

MAN ON FIRE PRESENTS
**THE COMBUSTION
CHRONICLES**

**EPISODE TWENTY-TWO
RETHINKING MEDICINE**

HOST: SHAWN NASON
CO-HOST: MATTHEW NADU
GUEST: DR. WILL COLE

NOVEMBER 18, 2020

To download Episode 22 notes, [click here](#).

Shawn: Welcome to "The Combustion Chronicles" podcast, where bold leaders combined with big ideas to create game-changing disruption. I'm Shawn Nason, founder of Man on Fire, and your host for "The Combustion Chronicles." Throughout this series, we're bringing together the most unique and influential minds we could find to have honest conversations about not being okay with the status quo, blowing shit up, and working together to influence our shared future. We believe that when bold leaders ignite consumer-centric ideas with passion and grit, the result is an explosion that creates a better world for all of us. I'm here with my co-host Matthew Nadu.

On today's episode, we're speaking with Dr. Will Cole. Dr. Cole is a leading functional-medicine expert, consults people around the world via webcam and locally in Pittsburgh. Dr. Cole specializes in clinically investigating underlying factors of chronic disease and customizing health programs for thyroid issues, autoimmune conditions, hormonal dysfunctions, digestive disorders, and brain problems. He is also the author of two books, "The Inflammation Spectrum" and "Ketotarian." Dr. Cole was named one of the top 50 functional medicine and integrative doctors in the nation and is a health expert and course instructor for the world's largest wellness brands such as MindBodyGreen and Goop. Welcome, Dr. Cole.

[00:01:32]

Dr. Cole: Thanks, guys. I appreciate it. I'm excited to be talking with you.

Shawn: Well, it's great to have you on the program. Been diving into some functional medicine research the past few years in our consulting group, MOFI. We work in the healthcare space a lot. And even recently, in the past year, one of our clients has done some work and looking into this space. So, for our listeners who are unfamiliar with the term functional medicine, can you explain what exactly is functional medicine?

Dr. Cole: Yeah, absolutely. So, if I had to break it down, like, the main differences between functional medicine and conventional medicine, first thing is we interpret labs using a thinner reference range. So, anybody that's listening will know, "Hey, when I get my labs, I'll have my number and then I'll have this reference range, this x to y interval of numbers that I'm being compared to. Well, that reference range is largely based on a statistical bell curve average of the population of that specific lab. So, if you go to another lab, you'll probably see that biomarker will vary from lab to lab. And who are the people that typically go to labs? They're people with health problems, sadly. So, there's a lot of people that go to their doctor, "Hey, like, Doc, I don't feel good. Like, I'm having this fatigue, or the weight loss resistance, or the

anxiety," or whatever type of inflammatory symptom they're dealing with, and the doctor runs the basic labs, and these labs come back "normal," even though the person intuitively knows, like, "Heck, this isn't normal for me." And they're told, "You're just depressed. Here's an antidepressant." You know, all these well-intentioned reasons as to why, how somebody could be having symptoms despite, "normal labs," but what they are unintentionally telling their patient is they're a lot like the other people with health problems that they're being compared to.

So, in functional medicine, and my post doctorate education and training is in functional medicine and clinical nutrition. So, I'm trained largely by the Institute for Functional Medicine, IFM. And that's who's trained the doctors at the Cleveland Clinic's Functional Medicine Center. And we use a standardized number IFM does. So, we're looking at optimal vibrant wellness, which is typically a thinner range within that larger reference range where optimal health resides. So that's what we're comparing the person's labs to, to understand these grey areas that exist on a continuum, from optimal wellness to chronic disease. And then the second thing is we run more comprehensive labs based off of a health history, but things like microbiome issues, and toxicity, and chronic infections, and hormonal imbalances, like, what are the root reasons why somebody feels the way that they do to get evidence-based perspective as to from a data standpoint, what's going on? And then we realize we're all created differently. There's not going to be a cookie-cutter, one size fits all approach to getting healthy. Because I could have 100 patients with, like, let's say fatigue. What's driving someone else's fatigue may not be what's driving that person's fatigue.

So, is it a microbiome issue, like, a gut problem? Is it a hormonal problem? Is it a toxicity issue? Is it a viral infection? It could be a confluence of those factors. So, we just see, like, those symptoms, like fatigue, or anxiety, or weight gain, or depression, we see those as check engine lights, like a check engine light on a car. It would be preposterous for me to just cover up that check engine light and say, "See you in six months." But that's what's largely being done in the standard model of care. They're trained to diagnose a disease and match it with the medication. But I wanna say, "Okay, why do I have the problem in the first place? What's going on underneath the hood, proverbially speaking, that's misfiring, that's dysfunctional, that's out of balance, that's causing that check engine light to be on in the first place?" So that's what we do. We are evidence-based, tailored medicine, if you had to, you know, put it in more succinct terms, but that was my long-winded answer that you got too.

Shawn: That's great. I think our listeners need to understand this because it is such a rapidly growing field in medicine, but I also know Will, that it's a very controversial thing that's

happening in medicine. I've been in healthcare 10 plus years on the patient experience side. You know, and my biggest bitch, and moan, and groan is we're not taking care of the patient as individuals. You know, and then this whole movement around population health, you know, but what I'm hearing from you is, this is really an individualistic approach. What attracted you to move into this functional medicine approach and space, knowing it is such a disruptive and controversial area?

Dr. Cole: That's a good question. And it's interesting. Right? I mean, I agree, like, some people could consider it to be controversial. And I would certainly say it's disruptive. It's a sad state of affairs when getting somebody healthy is controversial. And that's really, it is disruptive to the system that's largely designed to diagnose the disease and manage that with medication. And that's really the only option. And I'm not anti-medication. Nobody's anti-medication in functional medicine. We just asked the question, what is the most effective option for you that causes you the least amount of side effects? And for some people, medications fit that criteria. Some people are alive because of medication. So, it's not an either or, they're not mutually exclusive. It really should be, how do we get this patient better? How do we get this patient healthier? And for many people, medications don't fit that criteria but yet, that's the only option that they're given. There's no agency on their health. It's just, "Just take this pill, shut up, see you in six months" because that's how the system is set up. And it's been co-opted that way over the past 50, 60 years, maybe longer. So, to me, it's not radical at all. It's not controversial. It shouldn't be. And, if anything that says more about the people that perceive it that way than what we're actually doing because all we're doing is getting their labs looking great.

We're getting them feeling good, we're getting them healthy. We're decreasing risk factors, mitigating risk factors, like, all good stuff. That should be the most vanilla thing, amazing positive thing that you've ever heard of in healthcare. I think that's my large perspective of it. And the second component of it is that when you have something like the Cleveland Clinic, a very mainstream conventional system, opening up a multi-million-dollar functional medicine center, they're not throwing millions of dollars on something that doesn't work. They're throwing that money because they know, they've seen the data, they've seen the outcomes, they know that they can get people healthy through this amazing field of healthcare called functional medicine. And they're certainly not throwing that type of money on something that is untested, that has no data behind it. So I think it just...all you have to look at is look at these mainstream leaders in the system that are brave to go and say, "Look, just because something that's the way it's always been done or has been done for decades now, it doesn't mean we can't be innovative and think outside the box, and really go where health is, and go there, and do what we need to do to get our patients healthy. And so, I think that speaks volumes at the

Cleveland Clinic, and other conventional systems, and hospitals that are opening up integrative and functional medicine centers. I think that speaks loudly. Honestly, I think that the voices that are still saying that it's controversial or have something negative to say about us are clinging to an old system that's dying, and decaying, and archaic. And I think that the leaders in the conventional system like the Cleveland Clinic should be looked at as being the new age of health care. And I'm glad to be a part of it.

[00:09:09]

Matthew: Yeah, well, it's Matthew, just somebody who's not in the healthcare world, I mean, all this just sounds like common sense to me. And that makes me feel more seen and gives me more reason to wanna go to the doctors, instead of avoiding it. For me, this just all makes sense.

Dr. Cole: Yeah, thanks. When you look at even the statistics of what's going on in the country today. I mean, the United States spends more on health care than the next 10 top spending countries combined. Yet despite all the billions and trillions of dollars we're spending on health care, we have the shortest lifespan and the most chronic disease of all industrialized nations. So, it'd be one thing for a critic of functional medicine and to actually produce amazing results but they're not. It's like the failing student judging the honor roll student and saying something negative about it. To me, it's like I'm about the data. If you get the person healthy, if you're getting them feeling great, then fantastic. If you're not, then maybe be open-minded in learning something different. And I think IFM is doing amazing things. And you look at who's training these doctors, the Institute for Functional Medicine, the majority of doctors in IFM, that's being trained in their post-doctor education and training, they're all conventionally trained doctors, but they didn't learn this stuff in school. And I show the data in my second book, "The Inflammation Spectrum," is that most doctors according to this one study in this medical journal, most doctors would fail a basic nutrition test.

You can learn more about nutrition on a YouTube, you know, series than you'd get in, like, all the years in medical school. So, these doctors are brave and they're going and saying, "Look, I have a passion for my patients. I have a passion for health, and I didn't learn this in medical school." And they go to something like IFM to learn this. I think that speaks loudly. I think there's this sea of doctors that are waking up to the fact that they have to do something different to see something different. I'm thankful to be able to be a part of this conversation.

Shawn: Yeah, well, this is Shawn. Like, I guess I'm gonna say let's cut through the bullshit here. Because what you're doing, yeah, it's amazing, but let's be real, there is a whole system built

around making money in health care that's not at all about the patient. I call myself a recovering health executive, health care executive. I worked for a big insurance company who is driving nothing but dollars, in my opinion, to keep people sick, to keep dollars going. So, the people that are actually out against you is the bullshit system that is created because it's a system built to make money, not to make patients healthy.

Dr. Cole: Right.

[00:11:53]

Shawn: So, we use this word disruption, in truth-tellers, our men's work that we do. We live this line that says, you know, living authentically in the land of bullshit. So, do you see yourself, Will, as a disruptor in health care? And if so, what inspires you to be that disruptive force to basically say, put up your middle finger to traditional medicine in the system to really make people healthy again?

Dr. Cole: Yeah, I don't know. I don't think of myself as a disrupter. My head's, like, so focused in my lane and just focusing on getting my patients healthy. But I guess if I look up and compare myself or try to be objective about it, yeah, I think you could say that, but I don't know. I'm a peace banker by nature. Like, I don't wanna... To me, it's like, if that's disrupting the system, I think that says more about the system than me and what we're doing. And I'm just focused on getting my patients healthy. And for me, I guess it's how you look at it. My focus is on my patients and getting them healthy. And yeah, I guess if you're looking at it from a different vantage point, that's disruptive, but that's just a sad state of affairs for people that even needs to be disrupted. Like, why is that even a thing?

Matthew: To me that sounds like you're just cutting through the bullshit, like you see where the bullshit is, and instead of going with that, you're like, "Nah, nah, nah. This is the way that I'm going."

Dr. Cole: I mean, yeah, exactly. When you look at this... Like, I'm a nerd. Like, when it comes to, like, spreadsheets and you see somebody's inflammation markers be, like, super high, high sensitivity C reactive protein inflammatory marker that the American Heart Association, the CDC, used to gauge inflammatory markers, which is linked to heart attack, stroke, like autoimmune conditions, tons of bad stuff. And you see that go up from, like, 20, which you want it under 1, and it's at 20, and this person's a compliant patient, doing everything the doctor is telling them to do, and it's super high, and we can get it down below 1 in six months. Like, that is awesome. And yeah, if some doctor that doesn't know what they're talking about

judges some functional medicine for that, and that's disruptive. The phrase I hear from my patients telling me, they said, "Whatever you're doing, keep on doing it." And those are the guys that I really respect because that's not their tool in their toolbox, but they're just seeing the numbers and it speaks for themselves. And they get their ego out of the way. And they just see their patient. "Whatever you're doing, keep on doing it." And to me, that's cool. So maybe that's disruptive, I don't know.

Shawn: Well, I love what you just said, though, Will, about, you know, those with the god complex or the ego, right? So, I really, really appreciate your realness and you're being authentic with us to say, "I really just wanna take care of people and I don't understand..." But you are really being disruptive, this whole space is. You know, I have a friend of ours, she's from Ohio, pharmacist that claims that functional medicine saved her husband's life. And this is a... You know, she's a pharmacist who studied medicine and said if it wasn't for this functional medicine piece, that her husband wouldn't be here today. So, kudos to you and the work that you're doing and everyone else is doing.

Dr. Cole: Thanks.

[00:15:14]

Shawn: So, obviously, you know, we're learning to live in this new norm. We're in the middle of this massive public health crisis. What has been your response and what role can functional medicine play in this type of crisis when we start talking about what COVID-19 has done to the world?

Dr. Cole: Yeah. And to your last point about pharmacist, it's interesting that our top patient base, when you look at the data of, like, who are coming to us online, our top agent base are people in the standard model of health care. So a lot of nurses are top patient base our nurses, pharmacists, and then engineers, and school teachers, which I find are funny too. And over the years, I've asked them, "I mean, why am I seeing so many, like, engineers and nurses, and pharmacists?" And they all have this common love of spreadsheets and data and, like, getting to the root cause, and I think that speaks loudly. These are not, like, crazy fringe people that are wanting, like, doing woo-woo stuff. This is just people that are hardworking, that are seeing their health trending in the negative direction and wanna do something different. So, I think that's where functional medicine really thrives. Metabolic issues or inflammatory problems or insulin resistance, these other hormonal problems that are really putting people at risk, and even looking at something as simple as vitamin D deficiency. And certain studies that I've seen come out of the journals looking at this being connected to vitamin D deficiency linked to these

immune problems when somebody gets COVID-19. So obviously, we're not gonna... We can't avoid somebody getting the virus, that's on them, and that's a society, like being smart about all this stuff. But if someone, God forbid, does get the virus, what can we improve their chances as much as we can and control the things we can control? And that's where we really thrive at in functional medicine.

Shawn: Love it. Love your approach there. So, in 20 years, Will, what does the world of functional medicine look like?

[00:17:12]

Dr. Cole: Hopefully, it's a lot more commonplace. It's interesting. If you look at the trajectory of just... I've been in the space professionally over the past 11 years. Like, personally, I've always been interested in health and wellness. So I could say I've been observing this space since the '90s. And, like, seeing that trend from the '90s, and then the early 2000s, and then me getting into this 11 years ago, professionally, and running a telehealth clinic for the past 11 years, it's very interesting to see the amount of rapid development in a very short period of time. So, when I started out in functional medicine, there was no Cleveland Clinic Functional Medicine Center. It was not a thing. And there were just pockets of us talking about this in the space. And that's why our telehealth clinic started all this time. We're one of the first in the country, if not, like, the top, like, five or six in the country to start doing telehealth because it was just born out of necessity, and there weren't that many of us. There are people in different states and countries that would hear me talking or writing about this stuff and then for me to provide access to them, it would have to be online. And now telehealth especially rapidly developing because of the pandemic, people are having to innovate and to learn this overnight.

So, I think more and more of that will happen over time because 11 years ago, it was radical for me to say diabetes could be reversed or that food had something to do with autoimmune flares and your blood sugar. It was radical. We would get hate phone calls and say, "How could you lie to people about this?" And now it's not radical at all. It's very basic. So I think that consciousness is being raised in the United States and I think people just cannot ignore when they're looking at the standard model of care and the train wreck that it is, largely, they're realizing, they're waking up, well, because that old archaic sort of viewpoint that our parents had and definitely our grandparents had, was that you know, if someone with a white coat said it was gospel, and people... I largely have to give the internet credit to this is that people are educating themselves. They're not just hearing it from, like, the 5:00 news and they're hearing it from their doctor, and then that's it, and reading a paper, they're actually having agency over their health in a fresh, new, innovative way. And I think podcasts are another part of this too.

You have this long-form educational tool that people can hear things they never would have heard of a generation or so ago unless they really were seeking it out.

So, I think that the democratization of this information is really powerful. And I think that's in large part why you see more and more people aware of functional medicine like never before because it's spread like a good virus around the internet. And people are starting to realize they have choices in their health care. They don't just have to take this pill, "see you in six months." They can actually do something for themselves for their health. And that's unprecedented in humankind. So, it's a really cool time to be alive, I think in health care. And I would assume that in another 25 years, it would continue to grow out of necessity because the current system is unsustainable. And we have to do something different to see something different.

[00:20:35]

Matthew: For me, I see, like, a bright light in all this is one, how you operate via your telehealth. One, that's, like, incredible, especially for people who wanna go to the doctor but they're afraid to go to the doctor because they might get something or whatever their thing isn't I don't wanna say good enough, but you don't have COVID so don't come in, like, "Your thing doesn't seem as bad," which for me as, like, someone who's not in health, I kind of got that message. But then also, just with the functional medicine and realizing that everything is case by case, and it's not necessarily just take the blue pill and you're good.

Dr. Cole: Thank you. Yeah, I love this stuff.

Shawn: Well, your passion definitely shines through and I, you know, huge supporter of you. We follow you. I read your Instagram, have regularly for several months. So, thank you for your passion.

[00:21:27]

Dr. Cole: Thank you.

Shawn: So, we're kind of coming to that time that I mentioned to you when we were talking about having you on the show. These three questions we call the combustion questions. So it's gonna be three questions that I'm gonna ask you that have been randomly selected from our scientific algorithm, Dr. Cole.

Dr. Cole: I'm nervous [crosstalk]

Shawn: Yeah, you know, they've been really thoughtfully thought out for you. So, here is your combustion questions. Question number one. If you started a band, what would the band's name be?

Dr. Cole: (Dr. Cole laughs) How about The Autophagy?

Shawn: Okay. Explain.

[00:22:14]

Dr. Cole: Autophagy is, like...I'm a super nerd here, but basically Autophagy is your body's inherent recycling systems. It's like this cellular renewal. Just think of it as like anti-disease, like pro anti-aging pathway in the body. It's all your healthy cells gobbling up and eating the dead dysfunctional cells. I think that's a pretty killer band name.

Matthew: So, an anti-aging death metal band. I'm digging it.

Shawn: I can't wait to see that. I think we can mark it that one, Matt. There's big things there. Okay, combustion question number two. What's your favorite pair of shoes?

Dr. Cole: Hmmm, the most comfortable pair of shoes I have are these Yeezy, like their black, I don't even know the number. Kanye has so many different numbers for all these shoes. I just have them because they look cool. They look like old school, like tennis shoes I had in the '90s. Their black, I don't know but they're Yeezys. I don't know what number they are.

Matthew: Say no more. Say no more.

[00:23:17]

Shawn: Taking yourself back to the '90s? And for your last combustion question, and you're gonna have to put your doctor hat on for this one. Okay? What do you think about suitcases?

Dr. Cole: I really think they're a poor use of space.

Matthew: Amen.

Dr. Cole: I don't know why... Like, suitcases.... I want something more malleable that can like smash in like the back of a car or like overhead on a plane. Suitcase seems so much like, where the heck are you gonna put that on a plane? It seems very difficult for me.

Shawn: So, does that mean, Will, that you're like a duffel bag guy?

Dr. Cole: Yeah, like, give me the best duffel bag. I think it's a way better use of space and you can take it more places without being such a pain.

Shawn: I'm gonna be looking for it. So, well, thank you so much, Will. It's been an honor to have you on here, and we're really excited to see where functional medicine goes in the future. So, thanks for being with us.

Dr. Cole: Thanks, guys. It was a great conversation.

Shawn: Thank you so much for listening to this episode of "The Combustion Chronicles." None of this is possible without you the listener. If you'd like to keep the conversation going, look up Man on Fire on Facebook, YouTube, Instagram, Twitter, and at manonfire.co. Give us a shout. Let us know what you think. And please, subscribe, rate, and review if you like what we're doing and if you don't do it anyways. And remember, always stay safe and be well.