm thinking of is one that I—is a story that always comes back to me because this gentleman, I met him in the holding area before—you know, in the ICU? I told him he was inoperable.

Oprah: Really.

Dr. Oz: And I went to tell him this bad news and he looked at me and he says, "Doc, I was in Vietnam. I've seen death. I'm not dying tomorrow. You're operating on me."

Oprah: Really. Why did you say he was inoperable?

Dr. Oz: Because he really was. I mean he had lots of scar tissue from prior surgery, his heart was completely blown out. It was so dam and it was flooding his lungs. The lungs were like a sponge. They're like dry little airy things but they get boggy and they don't let air go through them and you suffocate to death. So he convinced me. And so I took him to the operating room and I did the operation. I put a mechanical heart in him, and I could not get him out of the room. And I spent 24 hours in that guy's chest.

Oprah: Wow.

Dr. Oz: And I remember saying to myself, "What an idiot I am. How could I have operated on this guy? How could I have let him talk me into this?" But once you're in there, you're partners for life. You're just not going to part. So we worked on him and worked on him and worked on him. After a couple—we finally got him out of the operating room and he bled and bled and he finally awakened. After all this. And I went to talk to him about what had gone on and he said, "I felt like I was an ether. Like I was floating around. And I looked up, and I could see a light. And I knew that if I lost sight of the light, I'd be dead."

Oprah: Wow.

Dr. Oz: "So I just kept pushing myself in this thick soup that I was in toward the light so I could stay under it. And then finally it came to me, and I woke up."

Oprah: Wow.

Dr. Oz: And that guy is still alive.

Oprah: Wow.

Dr. Oz: He's still alive.

Oprah: Aren't you glad you said yes?

Dr. Oz: I'm glad he forced me to.

Oprah: Yeah. That's what we're talking about. Knowing yourself and knowing your body and pushing, pushing, pushing. Even for you. So Debbie from Woodland, Washington, is on the phone. Debbie, hi. Isn't that a story?

Debbie: Hi, Oprah. Hi, Dr. Oz.

Dr. Oz: How are you Debbie?

Debbie: Great. Great. I live in a sun-deprived part of the country. I like to use a tanning bed about twice a month even though I've heard lots of negative things about them. I also take a vitamin D supplement along with my multivitamin. So Dr. Oz, am I getting any vitamin D. from using a tanning bed? I feel better. My skin looks better. And I even sleep better when I use it.

Dr. Oz: You do get vitamin D from some of the tanning beds. They don't all secrete the same wavelength. But the reputable ones do give you vitamin D. I'm concerned about damage to the skin from constant use of tanning salons. That's one of the reasons I don't push people to go out there and do it. Natural sun by far is the best way of solving your vitamin D deficiency, and I know in some parts of the country it's cold, but whenever it's warm enough to go outside, try to get 15 minutes of direct sunlight. If you're dark-skinned, Oprah, someone your color needs more like an hour of sunlight.

Oprah: Without sunscreen.

Dr. Oz: Without sunscreen.

Oprah: Yeah.

Dr. Oz: So put sunscreen on your face and your hands because that's where aging shows, but the rest of your body needs to be able to see it, especially in the summer months.

Oprah: But how is it getting it through your clothes? Because I'm not out there in a bikini.

Dr. Oz: No, no, you need to expose your chest and your back and your—

Oprah: Oh, really.

Dr. Oz: Those big surface areas. It's critical.

Oprah: I've been doing it wrong all this time. I've been fully clothed, all my sweats on, but I'm in the sun.

Dr. Oz: But you know our ancestors, someone your color never lived here. Oprah—

Oprah: That is for damn sure. Let me tell you. (Laughter.)

Dr. Oz: But, you know, the thing about it is if you look across all human species.

Oprah: That's right.

Dr. Oz: Within five years of your tribe moving to Chicago.

Oprah: Yes.

Dr. Oz: They changed color. They looked like me. And vice versa. Our species began to change skin color because skin color—

Oprah: As they moved across—

Dr. Oz: Absolutely. The whole battle is about vitamin D and folic acid. The whole battle is balancing because too much sun wipes out folic acid but gives you vitamin D, which, by the way, is an important hormone. And not enough sun depletes vitamin D and you get a lot of folic acid, but who cares because you're getting cancer and autoimmune diseases from the vitamin D. So the one exception are the Eskimos, the Inuit, because they get their vitamin D from their food.

Oprah: Wow.

Dr. Oz: They eat fish liver.

Oprah: I can tell because when I got off the plane in Africa the other day, I mean it was like Africa hot. The sun is like so intense.

Dr. Oz: No vitamin D deficiency there.

Oprah: Yeah, no vitamin D deficiency there.

Dr. Oz: I want to finish real quick with probiotics.

Oprah: Okay.

Dr. Oz: Because we're going to get a hundred calls about this if we don't because we got off on the medicine.

Oprah: Okay.

Dr. Oz: Real quickly, the issue with the bacteria in your gut is if you're taking antibiotics, if the bacteria aren't growing correctly in your intestinal system, then you get the wrong bacteria, which overwhelm the good bacteria. And that's what it looks like. This image shows that those little coral reef-looking structures are the lining of your intestine. Those big railroad cars, those spheres, those tubes, those are actually the bacteria, the good bacteria, the lactobacilli so historically we would eat yogurt and kefir and all these fermented foods?

Oprah: Right.

Dr. Oz: Those are a great source of probiotics. So—and if you don't want to take it in that form, there are little pills you can take that have probiotics in them. And then you want to take prebiotics. These are foods that actually nourish your intestinal system. They're mostly made of fibers.

Oprah: And when you say take yogurt, you meant real yogurt. Not the low-fat whatever.

Dr. Oz: Exactly. Yogurt with live culture in it.

Oprah: Yes, with live culture.

Dr. Oz: And so if you eat those kinds of foods, you'll naturally replenish the bacteria in your intestinal system, but you also want to give yourself, the intestines in your body, the right kind of food to nourish those bacteria. So onions and garlic. A hundred percent whole grain breads. These provide fiber, which the bacteria love to eat. That's why they give you gas.

Oprah: Oh.

Dr. Oz: It nourishes—

Oprah: So gas is—okay.

Dr. Oz: A good thing.

Oprah: Okay. One of the most important things on Dr. Oz's Ultimate Health Checklist is to find yourself a health advocate. We got an e-mail from Susie in Sacramento, California, she doesn't fully understand what you mean. "Is that a professional person that you hire? Is it expensive?"

Dr. Oz: It can be a professional person but does not need to be a professional person. It can be a friend. What it has to be is someone who is wise about using the healthcare system. There should be a Marvel Comic about health advocates. They're like superpeople. They charge into the system. They ask the challenging questions. They force people to talk to each other, doctors in particular, and they feel pride if they're able to make the system work better for their friends.

Oprah: You know the first book that you wrote, which I can't remember—

Dr. Oz: *Healing from the Heart—The Owner's Manual.*

Oprah: Maybe it's the second book where you're talking about you the patient.

Dr. Oz: *You the Owner's*—oh, yes, *The Smart Patient.*

Oprah: Okay.

Dr. Oz: You have a good memory.

Oprah: Yes.

Dr. Oz: *YOU: The Smart Patient.*

Oprah: It's a really good book to read because everybody at some point in their life is either going to get sick or know somebody who's going to get sick, and there's lots of great advice in there about how to do it for yourself. And I'm telling you, I mean, my experience this past couple of years, and I know other so-called famous people who also have had—had issues trying to get people, doctors, to listen to them and needed an advocate for themselves. So I really have said I don't know what the average person does.

Dr. Oz: You asked me a question.

Oprah: Yeah.

Dr. Oz: When we did a show on that book, which I struggle with a lot. You said, "I'm not comfortable asking my doctor a difficult question about what they're telling me. Challenging him."

Oprah: Yeah.

Dr. Oz: And I thought to myself, "You know, if Oprah's not comfortable, I bet a lot of people aren't comfortable." And maybe I'm overthinking this a little bit. But then I realized, you know, if you're the only one that puts your hand up, then you'll get shot. But if all of us put our hands up, which is what this webcast is all about, then it becomes a movement. It becomes what we expect to have happen. And here's the real question: Are you willing to challenge the system so it takes care not only of you but everybody else after you? Because at the end of the day, that's what happens.

Oprah: That's right. Because they learn. This is what I learned with my doctors that they learned—they learned from the patients. I mean when I was on thyroid medication and they'd say, "Well, I think you need 10 milligrams." I was on the Thiamazol, and I'd say, "I don't feel that I need milligrams

anymore. I'm feeling like my body really needs an 5. Let me try 5, and then let me try 2 and a half to see if that works." And then they—they listened. I had good a team of doctors at that point.

Dr. Oz: The next doctor—the next patient that the doctor sees maybe gets 5 milligrams.

Oprah: Yes.

Dr. Oz: Because, after all, you're better than he expected and maybe the next one will be too.

Oprah: Absolutely.

Dr. Oz: In addition, when you get second opinions, which just for everybody out there, we only get second opinions 10 percent of the time as a people and—but it changes the diagnosis or the therapy one-third of the time.

Oprah: Yeah, I would think that probably women would be less likely to get second opinions because we have this whole disease to please and don't want to hurt anybody's feelings, and I think a lot of women think that—men don't think this way but women think, "If I get a second opinion, it's going to offend my first doctor."

Dr. Oz: That's exactly what they think. That's exactly what they think. It's about self-esteem.

Oprah: Yeah. Yeah.

Dr. Oz: It's the wrong thing. Put yourself first because after all when else are you going to do it? Remember, if you've got a second opinion and the second opinion person changes the first opinion?

Oprah: Yeah.

Dr. Oz: Think how many lives you changed. That first doctor is going to rethink this issue for the rest of—

Oprah: But let me just ask you this, though as a physician. Would you be upset if a person got a second opinion? And is, in general, do doctors get a little, like, "Well, you want a second opinion?" Do they feel that way? Or is that—is that the way we're thinking they would think?

Dr. Oz: Personally—

Oprah: Is that a false assumption?

Dr. Oz: It's not that it's a false assumption. And being very fair about this, there are some physicians who are going to be offended. However, it depends on how the issue is broached. So I actually

encourage patients to get second opinions because I'm talking to them about heart surgery. I want them to be absolutely positive that I'm right so that when we go into it, if things don't work out, they know it was the right decision to go ahead.

Oprah: Okay.

Dr. Oz: So if you go in to a doctor as a professional and say, you know, with respect say, "I appreciate what you've done for me. Doctor means teacher. Thank you for sharing that information with my. I think to be well educated, I should get additional thoughts. Is okay with you?" It's going to be very difficult for a physician to say no, and they will give you the medical records and they'll feel honored that you've talked to them in that way, and I've seen this over and over and over again. And you know what? If they don't feel honored, you have the wrong doctor.

Oprah: You have the wrong doctor. You have the wrong doctor. All right. Debbie from Springfield, hello, Springfield, Missouri, has a question about artificial sweeteners. Debbie, what's your question?

Debbie: Hi, Oprah. Hi, Oz. Hi, Harpo team.

Oprah: Hi.

Debbie: First of all, I want to thank you guys for taking our questions. I really appreciate the information. You know that saying life hands you lemon, make lemonade?

Oprah: Mm-hmm.

Debbie: Well, of course, nobody wants to drink sour lemonade so we've got sugar and we've got artificial sweeteners. And I understand from watching your shows that there's a lot of shortcomings to those. I understand also that there's a new sweetener out called PureVia which contains stevia, a natural plant sweetener. So my question is this. Dr. Oz, is PureVia a healthy alternative and is it good for diabetics?

Dr. Oz: Well, Debbie, the first issue I need to address I think to answer this fairly is to ask you what the purpose of you using the artificial sweetener is. If it's diabetes, that might make sense. But if it's for weight loss, I'm telling you, there is no data that I've ever heard of, and by the way, this is an international webcast. If someone out there has information to change my mind, please send it to us at Oprah.com. But the most important thing to realize is you are not going to lose weight because you're taking a sugar alternative. In fact, these are called "diet drinks," but these are big companies. They never ever talk about weight loss trials, because they've never done any. So that stated, here's what I think about them.

Oprah: Okay.

Dr. Oz: Stevia—it comes from an herb. It's a newer product. It is natural. I think of the options that are out there, it's one of the better ones. If you wanted to use it, I think it's a reasonable thing to try. There have been a few trials where it's affected, you know, sperm counts and the like, but I don't think that across the board—

Oprah: Made them more or less?

Dr. Oz: Less.

Oprah: Okay.

Dr. Oz: But I don't think it's—there's but—anything really about stevia that makes me alarmed. I actually like agave personally.

Oprah: I love agave.

Dr. Oz: It's very, very sweet, so you don't need very much of it and you can add it in there. It's the same root as tequila, so I guess you could ferment it and drink it. But—but the agave is great for tea.

Oprah: Is that why it makes—it makes margaritas so good?

Dr. Oz: Maybe that's it.

Oprah: That's when I first—no, really, that's where I first ever heard of it because somebody was at my house and they were making tequilas and they had the agave instead of the—

Dr. Oz: I bet that's why they gave it to you.

Oprah: Yeah, yeah, okay.

Dr. Oz: Now the big ones, of course, that are out there—

Oprah: Now I use it on oatmeal. I use just a drop on oatmeal.

Dr. Oz: Me, too. My oatmeal is—steel-cut oatmeal.

Oprah: Absolutely. The only way to go. The only way to go.

Dr. Oz: Steel-cut oatmeal. Some flaxseed oil—

Oprah: Yep.

Dr. Oz: —for the omega-3s instead of butter. I like some walnuts in there. That's optional. Some raisins for sweetness or agave, and that's what I have—

Oprah: You use flaxseed oil on your oatmeal?

Dr. Oz: Instead of butter. It's the best. It's the best, believe me.

Oprah: Really. I hadn't tried that.

Dr. Oz: You'll love that. Love that.

Oprah: Really.

Dr. Oz: So you're getting a wonderful source of omega-3s—

Oprah: Do you use just like a tablespoon?

Dr. Oz: A tablespoon—I actually like a lot of it.

Oprah: Wow.

Dr. Oz: Again, I don't mind getting my fat in that form because it's not coming from—

Oprah: So would I be getting the same thing if I—I use just chopped almonds or walnuts. Would that do the same thing as the flaxseed oil?

Dr. Oz: Walnuts will give you a lot of omega-3s. Almonds, although I love almonds, they don't have nearly the omega-3s that walnuts have.

Oprah: Okay.

Dr. Oz: So they're a good source, but they're not the same as putting flaxseed. Plus, what are you putting in—don't you—you put butter in it then?

Oprah: No, no butter at all, no. I put a little skim milk, blueberries, raspberries and a little chopped almonds.

Dr. Oz: I don't put milk in it. If you're putting skim milk in it, then you won't want to put flaxseed oil.

Oprah: Okay.

Dr. Oz: Instead of your milk then.

Oprah: Okay.

Dr. Oz: Other sweeteners. Saccharin. Tons of data on saccharin. It was one of the ones that got some harsh comments made on it early on because if you gave a ton of it to laboratory animals they would get cancer but there's a lot of history behind it so in some ways it's safer because at least you know what you're dealing with because it's a known devil. Aspartame is one that lasts in your body for a long time. It's the most common sweetener in soft drinks.

Oprah: Which one is that, the yellow packet or the pink packet.

Dr. Oz: No, no, pink is saccharin.

Oprah: And the yellow packet?

Dr. Oz: Yellow is I think sucralose and aspartame—see I don't think—I don't eat any of them. I think the blue one—someone should check this. The blue one I think is aspartame.

Oprah: Okay.

Dr. Oz: But the—but it hangs out for 36 hours and sucralose is—

Oprah: So you're better without any of it are you saying?

Dr. Oz: In my family—again, let me be clear about this. There's no data out there that I'm aware of that conclusively says these things are dangerous or bad for you. But in my family, we don't eat those. I don't let the kids have them. I don't want artificial things in their body, and I question the reason they're taking them because if it's to lose weight, it's not going to work anyway. Not if you're a diabetic—

Oprah: Why won't it work anyway? I think Bob talked about this last night because your— go ahead.

Dr. Oz: Because you're giving your brain a schizophrenic impulse. You're saying, "Hey, it's sweet," but there's no calories coming in. So all you're doing is reminding your brain that you want sweet. And so you'll go out and find your calories. You're going to get your calories anyway. The question is how you're going to get them. Are you going to get them with a lot of head fakes—you know, non-sugar supplements and then eventually get it later on? Or just eat real food and let your body deal with it like it normally would deal with it?

Oprah: Okay. All right. That answered the question. Thank you so much, Deb.

Debbie: Thank you, Oprah.

Oprah: Okay. Filiz is Skyping from Dr. Oz's home country, Turkey.

Dr. Oz: You have a Turk on.

Oprah: Yes. A Turk on. There she is right there.

Dr. Oz: Filiz.

Filiz: Hi.

Dr. Oz: I can do the interview in Turkish if you want. It would be kind of counterproductive.

Oprah: Yeah, counterproductive. You all can just talk amongst yourselves. You can just do that. So what's your question for Dr. Oz? What's your question? Okay. Ask him the question in Turkish and then he'll translate for us. Go ahead. Ask him the question.

Filiz: Oh, really. Okay, all right. (Speaking in Turkish.)

Dr. Oz: Let me translate what you have said, if you could, and then I'll ask the rest of the question in English.

Filiz: Sure.

Dr. Oz: She has psoriasis.

Oprah: Okay.

Dr. Oz: And she's a schoolteacher and it embarrasses her because she has schoolchildren in the class.

Oprah: What is psoriasis?

Dr. Oz: Psoriasis is an autoimmune ailment. Actually, can you show it to us? Show us your psoriasis.

Filiz: Sure.

Dr. Oz: I love Skype. You see on her—on the back of her knuckles she has some red spots there and sort of rashy like? That's an autoimmune ailment. So the skin which normally reproduces itself—thank you very much.

Oprah: Thank you.

Dr. Oz: The skin normally reproduces itself every two months or so. In psoriasis, every two weeks you shed your skin. And so your body's continually feeling like there's a need to heal itself, and so it's

continually shedding this stuff, so you end up with these raw surfaces that are dried and patchy in appearance. You can ask the rest in English.

Filiz: Yeah, right. So after giving it thought, there is this—there's this lake called Balikli Gol, and if you translate it, it's fish lake. And it's said that the fish nibble on your dry skin and it kind of exfoliates it and it says it treats the condition. So how effective do you think it is?

Dr. Oz: You know, this is a topic that I was pursuing last year. There are actually some places in this country—

Oprah: Yes.

Dr. Oz: There you have the fish. And they actually eat away the dead skin on top of the psoriasis. And there are places in Washington and Texas, and we were actually going to do a show on this, but the health commissions of the states intervened. They said, you know, these fish go from person to person eating off the little scales, so they could spread disease. Plus, you can't really clean the water because you'd have to kill the fish. But that lake in Turkey actually— because I called them and talked to them. They actually have these fish. They thrive in the water there, so the fish will come, they'll eat away the dead skin so it debrides the skin, cleans it up. And when UV radiation sees the skin, it actually helps heal this area. So it's very effective for psoriasis. You have to go make trips there once in a while. But I actually love this idea.

Oprah: How would you know—this is the thing. How do you—how do the fish know to go to just the little scaly parts? How do you know they won't start eating on your knee or something?

Dr. Oz: They'll take the low-lying fruit. That's a good question. They're very small fish. They're the size of one of my small fingers here, and they swim around and they'll only take the stuff that's easy to pull off, which is the skin that's already dead and falling off.

Oprah: Wow.

Dr. Oz: And it's actually quite effective. Now, by the way, there are other ways of taking care of psoriasis besides traveling to this Balikli Gol. These are called doctor fish, by the way, because they're an interesting kind of carp that eat away the skin. But transcendental meditation, interestingly, this is one of the first places that we show that that kind of mindful meditation actually is helpful in changing an immune system response. That's a big deal because what it means to us is that you can actually control your immune system with your brain.

Oprah: Right. There have been all these studies done with monks where they've been able to—

Dr. Oz: Yeah, monks do it great. And there's some wonderful researchers in this area that I think have really shed a lot of light on the power of the mind-body connection. And when we look at people

asking questions around the world in other countries like Filiz in Turkey, this is the globalization of medicine. Think about it. We have this webcast—

Oprah: Look, this is our community. This is now our community. We can talk to her sitting in her—

Dr. Oz: This is a sign of how much I love you.

Oprah: What? I've got some lemon on there?

Dr. Oz: Yes. It looks good.

Oprah: I was just squeezing the lemon into my tea. Is this agave? This is agave, right? Yeah.

Dr. Oz: So if you look at what medicine has done historically, it's remained very provincial, right? I practice very differently in New York than they even practice on the West Coast. So within the countries we have big issues. Think about across the world what an opportunity we have. So if this woman asks a question in Turkey, and I try to give an answer in Chicago, and someone in China can take that and spread it to somebody else, now we're globalizing medicine. And these kinds of insights, transcendental meditation, not you know, you think would be tried in a Western-based culture like ours. These doctor fish that can pull off scaling skin, all of these cool ideas of new foods we sometimes bring to the show, it's all an opportunity to share what the world has to offer in the healing arts.

Oprah: Wow. Filiz, thank you.

Filiz: Thank you so much.

Dr. Oz: (Speaking in Turkish.)

Oprah: Yeah. And the same here. Yeah. Same here.

Filiz: Okay. Bye, Bye.

Oprah: Jessica lives near Newark, New Jersey, and has a question. Jessica, hi.

Jessica: Hi, Oprah. Hi, Dr. Oz.

Dr. Oz: Hi, Jessica.

Jessica: I picked up these detox foot patches and I was wondering when I put them on at night, this is how they look, and when I take them off in the morning, this is how they look. What is this all about?

Dr. Oz: Well, that's—this is a big domestic battle for me because I've looked into these things, and here's what they look like, Oprah. You can put this on your foot if you want and reevaluate it.

Oprah: Detox foot patches.

Dr. Oz: Yes.

Oprah: Never heard of it. What's it supposed to do?

Dr. Oz: Well, the argument is that it pulls toxins out of your skin so you put it on the bottom of your feet when you go to bed and when you wake up in the morning as you showed, there it is. That's what it looks like. Exactly like that. So my wife, Lisa, swears by these things. She puts them on herself, the kids, and in the morning they get open, they have that appearance to them. But I have looked and I have looked and I cannot find any evidence that they really pull toxins out of you. You know, they're bamboo vinegar basically on the inside. If you put—

Oprah: And so it changes color because not of toxins because of what?

Dr. Oz: You sweat on them.

Oprah: Okay.

Dr. Oz: And overnight they change color. So I must say they're a little suspect that they're doing much good for you. But, again, these are the kinds of ideas that I really challenge people, making them to prove they work. They might work. Who knows? Maybe there's something magical about—

Oprah: Do you feel any different or—how would we know? Maybe it's like a placebo. Do you feel any different?

Jessica: It depends. I have a bunch of different kinds of them, and some of them they help me sleep better and I'm not sure if it's actually pulling toxins out of me or if it's just because I slept better than night. But sometimes I do feel a little different.

Oprah: Well Dr. Oz isn't giving it the big old thumbs up, right?

Dr. Oz: I wouldn't support it. But as I said—

Oprah: Even though Lisa Oz is sleeping with them on the bottom of her feet.

Dr. Oz: I sleep—they're in the bed every night I go to bed, but not on my feet.

Jessica: I make my husband wear them. He puts them on too.

Oprah: Thanks, Jessica.

Dr. Oz: Thank you.

Jessica: Thank you, Bye.

Oprah: Linda from Oakland, California, is on the phone. Hi, Linda. She's on the phone, right?

Dean: Yeah.

Oprah: Hello, Linda. Something happened. She's not there. But the whole point is you have to be very careful because there's so many different you know, offerings out there.

Dr. Oz: There are a lot of offerings. And you know, in fairness, some of these may work through energy.

Oprah: Yeah.

Dr. Oz: Which we in the West don't really acknowledge to be a real entity because I can't measure it. But we know that cells have energy in them.

Oprah: Well, that's why I appreciate you because you're so open to all different ways of really healing ourselves.

Dr. Oz: You know I grew up a good part of my life in Istanbul. And in Turkey, you sit on this Bosphorus, this big waterway, and you'd look across it, and you'd see Asia. And if you're in Asia, you look across and see Europe. So you're right sort of in this—this melding point of cultures, and you saw how each side was so sure of themselves.

Oprah: Oh.

Dr. Oz: And that's why when we talk about religion, the opposite of faith is not doubt. It's certainty.

Oprah: Wow.

Dr. Oz: Right? And so when you're absolutely positive you've got it worked out, that's when you begin to violate the basic equipoise, the honesty you have to have with yourself and challenging what works or not. This may absolutely work through a mechanism I can't understand. And if that's the case, I darned well better understand a little more about this before I bash it, because this opens up a whole new vista of opportunities.

Oprah: That's what's so interesting about you as opposed to a lot of other people in your profession who immediately just start bashing things and say, "You know, it doesn't work, it doesn't work. You know, when I started talking to my doctors about bioidenticals and the first doctor said to me, "Well, I think that's just a placebo." I go, "It can't be a placebo because I feel noticeably different."

Dr. Oz: Yeah.

Oprah: I feel noticeably different. Yeah.

Dr. Oz: Well, you know, things can work as a placebo.

Oprah: Yeah.

Dr. Oz: They can work because they've got energy.

Oprah: Yeah.

Dr. Oz: And they can work because they have mechanisms we don't understand. All of them are reasonable. It's very challenging for us to open our minds up. Because as much as we like to think of medicine—

Oprah: Do you want some tea, by the way?

Dr. Oz: No, thank you.

Oprah: Okay, good.

Dr. Oz: I don't want to get lemon on my lips.

Oprah: You don't want to get lemon. It's really good and won't keep you up. It's noncaffeine.

Dr. Oz: Thank you for offering. But, you know, so frequently when we go through medical school we are taught in a very organized way about how to learn topics. The organs, for example. It's all based on organs. We actually separate the mind from the body on purpose. Because it's easier to teach about the body if you don't have to worry about the mind getting involved in the process.

Oprah: Do you think that's going to be the way of teaching in the future?

Dr. Oz: Oh, no. It's going to have to change. It has to change.

Oprah: Yeah. Because there are everybody— isn't it mostly accepted now that there is a mind-body connection?

Dr. Oz: It is absolutely. And as we advance scientific knowledge on medicine more and more, we realize that we don't have all the answers.

Oprah: Well, good.

Dr. Oz: There was a while 50 years ago at the height of this passion we had for scientific studies of the body where we really thought that we'd figure it all out with science. But at a certain point you realize, you know, that's not enough. That's not going to answer all the questions that the people who come to us for healing need. We're going to have to go one step past that.

Oprah: So are doctors in med school now being taught differently than you were taught?

Dr. Oz: Yes. There is much more open discussion about the role you have as a humanitarian. There are whole foundations. The Gold Foundation, for example, who was a pediatric neurologist at my hospital woke up one day about 20 years ago and said, "You know what? We're not teaching these doctors to be humans. We're teaching them to be technocrats. And when I'm sick, I don't want a technician opposite me. I want someone to hold my hand. Look at me in the eyes. Understand what I'm feeling." Because suffering and hope are not just things you can take care of with pills and surgery. You know, I like to heal with steel. But if you're going to make someone who is suffering feel better, you're going to do it by giving them hope and giving them a way of thinking about their life.

Oprah: That's so interesting because that's what Dr. Jill Bolte Taylor who was, you know, a brain scientist prior to her stroke, that's what she writes about in *My Stroke of Insight* that when she became the patient, she understood even more.

Dr. Oz: If you want to get a great doctor, have the doctor who has the disease you're being treated for. My biggest shortcoming I think as a healer is I study the heart, I love the heart, I'm passionate about it, I've had wonderful teachers, but I don't have heart disease. So when I'm teaching a patient about the heart, I'm just parroting back what I've been taught by my patients and by my teachers. If I actually had the problem, now I have a whole different perspective on it.

Oprah: Yeah. It's like being trained—having a trainer who used to be a fat person.

Dr. Oz: Yes? They're the best trainers.

Oprah: Okay. Claudia from Franklin, Tennessee, is on the phone. Hi. I remember Franklin, Tennessee. Hi, Claudia.

Claudia: Hi.

Oprah: Hi.

Claudia: How are you, Dr. Oz and Oprah?

Dr. Oz: Hi, Claudia.

Claudia: I have a question about medical records. I've read that some places are putting medical records online now, and I'm wondering if you have an opinion on that and do you think that will someday become a tool for patients to ensure that their records are more accurate and maybe even put accountability in there knowing the doctors are going to have to put something in there the patients will be reading?

Dr. Oz: Claudia, this is happening and it's happening quickly. Those of you out there watching, please put this on your radar screen. Health Vault, which is the Microsoft product, and Google Health. Both of these large companies are making it easy for us as physicians and hospitals to put information, your information on a secure website that you control. So here's the game. I don't want to own your medical records. I don't want to have to control them. I want you to be able to tell me where you want it to go.

Oprah: Absolutely.

Dr. Oz: But we don't want to have a vacuum like we've had historically because doctors use this. They use a pen to keep records. And we should take advantage. You know just when American is going into the 21st century, medicine is going into the 19th century. We really have to leap frog it. I think actually one of the most important things that this administration is going to accomplish in healthcare, besides insuring kids, is to make it easy for us to get those medical records out there. And here's why it's important to you. Here's why you should care. Number one, if I don't understand the ramifications of what I'm doing to you, and I can't collect all the people being treated that way, I can't improve myself. The only data that I get is data that I'm getting because some company paid for a trial. I need to get information that's real. That tells what's really happening in America when we get this operation and that medication and you as a patient, you should have the ability to go into this system and say, "Okay, out of all the other 50-year-old white women who have hypertension, who are not heavy, how did they fare with this drug?" You should have that data. You don't have it today. We have that at our fingertips. I have that for every other thing you might do in your life from banking to media to your hairdresser even. I don't have that in medicine. And we're going to get that I think over the next year or two. It's—I'm very excited about it. So keep those two things on your radar screen.

Oprah: Yeah. It's a new administration. Just before I came down here I was checking. It's six days, nine hours, and 29 minutes before we—

Dr. Oz: But who's counting?

Oprah: Okay. But who's counting? Before the inauguration. Okay. Our next phone caller. Thank you, Claudia. We have another Claudia on the phone. She's from Connecticut.

Claudia: Hi, Oprah. Hi, Dr. Oz.

Oprah: Two Claudias in a row.

Claudia: Thank you so much for taking my call.

Oprah: You're up.

Claudia: I have had recent blood work done in which I had a very high reading of something called the c-reactive protein. As a 46-year-old overweight menopausal and cancer survivor, I am very concerned as to what this might indicate.

Dr. Oz: C-reactive protein is a broad, all-out war that your body's immune system is waging. And it doesn't tell us what it's waging it against. It just tells us that there's a battle going on. So when we see it, it's as important a predictor of heart problems as your cholesterol.

Oprah: Wow.

Dr. Oz: So it's a big deal. Your normal levels are less than 1, ideally. If it's more than 3, we get a little concerned. If you've got an autoimmune problem like lupus, then it's going to be even more than 10. So we're most concerned about getting it, if you don't have some big autoimmune problem. The number one thing I would do is to make sure you don't have an obvious infection somewhere like gingivitis or vaginitis. I mentioned probiotics, very effective for a lot of people in reducing c-reactive protein. Obesity is a big problem with c-reactive protein because it actually—those cells become alive and they begin to secrete your hormones. That's where the issue is with hormone replacement therapy. If you have a lot of extra weight onboard, those fat cells actually make estrogen. So they throw off your levels. So it's much harder for the ovary, which is struggling anyway at the very end of its life, to sort of keep up with the right amount of estrogen. If you have the wrong amount of estrogen, too much of it with no progesterone, you get those hot flashes. So those three things are what I would focus on first. But you want to find out why it's elevated. It's a warning symptom to you, and you want to treat it.

Claudia: Thank you very much.

Dr. Oz: You're welcome.

Oprah: The two Claudias in a row. Thanks Claudia. Thank you very much. Coming to us via Skype from the other side of the world in Shanghai, China, are newlyweds Terry and Clare. Hi, guys.

Terry: Hi, Oprah. Hi, how are you?

Clare: Hi.

Terry: How are you?

Oprah: This is what thrills me about this. So what's behind you? I'm curious, what's behind—what room are you in and what's behind your head there?

Terry: We're in the living room and just behind me, we're ready for the Chinese New Year celebration, so we have things on our special tree.

Oprah: Oh, okay, great. You're right. It's sort of like the—I love this. It's a global classroom.

Dr. Oz: It is. It's a conversation.

Oprah: It's a conversation. Okay, guys. Your question. Thank you. Your question?

Terry: Yes. Hi, Dr. Oz. Nice to see you.

Dr. Oz: Thank you.

Terry: One thing we've been here now for a year since we've been married, and before I came here, I'm a typical English person. I was eating convenience fast food, sweet cookies, chocolate the usual bad things. And once we came here, my wife started me on eating a much healthier diet of fresh vegetables, fish, special produced soup and many other types of foods of that type. But after six months, I started to

notice some changes in my body. Especially my body hair. My wife said to me one day, "Your biceps up here have got more hair than they had before. You've got hair that you never had before." And then I started to look all over my body and I—I had gray hair on my chest, which had disappeared. My chest suddenly became full of hair at least five times more than I had before. On my shoulders and suddenly I had a—my butt was suddenly becoming full of hair, which was really dark black. You couldn't help but say, "Hello, is he turning into a gorilla? What's happening to my husband?" So what we want to ask the question is, why is this hair growing everywhere, which I didn't have before except on my head where I really would like it?

Dr. Oz: Do you have a Simian crease, by the way?

Terry: Sorry?

Dr. Oz: Do you have a Simian crease? Down what that is? It's a crease the primates—it's a crease the primates have along their palm. In any case—

Terry: Oh, on my palm, maybe I do.

Dr. Oz: No, I'm joking. You don't because if you did, you wouldn't be a human. It's a single crease across the palm. You know, I—I love questions like this because you're an anecdote, right? You've got a specific story that's very personal to you. But you put a lot of anecdotes together, maybe it becomes data. Maybe all of a sudden we've got enough pieces of evidence so there are people out there watching this who might have a similar experience as you.

Oprah: You're going to get a lot of got hair-on-my-butt people.

Dr. Oz: They may not be as brave as you. So here's my thoughts. First of all, I'm a little concerned only because there have been some stories about impurities in some of the food supplies coming from China that you may be getting chemicals in the food, and I want to be sure that you're not getting testosterone or another hormone or something that acts like a hormone in the food you're eating. But assuming a more safe option, it might be because you're having less stress, which, by the way, will also change how DHT, this hormone that controls hair loss and growth, works. And if you're eating a lot of green tea now that you're in China versus England, that actually will— will change DHT and reduce it so you actually won't get hair loss. And then for the darkening of the hair, interestingly, soy products might influence that. Leafy green vegetables have something called paba in it. P-a-b-a. It's a precursor to folic acid, and those actually seem to allow hair to turn darker. It doesn't necessarily turn gray hair to dark hair but might make the hair you have darker. And those could all be potential reasons why you're seeing changes, even on your buttocks.

Terry: One thing, Dr. Oz, that we—I do eat that I've never eaten before here is sesame seeds. We have—in China we have a lot of like what they call rice flower which makes the sesame seed, which they put sesame seeds inside if you can see on the screen there.

Dr. Oz: Yeah.

Terry: These are—you boil them and eat them like a dessert. So that's something else that I'm not—that I've started to eat that I haven't eaten before. And also the fresh vegetables and everything else. My diet's completely changed in that way.

Dr. Oz: You also have a better ratio of fats, more of the healthy omega-3 fats. That was one of our action step items for—

Oprah: My question is, Clare, you're eating the same thing, right, and you're not growing hair in all these strange places?

Clare: I'll show you. I—(inaudible)— five color vegetable every day. We can show it.

Dr. Oz: But are you growing hair?

Clare: The bright vegetables. It's green. It's white. You know. I heard it's very important, the colors of the vegetable, yeah. I make the soup every day. For lunch or dinner.

Oprah: Isn't it true the more colors you have on your plate the healthier?

Dr. Oz: It is. And the reason, of course, is because these fruits make colors—and vegetables make colors to protect themselves from the sun.

Oprah: Yeah.

Dr. Oz: So they're antioxidants. So they are naturally protecting themselves, and when you eat them, you're benefiting from what they made for themselves. You showed me the sesame might be you mentioned also, rice bran, the rice germ, all of these also will influence those paba, p-a-b-a, levels. And so they may be partially responsible. Maybe you had a deficiency of that before. If you don't have enough biotin, which is a B vitamin, if you don't have enough folic acid, another B vitamin, and you don't have this paba, which is the precursor to those, then you'll prematurely gray your hair.

Terry: One thing folic acid, in England we have a product called Marmite, which is a use product that we—which contains a lot of folic acid, and I've always eaten this all my life, so I don't think that would have been a big difference. But the fish and the omega-3 I would say I definitely eat a lot more than I ate before.

Dr. Oz: Maybe we should biopsy your buttocks?

Terry: I'm sorry?

Dr. Oz: He's not excited.

Oprah: "Maybe we should biopsy your buttocks" is what he said. Let's biopsy your buttocks.

Terry: Yeah, I mean, I'll send some of the hairs over if he wants them.

Dr. Oz: (Laughter.)

Oprah: Terry and Clare, thank you so much. I don't even know is it the next—it's already the next day there, right?

Terry: Yeah, it's the next day.

Clare: The next day. It's early morning.

Terry: It's early morning, but we'll probably go for a foot massage this afternoon because that is something else that I know you did mention that can have some good effects on your body because that gets rid of a lot of toxins as well.

Dr. Oz: It does. It also relaxes you and that ultimately may be one of the more important things that's happening because if you allow the dyes, the melanin to be secreted naturally and you have the normal mix of hormones at the level of the skin, you'll have a very different pattern on your hair. Anyway, thanks for being with us.

Oprah: Thank you both.

Terry: Thanks. Bye, Bye. Bye, Oprah. Bye, Oz.

Oprah: Bye, Oz. As I was leaving Africa the other day, Sunday evening, as I was leaving Africa, and just as I was going, the guys at the passport thing there. Hi, hi, hi, and as I was walking out to go to the plane, he says, "Please say hello to Dr. Oz."

Dr. Oz: I love it.

Oprah: "Please say hello to Dr. Oz." Our next Skyper is Laura, Skyping from an Internet café in New South Wales, Australia. She's Canadian. She's having a bit of trouble adjusting. What's happening?

Laura: Hello, yes. Well, within the last year I started driving here in Australia. Prior to that I was living in Canada. I was driving there for about eight years. So the change from the right- to the left-hand side of the road was a bit of a challenge for me so I'm actually wondering what happens in the brain when a skill like that needs to be changed and how long can I expect I'll get used to it?

Dr. Oz: Well, you're actually lucky, you know, I've been in places where you cross the border and they switch sides of the road. So that's a pretty dangerous setup. You know, I—I think that the way we change our ability to think about challenges is one of the most brilliant parts of the human brain. It's what gives us the plasticity to address the challenges of life. And I think that if you look at your need now to shift to sort of do everything upside down and backward, something is going to happen because your brain is going to secrete a chemical, a hormone, called brain-derived growth factor. It's like Miracle Grow for the brain. And what this does is force neurons to grow new connections. So like trees growing new branches. Those have to touch each other in different ways. However, it takes two to three weeks. That's why, by the way, all of these self-help programs, they're always two weeks or three weeks? That's how long it takes to change one habit—

Oprah: Twenty-one days. Twenty-one days.

Dr. Oz: Twenty-one days to perfect health.

Oprah: Yeah.

Dr. Oz: So this is 21 days to driving right. But you've got to do it every day. You've got to practice and reinforce it over and over like any other habit you want to alter. We know in surgery when we teach physicians to use those endoscopic tools, the ones that are far away, so instead of touching it yourself, you have to learn to use instruments, it takes a couple of weeks of day-in-and-day-out thinking about it to reshape how way the brain works through these problems. But like all other human beings, you have the prefrontal cortex that will let it happen.

Oprah: How are you liking Australia, Laura?

Laura: Thank you.

Oprah: How are you liking Australia?

Laura: Oprah, I love it here. Yes, I do. I really enjoy it.

Oprah: Is it summer there yet?

Laura: It is. It's very warm right now. It's mid-30s.

Oprah: Wow.

Dr. Oz: She looks flushed.

Laura: I'm on summer holidays. I'm a teacher, so I'm on summer holidays for a few more weeks.

Oprah: Mid-30s Centigrade she means. So tell me is the movie *Australia*, is everybody excited about the movie *Australia* over there?

Laura: Yes, yeah, everyone was really excited about it. I actually saw the show that you did with the actors but I haven't actually gone to see it yet, so I hope to see that soon.

Oprah: That will be great. Thanks for talking to us, Laura.

Laura: Thank you very much.

Dr. Oz: One last little tip before I forget omega-3 fats are hugely valuable in helping people cope with stress and change their thinking patterns. So think about that. Remember 80 percent of your brain is omega-3. I mentioned it earlier. It's one of the most important nutrients to get your brain sharp.

Laura: Okay, thank you.

Oprah: Thank you. Thank you, Laura. So now we have Ansley again from Franklin, Tennessee. We have two Franklin, Tennessees, in one night.

Dr. Oz: I love it.

Oprah: It's unbelievable. Hello, Franklin.

Ansley: Hi, Oprah. Hi, Dr. Oz. How are you all?

Oprah: Good. Good, Ansley. Go ahead.

Ansley: Good. I have a question about cancer. My parents have both been diagnosed with cancer in recent years. My dad actually died from multiple myeloma, which is a bone marrow cancer in 2005. He was 59 years old. And my mom, who just turned 60, recently was diagnosed with lung cancer. And she was a nonsmoker. And actually—(Inaudible.) Excuse me?

Oprah: Go ahead. Finish your question. Go ahead.

Ansley: I'm sorry. Okay. Okay. My mom, she has lung cancer and she's 60, and it's recently metastasized to her brain.

Oprah: Oh.

Ansley: And my parents are very healthy— or they were very healthy. They ate right. They're avid tennis players. They took the right vitamins that you and Dr. Roizen recommend. I'm just a little worried for my own health in the future and how can I stay cancer-free? Is there anything that they missed that I should add to my life now?

Dr. Oz: Well, you mention that your mom is not a smoker. The number two reason people get lung cancer is exposure to radon.

Ansley: Yes.

Dr. Oz: So I would definitely check the basement. And everyone in America, especially in cold-weather areas, the houses are very well insulated, so they trap radon which is a gas that comes from the soil.

Oprah: That's the number two reason?

Ansley: I actually had her house tested for radon when she was first diagnosed and it came over and it was clear. It was okay.

Dr. Oz: For people that don't know that—

Oprah: I never heard that before.

Dr. Oz: They're \$10 kits. They're easy to use. Put them in your basement overnight and you get the readings, and you send it off and you find out—

Oprah: And that's if you have a certain kind of heat in your house?

Dr. Oz: No, no, no. It's not from the heat. It's from the soil. They build—the land releases radon. If you put a house on top of the land and insulate the house, the gas can't go anywhere. It gets stuck in your basement.

Oprah: Wow.

Dr. Oz: And then it permeates. You get sick houses. The houses that people get sick in, a lot of times it's because they've got high radon levels in them.

Oprah: And so what do you do to test your radon?

Dr. Oz: It's a little kit, it's about the size of my palm, you open it up. You put it in your basement. It collects the air for a couple hours, you pack it up, mail it off to the company. You can buy them in any hardware store.

Oprah: Okay and so let's say your house is sitting on a radon heap.

Dr. Oz: You can put vents in to get rid of the radon.

Oprah: Okay.

Dr. Oz: And sometimes you've got to move. But ideally obviously you find—you can put a pit in there to let the radon get back out again.

Oprah: Wow.

Dr. Oz: This is a big issue for a lot of Americans. I don't know if you've got toxins in the water where you live. It's hard to tell. But I always worry about that.

Ansley: Yes.

Dr. Oz: You can have the water checked. Most of the times communities can—will do that routinely anyway, but you can get more extensive testing. You also should check your own genome. Some

people are born—listen, we're all dealt cards in life, and sometimes those cards mean we're going to get cancer younger than we would have gotten cancer. The good news about cancer today is most people can live with their cancer. We're a land of survivors. But if you want to know if you're at risk for a certain kind of cancer, there are genetic tests that can be done to screen for the most obvious ones. These are particularly true for breast cancers and the like, and you ought to—since you've got two cancers in young people, you ought to check. And we talk a little bit about medical history?

Ansley: Yes.

Dr. Oz: The most important thing I think for people to take weigh from this question is if you have two relatives, especially close blood relatives who are younger than 60, which you do, who have a problem that threatened their life, then you have a genetic predisposition to it probably, and that becomes your family history. You've got to tell people about it and have them search into what's going on in your genes that you might need to know about to reduce the chance of it happening to you.

Ansley: Okay.

Dr. Oz: All right. Good luck to you.

Ansley: Thank you so much for taking my call.

Oprah: And how is your mom doing with it now metastasized to the brain? How is she doing?

Ansley: Well, she's actually doing very good. Thank goodness she is healthy because they're treating it pretty aggressively. They are—she's doing 20 rounds of whole brain radiation and then she's going to have a surgery in two weeks that's called stereotactic radiosurgery that will actually eliminate the tumors that are in her brain. So kind of scary but she's doing great and has a great attitude and a great support system, so—

Oprah: Thank you.

Ansley: Thank you, Oprah.

Oprah: Thank you. All the best to you and to her.

Ansley: Thank you.

Oprah: Thank you. Good. Runa is Skyping. Runa from her living room in Iceland. Hello, Runa.

Runa: Hi, Oprah. And hi, Dr. Oz. Warm regards from Iceland.

Oprah: Thank you. I want to know what's the temperature in Iceland? I want to see if it's colder there—warmer there than it is in Chicago. What's the temperature, do you know?

Runa: It's 0 in the Centigrade. That's, what, 32 in the Fahrenheit?

Dr. Oz: It's warmer in Iceland.

Oprah: It's warmer in Iceland than it is in Chicago. Okay, go ahead. Your question? Runa.

Runa: All right. Well, Dr. Oz, I'm concerned about the economic downturn because everywhere I go, there is so much stress in people's life, and I'm wondering, are there any special food or vitamins or herbs that we should be taking to keep our spirits up or maybe something that could give us the balance to keep our mind-body-spirit—

Oprah: Are there any happy vitamins?

Dr. Oz: Happy vitamins.

Oprah: I love that.

Dr. Oz: Well, a couple things. There are foods that we know how people cope with stress. I mentioned omega-3s earlier in that context. We actually did an experiment with the BBC where we—the cab drivers and—had obnoxious passengers get in behind him and ask him questions that were tough to deal with, and then we gave them sardines which have lots of these healthy fats and then redid the test and they actually coped much better. They didn't get lost in the city. They were able to get where they wanted to go and they reported their stress level was lower.

Oprah: They calm you.

Dr. Oz: It calms you. It gives you the nutrients to cope. But across the board, historically, how humans coped with stress was fasting. Elective fasting. You just sort of, you know, drop all the toxins that might be coming into your food supply and—

Oprah: You shut down.

Dr. Oz: Take down—just shut it down and slow it down. And I think that should be part of the thought process for people who really feel wiped out. But we also, as a species, had the ability to find certain herbs that are called adaptogens and these are primarily antioxidants, and they're found in nature in different places. In North America, we have ginseng, for example, which is a very important adaptogen and it helps us cope with the flu, it helps us get through difficult times. In Northern Europe, they have rhodiola. In Siberia, as well. I mean, it helps them live in Siberia.

Oprah: So drinking, you know, like chamomile tea with ginseng in it at night is a very calming thing, I think.

Dr. Oz: Yeah. Calming and it's an adaptogen so it gets you through that. Now, there are other adaptogens as well. The macca, which is used the South America a lot is an adaptogen. It helps them live in those very high attitudes in the Andes. So these herbs have a unique ability to superdrive our system to cope with stressors that would normally weaken us. And I think that's one of the beauties of the planet. The reason we talk about, you know, maybe doing a planet health tour one day is because ultimately the reason for us to take care of this place we live called the earth is because it actually provides the healing, nurturing powers that ultimately will sustain our species. So when we can dive into the beauty of the planet and understand not just at the level of an herb, which is take great tool, but also spiritually how it influences us, how it impacts everything we think about, then we realize, my goodness, this is ultimately where our source of energy comes from. That's why when we hurt the planet, we're hurting ourselves.

Oprah: Runa, thank you.

Runa: Thank you very much.

Oprah: Thank you. That's Runa. I love that name. Trudi is Skyping in from her bedroom in Sweden. Helsingborg. Hello.

Trudi: Hi.

Oprah: Hi.

Trudi: My name's Trudi and originally I'm an American from Connecticut, but I moved to Sweden years ago.

Dr. Oz: Are there a lot of black people in Sweden?

Oprah: I was just going to ask that question. You know I was going there.

Trudi: Well, they're starting to come many from Africa and different countries, and we have Vietnamese veterans were in Sweden. But 50 years ago, I was very exotic. I hope you can understand it. There was no one that could help me with my hair, and now I am 69. I turned 69 the other day, and what I have found out is that from the age of 60, my body lives its own life. My skin has become dry. My hair is brittle. I have dark circles under my eyes. There are ridges in my nails. And it's hard to lose the weight. Is it so that after 60 the body just runs away with you and you have nothing to do with it? Can you give me any suggestions how I can live a better life?

Dr. Oz: Well, first of all, do you take vitamin D at all?

Trudi: Vitamin?

Dr. Oz: D.

Trudi: I take a multivitamin with vitamin D, yes.

Dr. Oz: Okay. That multivitamin probably has about 4 units of vitamin D.

Trudi: Okay.

Oprah: That's not enough.

Dr. Oz: Not enough. You need probably three times that, so you should get an extra vitamin D pill and take it daily. And the reason I bring that up is that can explain a bunch of things that you're complaining about. And so I will start there. But I also think you should watch the show that Oprah is going to do on Thursday because hormone replacement therapy might be of value to you. Some of the things you're talking about, the brittle hair, the changes of the skin, the drying of the skin, the nail ridges, these are sometimes seen in thyroid diseases and the thyroid gland, which is one of the ways your body really speaks to you, it's this butterfly-shaped gland in your neck, and it controls the thermostat of the body. And so if it's not functioning at the optimal level for you, then sometimes taking a small amount of this thyroid gland can actually put you back on track again. It's also possible that you went through menopause later in part because you were generally healthy and if that's the case, you may actually benefit from taking hormone replacement therapy. And this is not something that I just mention casually. I don't want to be lackadaisical about this. These are big decisions, but you have to be involved in trying to help us figure out if that's indeed what's going on to your body, because what you're mentioning—all of these things, your hair, your skin, your nails—these are all made over months, and so they reflect to us the fact that there's something that's slow but continuous going on in your body.

Trudi: Okay, thank you.

Dr. Oz: And I would definitely add some more leafy green vegetables, which are a good source of biotin. So chard, things like that if you can get access to them in Sweden.

Trudi: Chard?

Oprah: Chard. It's actually Swiss chard.

Dr. Oz: Swiss chard.

Oprah: Swiss chard.

Dr. Oz: Ironically. Romaine lettuce. There are other sources. But biotin is that B vitamin I mentioned earlier in the program that's so important to the way we make these nails and hair and skin.

Oprah: Because the dark circles come from what? I've noticed people with dark circles.

Dr. Oz: The bags are fat that's herniated from behind the eye.

Oprah: Right.

Dr. Oz: The dark circles come from several different causes. One of them is we think adrenal gland changes. Some pigmentation occurs with age for a variety of other reasons. Sometimes if you're exposed to the sun, you actually get a ring beneath the eye because it will go around the sunglasses. It will highlight the bags.

Oprah: So how is your energy level too? How is your energy level?

Trudi: Well, I try—I go to spinning twice a week.

Oprah: Okay.

Trudi: And I go out walking. So I try to keep—

Oprah: The fact you actually get up and go to a spinning class is good.

Trudi: I'm 69. Sometimes I feel tired, yeah.

Dr. Oz: All right.

Oprah: Yeah.

Dr. Oz: Well, you know, we have, all of us, the ability to live with the vitality we desire into our ninth, maybe 10th decade. So you should not be tolerant of not having energy you desire at age 69. There are sometimes where you want to be able to look back on life and enjoy what you've accomplished, but I don't think 69 is the right time.

Trudi: No, no. My mother was 98 and my father was 90 when they died, so I have good genes.

Dr. Oz: Good.

Oprah: Very good. Thank you so much.

Trudi: Okay.

Oprah: Thank you so much for calling in.

Trudi: Thank you.

Oprah: I thought that was such an important thing you just said is that we have the ability and should feel that we can live with vitality into the eighth and ninth decade, and I think so many people settle for feeling less because they don't know that they can feel better.

Dr. Oz: I'm amazed at how many people, if you ask them how do they feel? They say fine. But they don't know what fine means. For most people fine means "I'm not in hospital."

Oprah: Yeah.

Dr. Oz: That's 1 percent of us. What I want to do is to waken up the soul of most of us and say, "Listen. Don't be tolerant of being percent of who you can be. Be 90 percent of who you can be. We can all get there."

Oprah: That's what all this Best Life Week has been about.

Dr. Oz: It has been, and it does it beautifully. It's all of those five topics. You need all of them addressed in your life to live your best life.

Oprah: Absolutely. Don't be satisfied with 25 percent of what you can be. All right. Virginia is a university professor Skyping in from her family's home near Washington, D.C. And your question for Dr. Oz? Hello.

Virginia: Hello. First of all, I just want to say I love you, Oprah. And thank you, Dr. Oz. I love your book. *YOU: The Owner's Manual* has just been perfect. Now I have a situation. I want to know what Dr. Oz thinks of it and what he makes out of it. About 19 years ago, I underwent an emergency surgery. When I went in for surgery, they gave me anesthesia through—with a needle, and it shut down my body. I could hear everything crystal clear. So what happened was I said to the doctor, I said, "I can hear you. I hope I can't feel you." Then I got a second jolt of anesthesia that set me out into stark darkness. I was scared. I thought everything had messed up and I was dead. I was out in darkness and there was this presence that touched me on my shoulder and sort of led me across the darkness. It took me to the flickering lights of what I saw as an inferno. It put me right in the middle of that inferno and there were wailing and people were crying and the fire was—was burning brightly and it came up into my feet. Up through—past my ankles going up into my knees. I was praying, pleading, begging for my life. I was asking God to just help me to bring me back to life. I want to see flowers. I want to see the park. I want to see people. Please just let me get back to life again. As I pleaded and as the fire was continuing to come up. Just like a 0-degree turn, it started to dissipate and thank God because the fire started to come down my knees and came out of my feet. This spirit, I call it my angel, that led me back across the darkness, and then I woke up in my hospital bed and my doctor said to me, "We

stopped taking care of you about an hour ago, so it must have been your angel that brought you here." What do you make of that?

Dr. Oz: I've always been curious about these events. I've had several in my own practice. I talked about one patient already tonight. I think that the brain is made up obviously of parts that can actually create very clear senses. So eyesight. Touch. We hear. We taste. But the places in the brain that connect those different parts are often not given enough blood when we have near-death experiences. And so what ends up happening is they become disconnected. So we see ourselves floating. We hear things. We can't connect the hearing to the seeing. All of these things become discombobulated in our minds. And I think that's one of the reasons we have these out-of-body experiences. Of course, the other possibility is that God's preparing you for the end.

Oprah: Mm-hmm.

Dr. Oz: And there's such a constancy to the recollections. Yours is a scarier one than the ones I normally hear.

Virginia: Yeah.

Dr. Oz: Most people—

Oprah: Have a beautiful—

Virginia: Talk about a light.

Dr. Oz: It's blissful.

Virginia: They talk about light.

Dr. Oz: Exactly. They're challenged to come back. They came back as a favor to us, because if it was up to them, they would have kept going. This is one of the reasons we've done so much work looking at the role of prayer and spirituality and healing, and it's so challenging to do because if you ask people, 90 percent of them tell you they think they're being prayed for. They already think they're getting it. And there's an energy out there. I'm convinced of it. How we tap into that energy is where the challenge lies. Is it in fact some nonlocal force out there that colors—touches us and colors us and influences us that we just can't see yet that some of us are visionary enough to tap into in like a lightning rod and pull it down to us. Or is it some energy that we can very purposely manipulate. Or is it a divine force that, you know, we shouldn't really be getting involved in. When I have patients who ask me if they should be prayed for, I always warn them. I said, "Be careful what you're getting prayed for. You should not pray to survive the surgery. You should pray so thy will be done. You should pray for what's best." Because it gets challenging for us to understand this process more. But when you

move out of medical school and the books that give you the answers to the biochemistry and you deal with patients who have read very different books than you read.

Oprah: Yeah. Larry Dossey's done many studies on how prayer really has a major effect on people in—in the medical field.

Dr. Oz: Yeah. Larry is one of the people who influenced me the most because I would read his books when I was just starting my practice. But that stated, we're still struggling to find out at what level it plays a role in our bodies and that probably is the single biggest opportunity of all for the future of medicine.

Oprah: The bottom line is what Dr. Oz was saying earlier, Virginia. They don't know all the answers. And so I'm sure just as your doctors couldn't explain what that experience was for you, you know, nobody knows all the answers and it's really left for you to sort of live with that over the years.

Dr. Oz: Yeah.

Oprah: To figure out what that experience meant to you.

Dr. Oz: But I don't think it was an accident.

Oprah: No accidents. No accidents. Thanks for sharing. Thanks for sharing that with us. Really. Really appreciate it. So this is our year.

Dr. Oz: This is our year.

Oprah: Yeah.

Dr. Oz: You know I've got to say, so many folks have been concerned about the economy and talking about the bad news that day after day after day comes in. As a healer, there's been a big, big silver lining around all this because people when their expectations get messed up and life's not so simple and straight forward, they've got to think deeper. They've got to deal with the realer problems of life.

Oprah: That's why I think it's in our face because we were headed off-course as a nation.

Dr. Oz: It is.

Oprah: As a nation. And the world, really. There's Runa in Iceland feeling the same thing. Yeah.

Dr. Oz: You've always said sometimes you have to be slapped upside your head.

Oprah: That's right. This was the brick for us.

Dr. Oz: It was. And I think I'm seeing over and over again people reshaping their lives. You know, you don't have the money for babysitters, so you spend time with the kids. You can't take that big trip, so you stay together in the house.

Oprah: Yeah.

Dr. Oz: Our expectations change, but not for the worst. They're just different. And I think it's a wonderful growing opportunity for a lot of us to focus on what really makes a difference in our lives.

Oprah: Well, thank you all for joining us tonight. Thanks so much. Whatever time zone you are in, my goodness, Shanghai and Turkey and Iceland and Franklin, Tennessee.

Dr. Oz: Australia.

Oprah: Australia. Paying attention to your health as we all know, as I have learned the hard way, is just one of the ways to start living your best life. We'll be back again tomorrow night, 9 p.m. Eastern/8 p.m. Central. If you're asking yourself, "Is this all there is to life?" Some of what Virginia was just talking about. Or if you just want more in your day, I have an entire panel of experts. We're talking about finding your spiritual path. Finding your spiritual path. Go to Oprah.com to find out how you can watch. It's been delightful talking to you. Yes. Yes.

Dr. Oz: *Enchanté.*

Oprah: Yes. *Enchanté.* If you want to experience this class again or tell a friend who missed it, our webcast will be available tomorrow for free here at Oprah.com. Also, you can download the podcast tomorrow at Oprah.com and iTunes. If you're an *Oprah & Friends* subscriber, the conversation continues with Dr. Oz on XM 156 and Sirius 195, so keep your calls coming. 866-OPRAH-XM. 866-677-2496. And all of our Best Life Week webcasts will re-air on *Oprah & Friends* this Sunday morning. But I will not be on the radiocast with you. I'm going to go to sleep. I'm trying to decide, should I take melatonin or not?

Dr. Oz: Yes. Melatonin works when you have jet leg causes for insomnia.

Oprah: It does.

Dr. Oz: Because remember your brain is saying the sun should be going down.

Oprah: That's right.

Dr. Oz: Or for you, actually coming up.

Oprah: Coming up.

Your Health

Dr. Oz: So now it's got to go down, so take the melatonin, trick the brain tonight. After a couple days you won't need it.

Oprah: Okay, thank you. Good night, everybody.

Dr. Oz: See you on the radio.

Oprah: See you—hear you on the radio.

Dr. Oz: Exactly.

Oprah: Hear you on the radio. Okay, I've going to do the melatonin.