



DR. YAMI CAZORLA-LANCASTER INTERVIEW Plant-Based Pediatrician

By Chris Wark

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DR. YAMI CAZORLA-LANCASTER INTERVIEW

Plant-Based Pediatrician

Today I am talking with Dr. Yami Cazorla-Lancaster who is a board certified plant-based pediatrician, a certified Food For Life instructor, and a certified health and wellness coach. I'm excited to talk to you. Anytime I meet an MD who is a plant-based, I get super excited because I feel like this is the future. There's a wave, a new movement of health and wellness, diet and lifestyle, nutrition conscious physicians that is taking over. And I think it's such an amazing thing.

Dr. Yami: Well, thank you so much for having me on the show. And I'm actually a DO, so I'm an osteopathic physician, which probably brings another element there, a philosophy that aligns with treating and preventing disease with diet and lifestyle.

Chris: What attracted you to that?

Dr. Yami: To becoming a DO?

Chris: Yeah.

Dr. Yami: Well, I had wanted to be a doctor since I was three. And the reason was is because I grew up seeing my aunt... who was a general practitioner in Panama. I spent all my summers in Panama with my grandparents. I saw her practice and I just loved the way she treated patients, and how kind and how patient she was. And I wanted to be just like her. And once I started exploring, I got into college and I realized that there was this whole other side of medicine called osteopathic medicine. And I saw the philosophy, one of the main tenants of the philosophy of osteopathy, is that the body has the inherent capacity to heal itself. And then I felt that because of the way I was and because I wanted to honor her and be like her, I didn't have a choice. That was the way I was going to go. So, I only applied to osteopathic medical schools.

Chris: So, let me ask you this. Would you describe the difference between osteopathic training and conventional MD training?

Dr. Yami: And the other branch is called allopathic, actually. So, for MDs it's allopathic medicine. And really I would say 90% is the same. We can take the same board exams. In fact, I did my pediatric residency at Cincinnati Children's Medical Center. And to be admitted there you have to have good grades and good training and all of that.

Chris: A lot of human anatomy studies.

Dr. Yami: Exactly. You have to do all this anatomy. Basically, you have the same training except for the philosophy being a little bit different. And osteopathy has that main tenant that the body has the inherent capacity to heal itself. And then, just a more holistic look at looking at the entire person, listening, and using your hands more. Because we learned something called osteopathic manipulative medicine. And I got to spend an entire extra year in medical school learning this, as well. Ways that we can use our hands to help people heal. And that's something that I thought I was going to use more, because initially I thought I was going to be a geriatrician. So, the opposite of what I am now, a pediatrician. But in pediatrics I don't use osteopathic manipulative medicine quite as much. But still, the skills that I learned in being able to use my hands to diagnose is huge. So, I'm very glad, very grateful that I chose osteopathy for my training.

Chris: Were there differences in the treatment training as well? Like, allopathic physicians are typically trained to use surgery, prescription medication, and in the case of cancer radiation treatments as well. And that's pretty much all that's in the toolbox. Were you trained...

Dr. Yami: So, we have manipulative medicine that allopathy doesn't have. But just to be honest, it's still very conventional what we learned in osteopathic medical school. So, medical training in general is about treating disease. We still don't get as much as what I do now with just the prevention of disease, or even reversal of disease with diet and lifestyle. We don't learn that enough. Even in osteopathic medical school. I think osteopathic medical school might have a tinge more of that, especially with the philosophy and the manipulation. But apart from that, because we take the same tests and we're all going to end up in the same place, it's still pretty similar.

Chris: Got It. So, how did you discover plant-based nutrition? Let me ask this a different way. Were you disappointed in your medical education, at any point? Did you feel like, "I want to know more. I thought I was going to learn more."

Dr. Yami: To be honest, no. Because when I was in medical school, it's a crazy amount of information. Like it's just so intense. And medical students are inherently just naive and just curious. Medical students are amazing. That's why I work with medical students now, because they just fill you up with happiness and joy because they're just so excited, enthusiastic. So, whatever you give a medical student, they're happy to learn it. They're just like sponges. They want to learn at all. It wasn't until later, through my own journey and through what I saw already as a practicing pediatrician out of residency, that I started questioning everything. Because I'm also one of those people, my personality is, I don't tend to question authority. I don't tend to question the gurus and the people that are teaching me things. And I love learning.

So, I loved learning everything in medical school. But it wasn't until I started seeing things like chronic abdominal pain and chronic constipation and severe anemia caused by dairy. And just with this conundrum, especially here where I live in Yakima, Washington, of so many children suffering from obesity. And me being like, "What? How can I help this? It feels so overwhelming." I felt so helpless. So, it wasn't until that point that I started questioning things and really getting skeptical about everything, including the policies of our own government. The policies that are in the school system, as far as what they feed children. That's when I really started to question things and change the way I thought about food.

Chris: Yeah, I get it completely. And kudos to you for not accepting the status quo, because so many physicians are just like, "Well, I got my degree. I got my job now. And I'm making some money. And I'm just going to grow my practice and just keep doing what I'm doing. And clearly you were dissatisfied with the tools and resources and some of the training you were given. And you decided to further educate yourself. And so, what was the light bulb moment or the first maybe influencer or person or research that you found that got the wheels turning?"

Dr. Yami: Well, it's really not something that would be expected. So, I've been plant-based now for seven years. I just had my seven year plant-aversary. And before that, I had started running, which was also really weird for me because I never thought I was going to be a runner. And I really got into running. I was really falling in love with it. And I started learning about the barefoot running movement. And so, I was reading this book called "Born to Run," maybe you have you heard of it. And in the book, they talk about the Tarahumara Indians and Scott Jurek. And it was just like one of those things. In my head I just got this divine inspiration, I think is what it was. And I just got this idea that I should just try eating a plant-based diet for 30 days to see what would happen, to see if that would make me feel any different or any better.

And I come from the training of, it's not healthy to be vegetarian because as physicians, when we learn about nutrition, it's mostly pathology. So, we learn what vitamin deficiencies look like, like scurvy and kwashiorkor and marasmus and all those kinds of things. We don't really learn about nutrition, the benefits, we just learned about all these horrible things that could happen to you. And especially as a pediatrician, you're like, "Oh no, kids that don't eat meat and dairy, you have to be really, really careful. Because they could have these big deficiencies and protein deficiencies and calcium deficiencies. And their bones are all going to be bad and they're not going to grow." So, that's where I came from, that belief and understanding. So, I had never thought that I would ever attempt even a vegetarian diet. But for some reason, I just got this idea.

And so I just thought I'd try it. I didn't tell anybody in my family, because I'm an experimenter by nature. So, I like trying different things. And I

don't always announce it because it's like people are probably going to get annoyed with me. So, I didn't tell anybody. And I just did a really simple, just whole wheat toast with peanut butter for breakfast, rice and beans for lunch and dinner. That's literally pretty much what I did. Within a few days, my lifelong chronic constipation was cured, which I had been taking Miralax for, as a physician, like vitamin and pediatricians. It's like what we call vitamin [inaudible]. And this was something I had dealt with my whole life. I had been told by my family, "Oh, everybody has it in the family. It's genetic. That's just the way it is." I felt more energetic. I'm a very high energy person, but I was always like up and down, up and down. I felt more even keeled, felt more peaceful and calm. And in the 30 days, I effortlessly lost 12 pounds. And this was after years and years of yoyo dieting, binge/restrict, binge/restrict, all this kind of stuff. So, really that experiment changed my life.

Chris: It's such a simple change, too. I mean, really rice and beans and toast. Were you eating much else during that time?

Dr. Yami: I remember that being the main thing.

Chris: Some salads, maybe?

Dr. Yami: But see, I'm also Panamanian. So, I could eat rice and beans like always.

Chris: Plantains, right?

Dr. Yami: Plantains. Oh, please don't even talk about plantains. We could talk about plantains for a whole hour. I'm in love with plantains. But really I don't remember specifically... I know that towards the end of the month, I bought my first vegan cookbook, which was "Veganomicon." It's like a vegan Bible.

Chris: I've seen the title.

Dr. Yami: It's gourmet vegan cooking. It's amazing. So, with that I was like, "You know, I'm not missing anything. And it's giving me all of these benefits." But it wasn't until after my 30 days that I started getting curious about whether it was safe for my kids. And after another month of research, and I felt confident about it, then I converted my whole family. And it's been about seven years since then.

Chris: That's great. I love that. Our kids eat a plant-based diet. They're not vegan, but they mostly eat plants. And so do I. So does my wife. I mean, our kids are happy and healthy. No deficiencies, no chronic illnesses, no medications, none of that. And again, it's just more evidence that you can thrive on plants and that animal foods are largely unnecessary. And we know from just studies around the world, the cultures with the longest lifespans and the lowest incidents of most chronic disease (like colon cancer, for example), eat 95% plant-based or more. They're not

pure vegan. But it's just very little animal food because it's not available. So, it's actually not by choice. And I love to talk about the rural Africans, which you probably have seen this or heard it. They have a rate of colon cancer that's 50 times lower than African Americans, or any Americans. So, it's like 50 times lower. That's crazy. Which means it's virtually nonexistent.

Dr. Yami: Yeah, I think it's one of those things... And I'm really big into The Blue Zones. We're trying to bring the Blue Zones project here to Yakima. So, I lecture on it and talk about it all the time. And I think that's the main thing I want to tell to people because I'm an all or nothing sort of person. So, I decided to do it. I went all the way. I didn't look back. I have no regrets. But I know that the majority of people aren't like that. So, I think what is important for people to remember is it doesn't have to be all or nothing. Right now, the standard American diet is mostly animal products and processed foods. So, if they can just start taking steps towards a plant-based diet, it's going to be so much more health-promoting than what they're eating currently. It doesn't have to be this radical shift. Because if people know that, I think they're more willing to try to take those steps. And it's just habits. Little by little you just learn new habits. Have a growth mindset. Know that you're not going to be perfect about it right overnight. But you can work towards your goals little by little.

Chris: I love that you said that and I totally agree. I find myself talking to all kinds of people. When I'm talking with people who may not be sick or may not have cancer, but maybe they're a little bit overweight or maybe they're concerned that they'll inherit some of the diseases of their parents... They're concerned they're going to get heart disease or diabetes like their mother or father, cancer, or whatever. And they're eating a terrible diet. I tell them the same things that you said.

I typically say, "Look, you don't have to be a pure vegan. But here's the thing. If you can stop eating animal products three times a day and cut that down to three times a week... Let's start there. And then maybe three times a month. You will be doing so much good for your body." And of course, replacing those things with plant-based diet, whole foods – fresh fruits and vegetable, and little to no processed food. I mean, the experiences people have physically are remarkable, in a very short time. You've seen it, I know. 30 days, 60 days, 90 days. I'm sure you've seen some incredible turnarounds. I'd love for you to share some of those, if some come to mind.

Dr. Yami: Well, right now I have a program called Warrior Woman Wellness. And it's a 16-week program where I work with women. And I just love doing it because I do talk about plant-based nutrition and eating mostly whole plant foods. But also the hunger scale. And I have one woman that's lost 50 pounds and another one that's lost 20 pounds, just in a matter of weeks. And feeling great; having more energy. And those were people that

didn't start out sick, but they did start out not well. They started out not having much energy, not having that zest for life. And whenever you see these women coming in and they're smiling and they're glowing and they just have a new enthusiasm for being alive, that to me is super, super gratifying. And so, that's why I also love working with adults too. Because kids, my main job is to prevent them from getting sick, from getting chronic disease. And thankfully, I have the privilege of doing that. But when I work with adults, I also get to reverse some things and that's really amazing to see.

Chris: Yeah, I love that. I mean, it's amazing when you give somebody their energy back. They become a different person. Before they were just like no energy, grumpy, just difficult to be around. And then when they change their diet, their mood improves, their weight improves, they feel better about themselves, they're in a better mood. Yeah. I mean, things can turn around so quickly. I love that.

I've got a lot of parents that watch and listen to my podcast, and watch my videos and stuff. And they're always asking me, "What do I feed my kids? How do I do it?" What are some ideas or tips or resources that you share with parents? Because they really need help. They want to know.

Dr. Yami: Exactly. I think that's a great question. I'm writing a book and one of the main things that I want to convey to parents is to just keep it simple. Don't overcomplicate things. Don't stress yourself out. And just give yourself credit for always doing your best. That is the main thing I want parents to feel. So, number one, don't overcomplicate it. The second thing is, honor your child's intuition when it comes to their hunger and their satiety. Because one of the most common things I hear from parents is, "My kid just won't eat. My kid doesn't eat enough. They just have a couple of bites and they're not hungry." And this is especially true for toddlers who their main number one job in life is to explore their environment and play and have fun.

So, honor their hunger and their satiety. Don't go around chasing them all day trying to give them extra food. Your job, as a parent, is to make healthy food, provide it to them, and offer to them. Their job, as a child, is to decide if and how much they want to eat of it. And if they are not hungry, it's fine. You cover it up, put it in the refrigerator, and when they're hungry you can give it to them later. So, that's the other thing that I think will help parents calm down. Because parents really get very anxious that their kids are not eating enough. And especially because, as babies, I think they grow so fast. And then the growth slows down and parents just really over-focus on that. They just want to just force feed the kids and make them bigger and stuff. So, that's the second thing.

And of course, one of the main things I talk about is to offer whole plant foods. So, fruits, vegetables, whole grains, beans, nuts and seed butters. A variety of those things. And to know that vegetables are an acquired

taste. A lot of them are bitter. They're not very sweet. They may have kind of unusual textures. It may be difficult for a young child to choose some of them. So, it's okay. Don't stress out if they just don't embrace vegetables right away. That will come with time. But most children love fruit. They love their whole grains. They love their beans, especially if you make it into bean dips. Or puree them into smoothies and sauces. Those aren't a problem. And just keep offering the vegetables. Don't give up, because sometimes it can take up to 20 or 25 times of exposure to that vegetable before a child will accept it.

So, just be calm as a parent. Just offer it. Don't freak out if they don't have it. But really if you do those things, your kid is going to eat healthy and is going to eat well. And you just don't have to sweat the rest of the stuff. Keep your home the Mecca of Health. So, in your house, just have healthy food. Have all the food that you're not going to be upset about if your kid eats. And then outside of the house, you can decide how much flexing you want to do with the diet or with the rules. But if you keep it healthy in the house, that is the majority of the time where your kids will be spending. So, you have a lot of control over what they're going to be eating. So, those are my main tips.

Chris: Those are great tips. You're speaking my language 100%. So, I want to comment on a couple things you said. One is, I'm glad you brought up the force feeding thing. Because I have traumatic memories as a child of being force fed vegetables I couldn't stand, gagging at the table. And then, my parents are done and they get up and I can't leave the table until I finish. And I'm literally just choking it down or trying to hide it in the napkin or something. And early on, we've definitely been guilty of doing the same thing. Like, "Come on, you need to eat a little more." Encouraging our kids to eat a little more.

But that's such a good point. You don't want to make eating healthy traumatic for your kids. Right? And so, one thing we started doing – and I got this advice from some other parent who I would love to give credit to, and I don't remember who it was... But years ago they said, "Well, what we do is we make them take a thank you bite." And the thank you bite is, let's just say it's broccoli. You put Broccoli on their plate and they're like, "I don't want to try it. Or I don't like broccoli," or whatever. And you say, "Well, you've got to take one bite. You have to have one bite. You have to chew it up. If you don't like it, you don't have to eat any more of that."

And they have their bite. And we say, "Thank you for taking a bite. What did you think? Did you like it or not?" And a lot of times, at first, they're like, "I don't really like it." And we're like, "Well, that's okay. Thanks for trying it." And then, they have other stuff on their plate that they like or whatever. And we would just keep doing that. "Here's a little bit of salad. Here's some broccoli. Here's green peppers." And it works really well.

So, that way they try it. There's no force feeding. There's no, "You've got to eat all this broccoli or you can't leave the table" kind of stuff. When I was a kid, what made me gag the most, for some reason... My mom would make French cut green beans, where they cook them with almonds or whatever. And for some reason I just couldn't. Oh, I don't know what it was. Something about the green beans and the almonds together. It just would make me gag. I still can't eat it. I love almonds, I love green beans. Don't want them.

Dr. Yami: That is so funny. Well, one thing that's super important to me is, part of this obesity epidemic... We try to simplify it, but it's multifactorial. And part of it is just that we eat too freaking much. We eat too much. So, even people that eat a whole food plant-based diet, there's people that are overweight and maybe even obese because they just simply eat too much food. And kids are born knowing exactly how much to eat. And if we train them out of that and are always having them practice overwriting their satiety, they're going to get comfortable with overeating. They're going to feel like overeating is a good thing. They're being rewarded for overeating. And those habits are amazingly difficult to break. So, even if you eat healthy food, it is possible to overeat. You just get too many calories.

And that's important to me that we don't train our kids to overeat. Even people that don't eat healthy foods, they're doing the same thing with whatever food they have in front of their kid. They want them to just finish the whole thing because the parent's going to feel better that their child ate enough. And I understand originally where that came from because there were times in our history as humans that we didn't have enough food. So, it was important for our kids to maybe over-nourish, so that we could survive times of famine. But that's just not the reality in most households today in the United States.

Chris: It's not. And that's so insightful that we're reinforcing unhealthy eating patterns by force feeding our kids. I mean, it makes so much sense. And another great point about... Yeah, there was a time in history where force feeding made sense because food scarcity was a real thing. And the parents – mom and dad – weren't sure when the next meal was coming. A lot of the poor folks in America weren't eating three times a day. They might've been eating one solid meal per day, or one small meal per day, or sometimes one meal every couple days. And so, yeah, it was a lot more important to tell your kids, "Finish your food."

So, I also want to touch on the types of food that kids love. Most kids love fruit. People always ask me, "Well, what do your kids eat?" Our kids love fruit. They're both different though. One of them loves bananas. The other one can't be in the room with a banana. Like she just has this aversion to bananas. So, we have a variety. We know what they like and we try to give them the foods they like. Fruit is easy. Kids love starches. So, potatoes, rice, and beans. Those are easy foods to give kids. They're

not going to make them fat. That's the reason our kids aren't obese. Not our kids. So many kids are obese now. Is it pushing 20% of kids that are obese? Something like that.

Dr. Yami: Yeah, I think it's between 15 and 20 are overweight/obese?

Chris: That's crazy. Overweight, yeah, not obese. But yeah, somewhere between 15-20% are overweight. And we've done the same thing. We keep it simple. We've figured out, over time, what foods they like. We keep introducing new foods. Their tastes have changed and their pallets have expanded. And I mean, just come to find out, I want to say just a couple months ago, all of a sudden, my kids love green peppers. Bell peppers. They just love bell peppers. And they just want to eat bell peppers. I'm like, "Great!" I don't know where it came from. I don't know what started it. But now they love bell peppers. I'm happy about that.

Dr. Yami: Yeah. And I think that the simpler that we can have our kids eat, the better. Because it really is a good habit to have for life to be able to eat simply. I know when people first transition to this kind of diet, we get obsessed with recipes and wanting to make the lookalike foods – from the omnivorous side to vegan side. "Let's make vegan pizza and vegan burgers and all this kind of stuff." But my kids, like literally their favorite meal is rice and beans. And it's one of those most popular things, trying to get my likes and follows up on Facebook. People want recipes. But if they saw how I ate every day, they would be snoozing. It is so simple. We eat so simply. There is nothing exciting about it. But it's nourishing and it's beautiful and it's health-promoting.

Chris: I'm the same way. Yeah. I mean my, my diet is very simple. I eat oatmeal for breakfast pretty much every day. Lunch is usually a smoothie for me. And then dinner, we cook up some veggies. It could be rice and beans, sweet potatoes, collard greens, just a variety of veggies. Although my wife makes dinner and she really has gotten great about presentation. She's really gotten into it. And we keep saying like, "We should take a picture of this." And we don't. We need to do it more often. But this whole thing is, every meal does not need to be an event. It doesn't have to be this culinary masterpiece.

And the problem is that we've been conditioned in our culture... We live in a rich nation. And we have all the food we could ever eat and more. We're like throwing food away like crazy because we can't even eat all the food we produce. But we've been conditioned that every meal has to be this explosion. People feel like if it's just rice and beans, it's not enough. It's too boring or whatever. You could live on rice and beans pretty much your whole life. You could probably go many, many years without any significant deficiency on just rice and beans.

Dr. Yami: Yep. And it's filling. So, that's why I think part of it is just letting our kids develop that pallet on their own. Learning how to be satiated with food.

Knowing that there's a time and a place for fun with food. There is. I mean, why not? We have to live our life and and it's a fun thing. But most of the time, food is fuel. So, we don't have to over obsess about it, either for ourselves or for our kids.

Chris: Yeah. So, I'm sure you've noticed that there has been a movement against grains and legumes, basically by the paleo community. Do you have anything to say about that?

Dr. Yami: Absolutely. I have parents almost every single day... The type of practice I run is a primary care pediatric practice, but with an emphasis on diet and lifestyle. So, I have parents asking me almost every single day, they're very health conscious, "I'm afraid of beans now. I'm afraid of these lectins and these phytates." And going back again to the blue zone study, we know that that's one of the common things they had in the diet. It's legumes. And it's not just legumes here and there. It's legumes pretty much every single day. Of course, they're cooked. We're not going to eat them raw. We're not promoting for people to eat them raw. Maybe they could have some toxicity in that form.

But I think that if beans were to have a significant toxicity, we would not have almost 7 billion people on this planet. I'm from Panama. I was born in Panama too, but my mom grew up in the country. And my grandfather is going to be 90. And he ate beans like probably twice a day for his whole entire life. And he's still working out in the farm and everything. So, I think it's really important to take this whole context of data and history and culture, and let's put it into perspective a little bit. Yeah, we find these little things, but that's really honing in on these... It's called reductionist, to try to reduce it down to these little molecules, knowing that our bodies are way more complex than we can even understand, at this point. There's a lot of things that we do know. There's a whole heck of a lot that we don't know, at this point.

So, let's just look at culture. Let's look at multiple types of studies. And I think, overall, not only should people not be afraid of eating beans, they should make it a point to eat beans every day. At least one serving. And I prescribe that. I use food as medicine in my practice. So, I tell parents... I'm sure they think I'm a broken record because I ask about it every single well child check and I recommend it every single well child check. And I give them ideas.

"Okay, so if you don't like eating whole beans, how are we going to do it? Do you like hummus?" Every kid likes hummus. "Do you like black bean dip? Can we puree it into the pasta sauce? You can even put it into smoothies, put white beans into smoothies." Dr. Greger has one where he puts the beans into the smoothies. There's all kinds of ways to integrate beans. And now, of course, the roasted chickpeas are a big craze and you can find them almost everywhere, which is great. So, there's lots of ways

that we can integrate beans. Don't be afraid of them. Make it a point to eat them.

Chris: They even make noodles out of them, now.

Dr. Yami: Yes. And they're so good. And all kinds. But you have the pea and lentil and chick pea pasta and black bean pasta. I've had all of those. So, there's all kinds. There's no excuse. We should be eating our beans.

Chris: Beans are awesome. Yeah, I know. It's such a strange phenomenon that has been circulating for a while. This anti-legumes idea was just based on false information. But I love what you said. If you step back and look around the world for a second, some of the healthiest, longest living populations... In fact, almost all of them with the longest lifespans and the lowest incidence of many chronic diseases are eating beans every day – one to two servings typically. And if beans were a problem... Let's just use some real simple logic here. If beans were so unhealthy and so problematic, then the people eating the most beans would be the sickest and have the shortest lifespans. And the opposite is true. Right?

Dr. Yami: Exactly.

Chris: So, yeah, I'm constantly fighting this stupid dietary battle about legumes being unhealthy. And the lectins thing is also just such a silly thing. It's just, unfortunately, creating what I call food fear. Unnecessary food fear that these tiny lectins in food are somehow poisonous to your body, as if your body can't handle them. And we know that cooking destroys lectins anyway. It's not even an issue. And then, the thing about phytates is literally... Phytates were just completely twisted around and slandered because they're actually amazing anti-cancer compounds, aren't they?

Dr. Yami: Exactly. Yes. And Dr. Greger on nutritionfacts.org has videos. I refer people to that all the time because he's able to explain it better in his videos and show graphics and those kinds of things. But yeah, I mean, beans are super high in antioxidants. I think when people think of antioxidants, they think of fruits and vegetables. But beans are up there really high in their antioxidant potential. So, they're really good to decrease our risk of cancer and other chronic diseases. And the fiber. They're going to be the biggest bang for your buck, when it comes to getting fiber. And fiber in itself is health-promoting. So, there's just so many reasons. And I tell people, "Don't be afraid of them. Eat your beans."

Chris: Eat your beans. That's great. We just need to put it on a shirt.

Dr. Yami: I'm going to make one that says: "Fiber is my favorite F-word." That's definitely going to be on a shirt. But "Eat your beans." That's a good one. We'll think of that one too, for our merchandise.

Chris: I will buy one of those shirts. Make some men's t-shirts. I'll buy one. Make sure you print it on a good soft shirt. I'm a T-shirt snob. And I hate when I buy a shirt with a great logo and it's all hard and crunchy and like, "Oh, this is an awful T-shirt."

Dr. Yami: Well call you beforehand, make sure we get your approval.

Chris: I'll give you some brand recommendations. So, that's great. That's wonderful. This has been so helpful. And I know a lot of people are going to be excited and encouraged by what you're talking about. Just keep it simple. Focus on fruits and vegetables. Keep introducing new foods to your children. Figure out what they like. And there again, like I said, their tastes will expand over time, which is great. Don't force feed them, just keep encouraging them. And we do the same thing you said, which is we feed them super healthy at home. And by the way, if you don't want your kids to eat it, don't buy it. Don't buy junk food. If you know you shouldn't be eating junk food, stop buying junk food.

If it's not in the pantry, you're not going to reach for it. And you're going to have to reach for something healthy, if that's all it's in there. Same with your kids. If they want a candy bar, like, "We don't have any candy. We've got apples. Do you want an apple?" So, we feed them super healthy at home. And then, yeah, if they go to a friend's house, go to a birthday party, we're not micromanaging their diet. "Great. Go to the birthday party, have a cupcake. It's fine." I'm not worried about it because we feed them super healthy at home. What they're eating 98% of the time is what matters. And the other few percentage points aren't enough to make any difference.

Dr. Yami: Exactly. And I think there's something actually beneficial about thinking about it that way. Parents, of course, you all have your own decision making capacity and you can decide how to do it at home. But whenever you give children the freedom of choice when they leave the house, it doesn't feel like this restrictive thing that mommy and daddy says I have to do. They have to develop their own algorithm on how to make decisions for their eating. But then they can actually start putting two and two together. If they know that when they have a cupcake, they get a tummy ache... It's just an objective piece of information. It's not this whole like, "Oh, I can never have cupcakes. I want it so bad." And then, they're not even going to pay attention to the fact that it makes them feel sick when they have it.

So, I think it's really important to allow our children that practice. Because eventually they're going to be out in the world alone without us. They're going to have to make those choices. So, it's good for them to practice. And then, we can talk about it. When they come home from the party and they're like, "Ugh. I don't feel good." I can be like, "Oh, do you think it could've been what you ate?" And sometimes they're like, "No, no, it's not that." But sometimes they're just like, "Yeah, I had two

cupcakes and I had a juice." And their bodies aren't used to that. So, they can start seeing the effects of those types of processed foods on their body. And that's way more powerful, to anchor those feelings and how they make choices in the future. Because it becomes more of a "how is it going to make me feel?" sort of decision, rather than a "that's a bad food, that's a good food."

Chris: Yep. And not attaching guilt to it or making it like a forbidden fruit...no pun intended. Kids tend to want to rebel against their parents. Not all of them, but sometimes. So, if you're too much of a health Nazi, then there they're going to want to be kind of like, "Well no, I want to eat junk food because my parents are healthy."

Our older daughter is kind of getting some of those tendencies. And so, we had to kind of think about like, "Why is she doing this?" She was just kind of being rebellious. And so, we would just have conversations with her about, "Those are just not the kind of foods you want to eat. And here's the reasons why. It's not just because we're telling you not to. I mean, why don't you think about why?" And so, we would talk it through with her. And that was very helpful. Now our other daughter who's younger, she just doesn't like junk food. She doesn't like it. It's great. I mean, you put it in front of her and she doesn't want any. So, I mean, that's cool. It makes you feel good when they make good choices and you don't have to say, "You know, you probably shouldn't eat that," or whatever.

So, okay. I want to ask you about vaccines. Vaccines are controversial. You were hoping you could escape this one. And before you answer... So. We approached it in a way that was a compromise of sorts. I wasn't very hip on vaccines. I know some unvaccinated adults and...they're fine. And I was a little concerned. We had our kids after my cancer thing. And I was especially, I guess you could say, suspicious and prejudiced against the pharmaceutical industry, in general. And mistrusting of them, in general. So, I was like, "I don't know. I'm okay if we don't get the kids vaccinated." But my wife was concerned. I mean, there's a lot of fear surrounding vaccines. "If you don't get it, your child's going to get whatever." So, we weren't really on the same page.

So, we decided like, "Okay. We don't need the Hepatitis B shot when the baby is a year old. My wife doesn't have an STD. She doesn't have hepatitis. She's not a prostitute or a needle drug user. So, we were like, "Okay. We can say no to that." And then, we kind of thought through the others and spaced them out. And we just kind of took our time. And our kids are great. They don't have anything. They don't have asthma. They don't have ADHD. They don't have any issues. And so, I feel like we kind of balanced it out and got through the vaccine thing unscathed. So, our kids have had some but not all. Anyways, so just to give you background. What are your thoughts?

Dr. Yami: Okay. I actually already have a spiel on this, since I talk about it almost every single day because of the type of practice I run. Before I forget though, I do want to say – because I have a lot to say on ADHD – I personally don't feel like there's any vaccine connection between that and a lot of chronic diseases that I feel like we're starting to connect to vaccines. The first thing I always tell parents is that there is excessive fear mongering on both sides of the debate. There's the people that say, "If you vaccinate your child, you're essentially killing your child and you're a bad parent." I have had wonderful parents that have been approached at grocery stores by people asking them, "Are you vaccinating your kids?" And then, the person's like, "Well you're killing your kids." Okay, that's just unnecessary.

Chris: That's not productive.

Dr. Yami: We don't need that. But of course, then there's the other side of the debate that parents get kicked out of practices if they don't vaccinate their kids. They are made to feel ashamed if they come to the ER. They're basically told, "Well, your kid is sick because they weren't vaccinated." And the disease has nothing to do with the vaccine preventable thing. It wouldn't have been prevented by vaccines. So, we need to, on both sides of the debate, chill and stop trying to make parents feel bad. That's the first thing.

The second thing is, what I like to tell parents is, it doesn't matter what you put in your body. And you know this more than anybody. Whether it's the water you drink, the air you breathe, the food you eat, things that you get injected into, and medications you take, there's going to be risks and benefits to all of those. So, are vaccines 100% risk-free. Absolutely not. Neither is water, air, or food. So, there's definitely things that could happen, whether it's anaphylaxis or Guillain-Barre or any of those things. Yes, it can happen.

But are there potential benefits to vaccines? Just like drinking water and eating food, yes. There are potential benefits. And when I talk about the benefits, I talk about things... We are trying to prevent death in your child. I'm not trying to prevent inconvenience. Actually, I feel like if we had a vaccine against the common cold, people would jump on that. Because parents are always in here like, "I'm not getting any sleep. I missed three days of work." There's no vaccine against the common cold. It's really inconvenient. It's unlikely to kill your child. But something like tetanus or Haemophilus influenzae B or whooping cough in a one month old, those can absolutely kill your child. And if we have something that can potentially prevent that, it's more thinking about. It's worth considering that for your child.

And a long time ago when we didn't have that many vaccines, parents were more than happy to get them because they saw a lot of those deaths. They saw kids on the street that died of measles or that got polio

and had really adverse complications. So, now we don't see a lot of those things, which I think is part of it. But I agree with you 100%. I feel that it's completely fine to individualize medical care. I do have a master of public health, so I completely understand why we do things the way we do. Because whenever we get the broad population, we're able to make more massive change. However, I agree. Most of my families, their risk of Hepatitis B is incredibly low. Nobody in the household has Hep B. They're not going to get polio here in Yakima, Washington.

So, there's some things I am not stressed out about. But for kids that are going to be at daycare, they're going to go to school, they are exposed. And I have a lot of families that they love to play outside, and tetanus is in the dirt. So, I think that it's worth thinking about it. But to take some of the fear and emotion out of it, let's look at things a little bit more objectively. And try to make a choice based on risks and benefits, rather than all of these stories that are made to incite fear in us. And it really causes us to just not make good decisions. So, that's my feeling about vaccine.

Chris: I appreciate that. I appreciate that. It's obviously well-reasoned and you've thought it through. And I'm curious... I was in a conversation with someone the other day and then I meant to google it, but I never did. Has there been a reduction in chicken pox because of the chicken pox vaccine?

Dr. Yami: Yeah, yeah, absolutely.

Chris: When I was a kid, a lot of the kids were getting chicken pox. And I got it later. I got it when I was like 17. But I guess you don't hear about it much anymore because the chicken pox vaccine is effective or whatever. Chicken pox is not typically that life threatening. So, some people argue, "Well, if it's not a life threatening disease, the vaccine is really just a way for the pharmaceutical industry to make more money," or whatever. Which is, of course, true. But anyway, you have to acknowledge that what we know for sure is that some actually do work. Some vaccines actually do prevent the disease that they are intended to prevent.

Obviously the flu vaccine, that's hit or miss. I mean, it's developed like six months before the flu season. And they're guessing what strain it might be. But to some parents, obviously, some of the big concerns are really the contaminants that can come in vaccines. Like peanut allergies in vaccines, there seems to be some concern there that that's driving a lot of early childhood allergies. Any thoughts? Or like chicken embryos facilitating some of those types of allergies?

Dr. Yami: Yeah, I think that we could sit around and theorize about things like that. Until it's studied, we're not going to know the true answer. But a lot of the things and most of the things that people say are caused by vaccines, I've seen happen in kids that have never had a vaccine in their

life. So, yes. Do we have more toxins in our environment, in our food, in our water, in our air? Absolutely we do. Our population is huge and we're developing more and we just have more. Should we blame vaccines for it? I'm not sure. Does it mean that there's more risks of vaccines than there are potential benefits? I think not. I think still, for some of those vaccines, the benefits outweigh the risks, in my eyes. I have children, too. I have two boys and they're vaccinated. And so, that's how I feel right now. I reserve the right to change my mind if there's data that comes in the future that I feel makes me feel that the risks outweigh the benefits. But at this point, that's how I feel about the vaccines.

Chris: How old are your kids?

Dr. Yami: 8 and 13. Both boys.

Chris: Two boys. I've got two girls – 10 and 13. So...13 year olds...

Dr. Yami: Well, you have a girl. I have a boy. So, 13 year old boys... Even though he looks like he's a half grown man, still intellectually he acts more like an 8 or 9 year old. So, I'm cool for a few more years. Thank God.

Chris: Yeah. My 13 year old is definitely an early teen. So, she's great. She's still super sweet, but she kind of has her ups and downs. She's a little more moody than she was a few years ago. But she still likes me, and still wants to hang out and stuff. So, that's good.

Dr. Yami: Awesome. Be grateful.

Chris: I am. I definitely am. Definitely trying to get as much quality time with her as I can, while she still wants to hang out with me. Well, thank you so much. This has been fun and interesting. I'm just so glad to know you. I'm so glad we were able to connect. And like I said in the beginning of the call, anytime I meet a plant-based MD I get excited. Because I see this movement happening. I feel like in my lifetime there's going to be just such a big shift in the way that medicine is practiced. And the diet and lifestyle medicine is really going to get a huge foothold in primary care, and hopefully in chronic disease care as well. I mean, that's really the only way we can turn our healthcare crisis around. It's not with more drugs.

Dr. Yami: That's right. No. And thank you for having me on your podcast. It has been really fun. And I look forward to turning the tables and interviewing you for my podcast soon.

Chris: Let's do it. Well, Dr. Yami this has been awesome. I hope you have a great day and enjoy that 100 degree weather in Washington. I'm enjoying it here in Memphis.

Dr. Yami: Thank you so much. I hope that you have a plant-astic day.

Chris: Awesome. You too. Hey, everybody. Thanks for watching. Please like and share this video. Spread it around. Help us educate the world on plant-based nutrition. And guess what? MD doctors – she's a DO, I'm sorry if I called you an MD earlier... But doctors are behind this movement. And by the way, is there a website resource to find plant-based physicians?

Dr. Yami: Yes, there's a few of them. And now I can't remember all of them. But there is one called plant-baseddocs.com. And you can go through the Plantrition Project to find the other one. And I believe that one now is through PCRM, as well.

Chris: Physicians Committee for Responsible Medicine. So, I'll dig those up and link to them in the show notes, everybody. And link to Dr. Yami, so you can find her. And all that. Again, thanks for watching. Thanks for listening, everybody. Please like and share it. And I'll see you on the next video. Bye!

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