[00:00:00] **Dr Mike T Nelson:** Welcome back to the Flex A Diet podcast. I'm your host, Dr. Mike T. Nelson. On this podcast, we talk about all things to increase muscle performance and improve your body composition, all within a flexible framework so that you do not destroy your health in the process. Today on the podcast, we're getting ready for the new year.

[00:00:23] So happy new year. This is of early January. And to kick off the new year, I wanted to talk more on the psychological side of nutrition. We've got two guests today Jovi and Evita from Jovita Lifestyle, and we have a nice discussion about more the mental side, the psychology side, some coaching tips, some practical takeaways that you can do when you are working with primarily more on the nutrition side.

[00:00:56] And if you're looking to elevate your nutrition and recovery game, the Flex Diet Certification will open once again on January 15th, 2024. So currently it's only planned to be open twice this year. That's the plan, maybe three times, but this is the first time it'll be open and it definitely won't be open for many months after that.

[00:01:20] So go to www. FlexDiet. com, F L E X D I E T dot com, you'll be able to get onto the exclusive wait list there. And if you happen to be listening to this during the week of starting January 15th through January 22nd, you can go to Flexadiet. com and find out all of the information about the certification.

[00:01:45] I would advise you to get on to the waitlist because we're going to have some pretty cool fast action bonuses and some other great stuff for you there. So go to flexdiet. com for all the details and this is a certification that covers primarily nutrition and recovery. Everything from protein, fats, carbohydrates to NEAT, which is non exercise activity, thermogenesis, walking.

[00:02:09] A little bit on exercise, sleep, micronutrients, and much more. And we also have exclusive interviews with special guests ranging from collagen and testosterone with Dr. Keith Barr, protein with Dr. Stu Phillips, overeating protein with Dr. Jose Antonio, flexible Helms, and much more. So go to FlexDiet.

[00:02:35] com for all the information. Get on to the wait list there. It will be open January 15th through the 22nd, 2024, and enjoy this Flex Diet podcast.

[00:02:48]

[00:02:49] **Dr Mike T Nelson:**

- [00:02:49] Welcome back to the Flex Diet Podcast. And today we're talking a little bit about disordered eating, because God knows nobody in the fitness world has one, any opinion on this, and two, there's no shortage of crazy stuff that goes on related to nutrition.
- [00:03:06] My first question is, What would you consider disordered eating and just for the overall context here, we're not talking about the formal diagnosis or anything like that. We're just talking about some of the mindset and just the behavioral things that we see in fitness and what are potentially some better ways to do it.
- [00:03:24] **Evita:** Yeah, totally. So I would say disordered eating is anything that is detrimental to your daily routine or mental health or surrounding your thought about yourself. Self image your self love, if it's something that you put your worth into This is what I need to do to look this way or to lose this weight It's considered disordered in my opinion.
- [00:03:48] There's obviously varying degrees to this and people will argue that any type of tracking is disordered, and, they have their views about that we have our views about that as well, but I would say if it's detrimental to the person, and it's something that is consuming their thoughts at some point within a day, or a week, it's considered disordered eating.
- [00:04:14] **Dr Mike T Nelson:** Got it. What would be an example, so people can Wrap their heads around and I agree with your definition on that, by the way,
- [00:04:21] **Evita:** I would say the most common form of disordered eating without people even realizing that it is a form of disordered eating is an all or nothing mentality surrounding dieting or diet culture and what that looks like for women, especially living their lives jumping from diet to diet.
- [00:04:40] And assuming they need to do extreme measures in order to receive results and then obviously which is unsustainable and they're striving for like perfection, that's not possible. So they fall off and that kind of cycles women into that, those years of just stopping and starting and losing and gaining.
- [00:05:00] And that's a big contributing factor to disordered eating. Young women up to women in their old, until the day they die. That's my background with this because I saw my mother have that type of Live that life around food and it controlled her and her weight controlled her and that's trickled down to me and shaped my opinion on What healthy looks like what dieting looks like

why we all have to like I strove so hard to just be skinny and I felt like that was going to make me happy.

[00:05:37] And it took years and years to reframe my mindset around that. Then obviously other examples are going to be things like a binge and restrict cycle, so people that restrict restrict, and then they go overboard and binge eat. There's emotional eating eating that's triggered from an emotional place, an emotional response, and they're using it as a coping mechanism.

[00:05:59] And then obviously we have Full blown eating disorders, anorexia, orthorexia where you're so obsessed with ingredients and things being clean and healthy that it consumes you. So there's a multitude, but I would say the biggest one and the most common one is that all or nothing restrict and then go overboard cycle.

[00:06:24] **Dr Mike T Nelson:** I do think, it's always puzzled me, and I don't have a good answer, that In, in fitness and especially with nutrition, it seems like people want an extreme approach where if you look at like business and you say, Hey, I want to get a promotion this year, like your first thought is, yeah, I'm probably gonna have to do more work, but I don't think your first thought is, what's the most extreme amount of work I could possibly do to get a promotion.

[00:06:51] It's okay, I'm going to do more work, what's the threshold where. Yeah, I'm gonna do more, but I'm not gonna go crazy. Or it seems like with nutrition, the thought isn't I'm gonna try to lose 20 pounds, and, maybe I'm just gonna cut back a little bit on my food.

[00:07:05] It's Oh no, I gotta do whatever the latest fad diet is, Or, use a Zempic, or HCG diet, Or not eat for four days in a row, or whatever. It seems like people are attracted to the most extreme thing they can possibly find.

[00:07:21] **Evita:** There's multiple reasons for that. One, I think we've been conditioned this way because of diet culture and just like growing up with all the different things like back from Slim Fast and the Nutribolic diet, these diets that promise these fast results and it was on the cover of every magazine I remember growing up lose 10 pounds in five days, like all these things.

[00:07:41] And so part of it is marketing and what we expect because of that we've been conditioned to think that way. Two, people want instant gratification, and our culture, I believe, is moving farther and farther in that direction because things are so easily accessible to us at this point. It's not like

in the past where, even just something like going to on a road trip was hard because we had to like, Print out the directions and figure it out.

[00:08:10] Now everything is so easily accessible that I think it's making people less patient. And That's human nature in general is wanting things fast. I also think too, because people played the comparison game and we look on social media and people post these extreme transformations and a lot of people don't talk about the blood, the sweat and the tears and how many times.

[00:08:34] You failed and how these people a lot of times aren't maintaining these results when they got to those results and, like the dark, darker side of the transformation story so they see that and they think, okay, how long did it take for that person? I want to do the same thing. It's a comparison game.

[00:08:54] So I think it's all contributing factors, you could speak on this too. He's, he was an extreme kind of, uh, reform, a reformed extremist, I should say, in the sense of exercise addiction and just being all the way in or all the way out.

[00:09:11] **Jovi:** It was more or less on my behalf. My extreme tendencies were, that was the focus every day.

[00:09:17] It was, that was it. There was nothing else to talk about. There was nothing else to think about. So it was only eating clean and only working out. So I know that, yeah, you can get there, but the goal is to be able to live long and keep the results. You want to be able to keep the business going. So I try to keep that attitude with everything going.

[00:09:34] You want to keep the relationship going, keep the fitness going. You want to be able to do things for a long period of time. So now moving forward, I just think longevity. So my extremeness were really high and really low.

[00:09:46] **Evita:** And we don't think that way, especially as younger individuals, like it's people, it's like children.

[00:09:52] They want things right that second. And you have to explain to them patient, all this, whereas as we grow we learn that through life experience. But a lot of times when with diet culture, when you have like repeated that you were conditioned to think a certain way, and then you've.

[00:10:08] Been repeating those cycles for so many years. It's hard to reframe your mindset around that pattern, thought pattern of this is a lifelong thing, like

what you're doing now, we have to keep up these habits. For the long haul, maybe we don't have to be doing things, obviously we're not going to stay in a calorie deficit forever, but we still have to have some semblance of, cutting back on portions or portion control or making the making that decision of is this important to me right now?

[00:10:36] Can I wait? Can I, things like that, moderation has to always be a part of our lives. We can't just live life in excess and expect, results on either side of the spectrum.

[00:10:51] **Dr Mike T Nelson:** I've always wondered about this too, that I think part of the difficulty with an extreme approach is the reality is, for the short term, shocker, it actually works, right? So there's a part of your brain that's Hey, I slash my calories to, cause women must eat 1200 calories per day and guys, 1850.

[00:11:10] Don't ask me where these stupid numbers come from, but that just seems to be the numbers all the time. And yeah, if you legitimately eat 1200 calories per day, you are going to lose weight in the short term. So I think there's part of a. The way it's set up is it hijacks your brain because you did get the result, like you did get a legitimate result, it's just, it's not very sustainable for a long period of time, and if you extrapolate out over enough time, like you mentioned, there's a whole bunch of costs people don't associate into that, but I think it's Do you wonder if when people think back on it, that they have a selective memory that they only remember the parts where it worked and they forgot all the horrible things that happened to them along the way?

[00:11:54] **Evita:** Yeah, I absolutely believe that. And I've suffered with that as well, because in my adult life, I've been over 200 pounds and I've been 98 pounds. Oh my gosh, that's a huge difference. Yeah, I had a massive massive journey with binge and restrict cycle. And then ultimately it ended in anorexia.

[00:12:15] And then once I went into recovery, it was very hard for me to wrap my mind around. I couldn't do these extreme methods any longer. And it was like. Sad to me in a way like I was like, it's almost like an addict that like has to come to terms with the fact that they're never going to drink the alcohol again or whatever it is they're addicted to.

[00:12:37] iT's a, it's like a death like you have to accept it and it's a bizarre kind of thing to think about but I would. Compare myself to my skinniest or like the pictures that I thought I looked the best or whatever and I Never looked back and looked at those pictures of the nights that I was crying over like body

dysmorphia thinking I was fat when I was 98 pounds and or the times that I Was, almost passing out from not eating, my hair was falling out, all these things refusing to go out with friends because it was getting in the way of what's the food going to be like?

- [00:13:15] All these things. I don't think, I didn't think back on those times, I just looked back on that's what I, where I want to be, how am I going to get there again? So having to change Your thought around that is so hard and realizing like your smallest self is not your healthiest self nor is it your happiest self and that's a huge thing with women because they associate being skinny or getting to their goal as being happy and that's 100 percent not the case.
- [00:13:42] I was unhappy in both extremes. So there, there's a huge mental aspect to this and learning to love yourself and accept what's Healthy for you and realistic for you and stop comparing yourself to these times that were unsustainable. I also think it's difficult too because. yOu get compliments in times that you were the most unhealthy and you're struggling behind closed doors.
- [00:14:07] So you, people will be, Oh my God, you lost weight. No one's, no one says, Oh my God, you packed on a few, you, you lost weight. Oh my God, you look so great. What have you been doing? And a lot of those times were times that I knew I couldn't keep this. There was no way I was going to be able to keep this up.
- [00:14:24] So it messes with you because it's damn you're not worthy. If you're not in this state that you're starved and upset 24 7. That's my mental journey with it. And I have to take that and teach our clients with that because I've walked in their shoes and I see their pain and I see where they are at currently and I have to meet them where they're at and level with them.
- [00:14:48] And we have to do a lot of mental reframing in that department and it takes a long time. It takes a long
- [00:14:55] **Dr Mike T Nelson:** time. Do you think part of it is we don't, just the fitness field in general doesn't talk about the cost to achieve certain things. So I think of an extreme would be any type of physique sport, whether it's guys or women or bikini bodybuilding, whatever pictures of what they look like on stage, which Raymond has been around the sport long enough.
- [00:15:18] That's probably a couple minutes to maybe a couple hours at best, right? It took forever to get there. Anyone who's been around competitors on

those days, they're not super happy. They're not running around going, man, I feel amazing today. This is the best day ever. It's they're barely upright. Like they feel by their own admission, like horrible, but you just see the picture of whether that's, the VLN doll aesthetic or whatever is an individual thing, but just as an extreme example, those are.

[00:15:48] The pictures and the photos that are then used literally year round on some of their like Instagram, right? So I know some people have pictures taken, for their show. They only compete at me once that year, but all their pictures are from that period of a couple days, right? And they don't necessarily talk about the pros.

[00:16:08] And the cons of it. So I think we have this mental image of 1, that must be healthy, because look how lean they are, and generally it's not very healthy at all. To I don't know, we see it all the time, so it must be somewhat sustainable, which it's not. And then 3, You don't hear anyone really talking honestly about the cost to actually get there.

[00:16:32] **Evita:** Yeah, and that's something that we're trying to break that stigma with our program and also on social media because I talk about it constantly like I even last year like I went on a little bit more of an extreme calorie deficit than I normally would knowing what the outcome would be because we were getting married so I was like we wanted this one to me was my stage moment you know so.

[00:16:56] In the sense of like how a fitness competitor would do a little bit more of an extreme method for that day. Pulling water and, doing things for water retention to be as little as possible. That obviously the minute you drink water, it's coming back and you eat a carb. It's coming back because you're down to that lean of a form.

[00:17:17] And it's not at that point, you're just manipulating. I not to that extent, I put a little of those tactics in and I knew Okay, this I'm going to go on a reverse diet after this. It's probably I'm probably going to gain pretty rapidly in the beginning because my hormones are going to be somewhat shot and my metabolism is going to be adapted.

[00:17:39] And I push this deficit out for longer than I know I should have. And I Told my clients and I told, I taught, I documented it on social media to say listen, I'm a coach and I know the repercussions, but I'm just going to be honest and transparent about this, but this isn't real life for me.

[00:17:59] I know what real life looks like. I know what maintenance looks like. So I know that I have to walk around about 15 pounds heavier than what I'm going to be that day. And I think the more we have those conversations better it is for our Industry, but it's hard because it's, people want the clickbait people want the bring their clients in because of this, that and the other.

[00:18:22] But I think that's where we try to set ourselves apart with the honesty, transparency, empathy and like leading with like our life experiences. Yeah.

[00:18:33] **Dr Mike T Nelson: And**

[00:18:33] **Jovi:** I also think that, dimension about the process to speed things up. It's a very dark road. And I don't think people, certain people that clients that we have or clients in general are already prepared for that because it's, patients are low.

[00:18:48] The the hair is thinning, can't sleep, sex drive is gone. Anybody says anything to you wrong, it's ready

[00:18:56] **Dr Mike T Nelson:** to snap. Yeah.

[00:18:58] **Jovi:** You're, it's just a lot of it's like a demon that's inside of you where it's this is not me. I shouldn't be acting like that along this road to get to that process.

[00:19:08] So if it's not something like a, a stage prep or anything like a movie role, it's like, why are you doing that for what? What is this? You know what I mean? And I always want to get back to my clients. What's the true meaning of getting to that destination because it's not going to be, you're going to be doing everything in extreme and you're not going to be happy.

[00:19:27] You know what I mean? So it's you really need to think about, okay, how much can I do to get to that place? Because the emotion side of it, I think people really don't understand that it's going to take a

[00:19:37] **Evita:** toll. Yeah, you have to be realistic with yourself. It's more, what are you personally capable of doing on a daily basis consistently and what, with your schedule, your kids your life and then in your discipline and your habits what are you willing to put in and what are you capable of?

- [00:19:52] And let's be a little bit more realistic about what the end goal is going to be because a lot of times people come to us with the attitude of wanting this after picture, but they're only going to put in the work of Okay. Getting a little bit healthier, shedding a few pounds, where it's more of a lifestyle based approach.
- [00:20:08] And so that's another thing is just being honest about you can't want a plus results with C minus effort. See, there's nothing wrong with C minus. You can still have a beautiful outcome for yourself, but. You have to be realistic.
- [00:20:25] **Jovi:** It's are you prepared to go to the restaurant and tell them that, yo, what kind of oil Yeah.
- [00:20:30] Ladies are you prepared for that? It's gonna be a whole shift, identity change. It's is it that serious to you? Or do you wanna,
- [00:20:37] **Dr Mike T Nelson:** yeah, go for it. Yeah, I was gonna say, even social events I think that's one thing people Underestimate. And obviously if you're trying to get an extreme result, you do have to be a little bit more extreme in your methods at some point, but I think what you're talking about is true is that there's the further you go, the higher the cost you're going to pay.
- [00:20:56] And let's be honest, most of the people are not doing this as a profession. They're not going to get paid a lot of money to do it. And I think there's some unrealistic thing that once they reach a certain weight or leanness or whatever that. Psychologically, that'll just be fixed, right? So I have this little catchphrase that you can't hate yourself, lean.
- [00:21:18] You can, but you'll still hate yourself, right? Like people think that, and I made this mistake with clients early on. I let them do it because I thought it would fix their issue because they told me that was their issue. And, shocker, when they got there, they were still unhappy. And then they were really a mess because they're like, Oh shit, the thing that I thought was going to fix me, you helped me achieve said thing.
- [00:21:40] And now it didn't fix me. Now they're like super pissed and I'm like, oh, that was my fault.
- [00:21:48] **Evita:** And they, and now they have a lot of like obsessive compulsive tendencies because they've been micro analyzing every detail the

whole step of the way and things that they weren't even concerned about in the beginning, they now are.

[00:22:00] So it can actually bring on more problems if you're not working on the mental aspect.

[00:22:04] **Dr Mike T Nelson:** That's why

[00:22:05] **Jovi:** you got to just trust the process of what you're trying to achieve and don't rush it. You know what I mean? Because I try to look at everything that I do and be able to accord it to like my relationship.

[00:22:15] Did I rush this relationship? Did I tell her let's do everything we can do and let's see what we can do to see how long we can keep each other. It's every moment counts. Every day you wake up is a blessing. So you should just count those blessings and then think about how can I achieve these goals that I want to achieve one day at a time.

[00:22:32] **Evita:** And even like his mother gave him advice when we first were together. She was like the way the energy you did in the beginning, you have to keep up that same energy in order to keep the relationship alive. So if you're giving her flowers every single day, you better be giving her flowers.

[00:22:48] 20 years from now, that's the same thing with the same thing with the fitness of nutrition. You have to keep up the same energy, um, to a certain degree, habit wise.

[00:22:59] **Dr Mike T Nelson:** Yeah, I think people, the longer I do this, the more I think, and I put in my air quotes, acceptable answer is that you have to do your own goals because it's just something that you intrinsically want to do.

[00:23:13] If you're expecting the world. To change or somebody to like you or whatever to change once you get to a set goal and you're not doing it as a profession, like you're not like, making money doing it. I don't know. I just think you have to do it because it's something you want to do. And the people I know who do a lot of extreme sports or extreme fitness of whatever form, the people I know who can do it very sane, almost all of them to a fault, have the opinion that.

[00:23:42] I'm just doing this because I want to do it and they, yes, they care about what other people think, but yet they don't like if they placed dead last, but they came in better shape, better condition and hit more PRS, whatever it is

- than they did before. Then they were happy because if you're talking about like physique sports or that type of thing, it's an external judgment upon you and there's only so much you can do with whatever genetics you have and everything else.
- [00:24:07] So I think it's, and even like I said, for my goals, yeah, I want to pick up the, Thomas Inch dumbbell, and I'm planning on it'll happen at some point. But I also know it's many years away, and the day that I do it, no one's gonna really give a shit. They'll say, oh, that's cool, you did it, great.
- [00:24:25] But I'm under no illusion that the sky's gonna open, or someone's gonna sponsor me. None of that's gonna happen. It's like when I finished with my PhD, everyone's oh, that's great, you're done, but They cared because they didn't care, right? Which I didn't expect anything else at the end.
- [00:24:39] It was like, it's something I want to do. I want to finish it. So I think asking people, why do you want to do it? And just having them think, deeply about it before they start is a good practice. I have a post about that. That's crazy. Oh, nice. What was the post?
- [00:24:55] **Jovi:** It was just basically getting to the reason, like, why are you doing what you doing?
- [00:24:58] Just translate that to everything that you
- [00:25:00] **Evita:** do in life. And basically about how motivation's always going to waver, but you can always rely back on the why. And then the why is always deeper than what you're going to first say it is. Most people get on our call, discovery calls, sales calls, whatever you want us to call it.
- [00:25:16] And they always. Not always, but a lot of the times have a more shallow reason. It's I just want to look good in a bikini or, I want to fit in the pants I was wearing two years ago, but you break down those walls piece by piece and you find out really what the reason is, and it's always something from the past, something from their self worth, something that, you know, something.
- [00:25:42] Either even trauma related. It's deeper. And that's part of what we use as like our stages of change model for helping people with emotional eating or binge eating, because. Nine times out of ten, they don't really know the reason why they're doing it. So identifying that trigger and I am putting a name to it is very important.

- [00:26:05] Like you have to actually be like, okay. Journal put a name, put name to the face because when you have that feeling come on, it's a rinse and repeat cycle that's so conditioned in them at this point that they don't even think about it. So breaking it down to okay, what are you feeling when you want to do this, repeat the cycle?
- [00:26:25] Is it, is it out of Is it out of anger? Is it out of boredom? Is it out of something upset you? It's sadness. What is the emotion tied to this? So that we can really get down to the deeper reason why this cycle's happening. Because it's a trauma response nine times out of ten of, it could be something as serious as, like, when they were children and they came from an abusive household and their parents were screaming and yelling and them eating some candy made them, Soothe them and made them feel happier.
- [00:26:56] Or they had a period of time where they were in a relationship that was toxic and eating a pint of Ben and Jerry's made them feel a little bit better. The same way as people get a glass of wine to do that. It's the same reason behind it. So identifying that is very important to the step to change.
- [00:27:16] **Dr Mike T Nelson:** Yeah. How often do you think people are only taught? a biochemical solution. So one of the things I got from a buddy of mine, Frankie, is he was saying that if you look at leverage, you have basically a bio kind of psychosocial, you have a biomechanical, like a movement type. And then you've got a biochemical, like those are your three main levers.
- [00:27:40] And it just appears with, People's kind of coping mechanisms that were all taught only the biochemical solution and some people can handle that better than other people. Does that make any sense?
- [00:27:56] **Evita:** Yeah, I think people also don't want to do like the dirty work, like they don't want to do the, they don't want to get down to the nitty gritty because that's where the real hurt has to come out.
- [00:28:10] And it's the same thing with therapy, like they break you down to build you back up and it's a rough process. I think just having a band aid on the issue is fine for some people because it's easier to deal with than breaking it down to the floor and then building it back up
- [00:28:27] Dr Mike T Nelson: again.
- [00:28:31] Is that where you think different types of therapy would be beneficial then, I assume?

- [00:28:36] **Evita:** For sure. I think if it's, if we identify, obviously we're not therapists. I did have I was originally a psychology major, but that's not the direction I went with that. But I did, I was an original psychology major because it fascinates me and I just love.
- [00:28:53] Just how our brains work and just the way our thinking patterns and how habits are formed. So this is just like a big portion of the that I like to understand the inner workings behind, but we out always point people towards therapy outside of what we do, because that's the groundwork. It's truly the groundwork.
- [00:29:10] We can only do so much if they're not willing to help themselves in other departments. Because the kind of cycle will continue regardless then.
- [00:29:22] **Dr Mike T Nelson:** Any thoughts on the use of psychedelics in conjunction with therapy versus therapy alone?
- [00:29:29] **Evita:** I know it works for some people. I think you have to have a specific brain chemistry for that to work.
- [00:29:37] Both of us are, have had very adverse reactions to any type of okay, even marijuana, both of us cannot. We actually bonded on this when we first met because we have extreme almost almost like a hallucination type of reactions to marijuana where other people are like, what's going on?
- [00:30:01] It's, I'm just chilling. I'm feeling good where we were Like, all the experiences growing up, like, where we tried it multiple times, the thing, we both had severe reactions to it, and I wonder if that's because some people's brain chemistry is just wired differently, and they have different reactions to to the drug, and I think it may be the same thing with psychedelics, so I think it'd be like a case by case situation.
- [00:30:28] But I have heard like people say that it's been life changing to them in certain departments of opening up and tapping into different realms of their mind. And they view things differently after that where other people. It triggered their first panic attack and then they had years of panic attacks after panic attacks where I think that's The route it would go for me If I ever tried that but I think it is a case by case.
- [00:30:54] I definitely wouldn't rule it out I think it's very cool. Concept that If it can help people in the state of California, they're trying to legalize psychedelics. Currently, we live in L. A.

- [00:31:07] **Dr Mike T Nelson:** Okay, yes, I know, like other areas like San Francisco decriminalized it and I know I think they're supposed to vote.
- [00:31:14] Was it this year or did it pushed out about full legalization? I believe, is that correct?
- [00:31:20] **Evita:** Huh. I just saw it. I think it's supposed to be in the ballot because I just saw a news article on L. A. Times talking about the legalization that they're trying to push through, but I'm not sure exactly the timeline of it.
- [00:31:33] **Dr Mike T Nelson:** Yeah, the early data I've seen on psychedelic assisted therapy is very promising. But again, for people listening this is a very controlled setting, it's with highly experienced people, you know where the drug is coming from, so it's a very pure form where I get very nervous about some people hearing that and being like, oh, I don't know, Bob gave me some ayahuasca, let's just try it this weekend in our apartment.
- [00:31:57] Yeah. Yeah. Not bad. That sounds like a horrible idea. It'd be
- [00:32:01] **Evita:** a disaster. They're doing the same thing with ketamine too. Ketamine therapy. For depression and anxiety.
- [00:32:11] **Dr Mike T Nelson:** Yeah, there's Lots of ketamine clinics now because ketamine federally is Schedule 3 so a lot of psychedelics, psilocybin, DMT, etc.
- [00:32:21] are Schedule 1. So I know some people who set up a lot of ketamine clinics, and there is some data to show that it is beneficial for depression and some other things. But one of the people I know who set up the business model told me that they did that to have a working business model and they're hoping to switch to psilocybin once that becomes legal, so they wanted a head start.
- [00:32:43] Yeah, again, I, the only benefit of ketamine is that it's not a central depressant in terms of respiratory rate, so your risk of frank, overdose is not, As high as some other things, but yeah, I would still not recommend it. Yeah,
- [00:33:02] **Evita:** like you said, you need a very controlled setting and people want to take matters into their own hands.
- [00:33:08] **Dr Mike T Nelson:** Yeah, it is. I have done Ayahuasca a couple of times in Costa Rica, very, controlled setting. And it was amazing. It worked out

very well, but it was. Man, after doing that, I could definitely see how so many things could go sideways so fast and, our group, everything went well.

- [00:33:26] But the thing that was also fascinating about it too was just the bizarre sensation of how, it sounds weird, how like real things felt. So like other people have described it as. Okay. Yeah. I heard the therapist tell me this thing for many years, but I, under the influence of, certain drugs, I could actually feel a difference.
- [00:33:46] And there was this very, I don't know, very odd, like visceral sensation. So the second time I did it, I, it lasts the whole night. So I got the answer I wanted in the first hour. And I'm like I can't get off the train now. So I got another six hours. What am I going to do?
- [00:34:01] And so I'm like, Hey, I should practice visually, doing some of my lifts and stuff. And it was a very weird sensation to be in that state and to visualize it, but it felt like it was a real thing. You could, you had all the sensation. All of it, but you were still visualizing it, which is very hard to explain.
- [00:34:20] So I've often wondered with that as an assistant with therapy that you have this sensation of, oh, I am really damaging myself now. Like people have reported that, yeah, the therapist told me if I continue to do X behavior, it's going to be bad. But under the influence of, say, psilocybin I actually felt like I was damaging myself.
- [00:34:41] They said the same thing. And The sort of feeling like a lightbulb moment. Yeah. Yeah.
- [00:34:48] **Evita:** Yeah. It's fascinating for sure. I think also you have to go into it with the right mindset because I know they always said back in the day with any type of hallucinogens like if you went in it thinking it's going to be a bad trip or whatever it's going to be a bad trip but if you go into it with an open positive mind a safe space it's it determines the journey so yeah.
- [00:35:11] **Dr Mike T Nelson:** Yeah, set and setting do make a big difference too, for sure. One of the other questions I had is, Do you think one of the reasons with nutrition stuff it's so difficult because you can't just not eat the rest of your life, right? If you let's say you have an issue with alcohol as an example. It would almost be like telling an alcoholic that you just have to go and drink socially now the rest of your life, right?

- [00:35:36] If you have alcohol, you have the option of, Okay, never having to touch alcohol again, your body's going to operate perfectly fine. You'll be good. But you can't just not eat the rest of your life. And you have to do it multiple times, per day for most people. Do you think that's also where some of the difficulty comes in?
- [00:35:54] Because just pure abstinence isn't really an option on the table.
- [00:35:58] **Evita:** Absolutely. I actually use that reference a lot. Cause we talk about like the journey of change in terms of like addiction and like what that journey looks like for people in recovery. And it's very similar steps. But like you said, the difference is you can't completely abstain.
- [00:36:18] Like you have to eat to live. So that's where the reframing of teaching people to start introducing the things that they have deemed bad, and they have deemed as off limits, they're off limits lists we will force them, not force, but we will encourage them to eat those things. On a daily basis until they become less scary and until they become less of a trigger, because obviously when you restrict restrict, you're going to want to go overboard on whatever that is, it's your whole, your mind's thinking thinking, you tell a kid you can't have candy, they're going to want the whole bowl.
- [00:36:53] **Dr Mike T Nelson:** That don't think of the pink elephant. Everybody just thought of a pink elephant. Yeah.
- [00:36:59] **Evita:** That's one aspect of it for sure. It's like kind of the reintroduction of like the things that they were, it was off limits for them. Taking like the dieting off the table too, and the weight loss.
- [00:37:10] The weight loss goal off the table is a lot of times. Super beneficial They'll fight you tooth and nail for that one because especially if they're Battling this disordered eating but they still are on paper need to lose weight or they're in a you know A higher body fat percentage. That's their goal.
- [00:37:29] That's their focus no matter what They're thinking and no matter how many times they stopped and feel they, they have this mentality that this time it's going to work. And that's just not the case. So we have to table it, we have to table it completely work on the habits, work on our mindset, work on, hormones work on our rubbing our metabolism back up with reintroducing more calories in a way that's more manageable and.

- [00:37:55] We do it incrementally. And that's very hard for people to wrap their mind on that part of the journey. But once it clicks, that's when real change happens. So that's one of the struggles of working with clients at this too, because they are very They're just like they don't want to. They don't want to do it.
- [00:38:16] They don't. They want to continue down the path just like an addict. They want to continue down the path and just say, Oh, I can do it within moderation. I can do this. Let's just do it. And they'll try to table with you and be like, No, I'll be fine as long as I do X, Y and Z. And so that's some of the journey that are part of the journey.
- [00:38:34] That's difficult because you have to really like Level with them and bring them down to reality, which isn't easy sometimes.
- [00:38:44] **Dr Mike T Nelson:** Yeah. And clients say the weirdest stuff too. Cause along that lines, I had a client several years ago, she was complaining. She's we had to have a special phone call.
- [00:38:52] I said, that's totally fine. We'll talk about it. I said what's the issue? She's I'm losing weight, but I'm not hungry. And I'm like, cool. Is this a problem? She's yes. I'm like, why is this a problem? He's because. I think I should be losing more weight and I should be hungry. I'm like, but wouldn't the best case scenario, which isn't going to last forever, that you wouldn't really be hungry, but you'd still be losing weight.
- [00:39:20] She's yes, but this has never happened before. I'm like, but You have the data in front of you, like your clothes are smaller, like your body, overall body weight is down, but it was just the weirdest thing because it was such a foreign thing, even though she, back to the feeling versus thinking, she admitted that it was better, but it just felt so weird because it was the direct opposite of everything she had ever done before.
- [00:39:44] **Evita:** They associate these past scenarios of when they remember losing weight with these things. So like obviously if it's an extreme diet, there's going to be extreme hunger. So they feel like they have to have that hunger in order to lose the weight. And it's like this weird psychological pairing. I've heard people say things like that too.
- [00:40:03] I have. And it's they feel like it's not working, but it is working. Like you said, it's tangible. It's, you're able to see the data, but it's like this weird psychological, like. where they go back to these old ways of thinking and you

have to bring them back down to reality. That's why coaching is so valuable because like, when you're on that journey alone, you'll talk yourself out of these things, even though it's not a lot.

[00:40:27] Not logical whatsoever. Mine is so I, when I went on my reverse side after the wedding, I instantly got a coach because I knew I'm, I can think logically for every single client I can be like outside looking in, but when it comes to yourself, it's bizarre how, even though you may know the right thing to do, and you know what the outcome is going to be, your mind still goes back to those old ways of thinking and you have to.

[00:40:55] You have to be reminded, which is bizarre.

[00:40:59] **Dr Mike T Nelson:** Yeah. And I think just for accountability, I've hired a coach in the past when I was working to get leaner because yeah, I knew what to do, but having to check in with someone, giving up, the control to somebody else. So I don't, cause I have a tendency of just thinking my way into, Oh, I'll just have another cookie, and then oh, why didn't I lose any weight? Oh crap. But it's the weird flip side. Like we were talking about too, of knowing what the cost is and knowing at what point do I want to make that the goal? So yeah, like I came back from our trip in May and I was probably a little bit too high.

[00:41:35] So I went down like 12 pounds. And at first I was like, Oh, I'm going to keep going down. And then my list started going down and then life got busy. It got stressful. And then I was like, okay, so I'm either going to make the decision of, okay, this is the direction I'm going to go. Knowing what the cost is, or the reality is I have other things I'm going to prioritize, that's fine.

[00:41:56] And just go back to a weight maintenance for a period of time until the stress level drops, and then I'll decide to do what, to do again. Where me, 13 years ago, would have said, Oh my god, if you're in the fitness field and you're not like super lean all the time what are you doing? Clients are going to hate you.

[00:42:11] You come up with all these weird scenarios that are going through your head. And then you feel like you have to push everything and then you just forget about the cost until it shows up. Totally.

[00:42:22] **Evita:** I think we've all been there, especially, in this industry where you felt like you had to be this picture of what you're trying to embody.

- [00:42:30] And then over time, I feel like transparency is what they really want and that's how they really learn. And so that's been my shift in like coaching is just wanting to be like. overly transparent about my journey, good, bad, and ugly. People can really get that,
- [00:42:46] **Dr Mike T Nelson:** yeah. And I think that's good because I think even now we tell someone you're in the fitness industry and the assumption is your goal must be just hypertrophy and body composition, like from an outside, just general population where.
- [00:43:03] There's a lot of different goals people, could be doing that are related to fitness, but it's still at least to me, it seems like that's the thing, and that also seems like that's the thing that people get the most hung up on and have a lot of issues related to also.
- [00:43:15] **Evita:** Oh yeah, for sure. And I saw I see this floating around on social media, but it's a quote that's Eating eating junk food or processed food has become so normal that eating real food from the earth is considered dieting, or it's considered a weight loss the purpose behind it's weight loss, if you hear someone eating tracking or you hear someone prioritizing protein or worrying about ingredients.
- [00:43:38] Like automatically the mind goes to, Oh, they're trying to lose weight or they're trying to achieve like a leaner physique or whatever it is where that's 100 percent not the case. You could be wanting to put on muscle, put on weight, make sure you're eating enough, not too little there, heal your hormones.
- [00:43:55] There's so many reasons behind it or just. wanting to prioritize clean living, non toxic living. But that's what we think when we hear it, weight loss, or Looking shredded or looking lean, so it's hard to our narrative in that department.
- [00:44:14] **Dr Mike T Nelson:** Yeah. And the reality is if, people have been training for quite a while, I know you guys have been training for many years.
- [00:44:19] I've said, I've been doing this for 30 years now and the longer you do it. It's harder to make changes, not saying that you can't, but you do have to get a little bit more aggressive at times, and even in times where I've actively, tried to put on more muscle and eating more is a pain, but nobody wants to hear that they're like, Oh, shut up.

[00:44:42] You're trying to eat 3, 500 calories a day. Oh, that must be rough. It's I'm not sitting around eating donuts all day. It's yeah, I'll have more cookies. I'll have a donut once in a while. I'm not. Being super strict, but if you've ever tried to eat real food and eat, 3, actual calories a day.

[00:44:59] It's actually pretty damn hard. Like you're not doing anything else other than cooking food, eating food, going to the bathroom, doing dishes. Like on the other extent, it is a lot of time and effort too. And you have the weird thing where everyone's Oh, that must be nice. It's yeah, it's great for about three weeks.

[00:45:16] And then it's just a pain in the ass. Yeah.

[00:45:20] **Evita:** That happens too on the flip side with clients where they were people that felt like they had to do the 1200 calories to lose weight. And Or they are eating very, in their other side of the spectrum, when they're not dieting, they're eating, very calorically dense, not nutrient dense food, high calorie, but it doesn't satiate them.

[00:45:40] So they're eating a ton of calories, but it's like in one meal, or they're eating just, McDonald's burgers for lunch and dinner. When we take them to a little bit more of a moderate calorie deficit, and now they're eating whole foods. All of a sudden they're so full they can't eat it. But on the weekend when they have their on track meal, and they can definitely put down an entire plate of nachos, an appetizer, five margaritas, and dessert.

[00:46:10] And so you have to explain to them it's the Food! The nutrient dense foods that you're not wanting to eat in these quantities because it's filling you up and it's not the desirable food that you really want. You can eat these calories. You just don't want to eat them in the way that we want you to.

[00:46:28] That's conducive to your goals. So I think, too, that's when we get into oh, like, how are we going to make these foods more enjoyable? How are they going to be more tasty and more big on ingredients and recipes? I'm a big foodie and I'm a big recipe creator. So that's where I help them with that to make it like more enjoyable and not think that they have to eat Asparagus and ground turkey all day long To hit their macros

[00:46:52] **Dr Mike T Nelson:** Yeah tilapia and broccoli or soggy chicken breast

[00:46:55] **Evita:** We live that life tilapia and asparagus and sweet potatoes for every

[00:47:01] **Dr Mike T Nelson:** meal Yeah, it gets old and I think people Underestimate how their tastes will actually change over time.

[00:47:10] The example I give to people is if they drink coffee, I'm like, so the first time you had coffee, did you like it? And most people are like, meh, I put enough cream and sugar in it, it was okay. But over time, they actually grew to like it. And so one of the things I try to do with clients is, okay, Can we get you to like things that are not as sweet?

[00:47:28] I don't, it gets into sweeteners, artificial sweeteners, whatever. I'm just trying to move you to things that are not so hyper sweet all the time. Do you like, more bitter chocolate? Like 85 percent or even 70%? Do you like just black coffee? Do you like dark teas? Do you like asparagus? Can we move you down the spectrum so that you're not always thinking that tasty is something that's just ungodly sweet all the time?

[00:47:54] That was his

[00:47:54] **Evita:** journey with food. Yeah, he we inched him up, first, like we said, and that's what we do in general in all forms of our program. We call it habit stacking let's get this down. Then we go here, then we go here. But with him cause he was lived and breathed the gym and, but nutrition was never his big.

[00:48:14] Focus. And I was the opposite where I was always like, I'll diet, but I hate working out. This is obviously before we got, we were in the industry and our prior years. But when I had first met him, I started okay, let's start introducing a little even though it's may not be the healthiest, like you said, artificial sweeteners.

[00:48:31] little low calorie, this sugar free this. Then we started caring about a little bit more ingredients and now all of a sudden he's like more concerned about it than me in our, nine years down the road, but yeah. But it is it's a, it has to be a natural progression and your taste buds, 100 percent change to the extent of like people being like, wow, now I passed a fast food restaurant and all I can smell is the grease or.

[00:48:55] I ate a cookie that I hadn't had, and I used to love this cookie, and now it tasted so incredibly sweet, I couldn't even take it,

- [00:49:03] **Jovi:** yeah. You just gotta be willing to change. I think change is very easy to say, and to say that you want to change, but once you start Changing, sometimes you get a little bit stubborn and say, Oh, let's revert back to what we normally do.
- [00:49:16] If you really want to change, you have to give up and be vulnerable and open to change and creative ideas. And, I've been with my wife for eight years now. So when she met me for me to be where I'm at now today, it shows that you can change your mind. You have to want it.
- [00:49:33] You got to want it. If you don't want it, you're not going to change anything. Yeah, no simple as hey, can you pick up your shoes when come in the door just simple things like that So it just takes time
- [00:49:42] **Evita:** Yeah and self sabotage is a real thing and I was a self sabotager for all those years and I think that's another thing cuz self sabotage actually is like a form of control because you actually And predict the outcome you know what the outcome is going to be.
- [00:49:58] So it's a form of control that I can predict what's going to happen at the end. Yeah. That end goal is not what I want, but at least I know what's going to happen. So I think that too is a big part of it is self sabotage.
- [00:50:14] **Dr Mike T Nelson:** Yeah. One of the analogies, I think I might've stole this from Charles Daly is that I tell clients, if you're driving down in a car and you get a flat tire what do you do?
- [00:50:23] You go, oh man, this sucks. You get out, maybe you change the tire yourself, you call someone to fix it, or whatever. It sucks, it takes an hour to hopefully get fixed, and you're back on the road, you get along with your day. With nutrition stuff, it just seems oh, I went out to dinner, I had a poor meal.
- [00:50:39] And it's like getting a flat tire in the car, and then you take a knife out, and you flatten all of the three tires, and you go, I got four tires that are flat, now I'm really fucked. It's like you just find a way to make the whole thing even worse than what it was, instead of, Okay, that wasn't the best thing, or wasn't the most ideal, or whatever.
- [00:50:59] Fine, I'm just gonna go get back on track again now. Which I think is actually a skill to be able to Deviate a little bit and then get back to center instead of, taking the car completely off the side of the cliff.

[00:51:13] **Evita:** Yeah, 100%. Yeah we, yeah, we say it's the readjustment. And then also it's just like you have to understand like your cue, the routine and the reward, the cycle of habits.

[00:51:25] So if you. The reward has to always stay the same at the end. So what is the reward you're getting from the binge eating? What's that feeling you're getting? And you have to change You have to understand your cue to the urge to do it. But changing the routine around it to still get to the same reward is how you switch up the game.

[00:51:46] So instead of, Okay, I feel this urge, I binge eat it fulfills my instant gratification of feeling like, whatever that reward is to you in that moment. You have to switch that routine so you still get that same reward, so I can now we'll do things like, okay, so when you're feeling the urge, Go on a 10 minute walk and this will give you time to reflect on the habit that you're trying to break but it also is going to give you some feel good endorphins in the moment and you're in the sunlight, whatever, and that may shift you out of wanting to do what you want to do and it's like it's having to like tangibly even write it down and then start practicing it and it helps because you're right I've heard that analogy too or I've heard like writing I cracked my iPhone screen, so now I'm going to smash the entire thing on the ground, I'm like, no, we're not going to do that, but we'll do it with nutrition.

[00:52:41] **Dr Mike T Nelson:** Yeah, and I like that, like, how I think of it is, instead of opting for a different biochemical solution, you're doing a biomechanical approach, go take a walk, go do something, or do a crossword puzzle, distract yourself, call a friend. Probably movement out of the area where the cookies are on the counter, probably a good idea um, things like that.

[00:53:02] But it's hard because one, even if you know those skills, you have to remember to do them. And it's always, position, environmentally specific to where you're at. And sometimes. You don't have as many options, if you're at a dinner party, you can't be like, Oh, I'm out of here, so you have to work through different situations too.

[00:53:20] We'll

[00:53:20] **Evita:** even say it to you like almost like a sponsor situation with AA or whatever, like just write it to us, like we may not answer you right in that moment, if it's not our hours of operation, but put it down in writing of like when you're in this heightened state, tell us what's happening, what you're feeling.

- [00:53:36] So in, in the best case scenario, we'll be there to respond and walk you through the situation, but if not, at least you got it down and you can reflect on it and we can reflect on what we could have done differently and just not hiding it because a lot of times it's shameful to people, and that's a big thing with binge eating too, where it's you do it in a closed setting in your house where no one knows and you just go overboard.
- [00:53:57] And then the guilt, it's like the guilt and the what's wrong with me feeling. So I think yeah. Taking the shame out of it and being talking about it, being open about it helps too.
- [00:54:09] **Dr Mike T Nelson:** Awesome. Thank you guys so much for all your time today. I really appreciate it. Where can people find more about you?
- [00:54:16] **Evita:** Yeah, so I am, my Instagram's at Evita Eats, so my name's Vita and then Eats E-V-I-T-A Eats, and then he is Jovi Hough Fitness, J-O-V-I-H-O-U-G-H, fitness on Instagram. And then our website is Jovita Lifestyle. Our name's put together Jovita, J-O-V-I-T-A, lifestyle.com. And that's where all of our.
- [00:54:43] Information with our program and all of that good stuff is there.
- [00:54:46] **Dr Mike T Nelson:** Awesome. And do you guys, are you currently taking more clients or is it a wait list or how does that work?
- [00:54:51] **Evita:** We currently are accepting applications. So we take people on a case by case basis, just depending on how much help they need on a one on one basis.
- [00:55:00] Yeah, but we have a few spots
- [00:55:02] **Dr Mike T Nelson:** left currently. Cool. Awesome. Thank you so much for all your time and all your wisdom here and. I assume I'll probably see you guys in Vegas again in March. Yeah, we're
- [00:55:13] **Evita:** definitely trying to make it out there.
- [00:55:15] **Dr Mike T Nelson:** Cool. Yeah. I'll be out there again this year. Not presenting, but I'll be there hanging out and having fun, so cool.
- [00:55:22] Thank you so much. Really appreciate it.

[00:55:24] **Evita:** Thank you so much. Have a great rest of your day.

[00:55:27]

[00:55:27] **Dr Mike T Nelson:** Thank you so much for listening to the podcast. Huge thanks to Jovi and Navita for being on the podcast. Really appreciate it. Make sure to check out their website and we'll put all the links to all the wonderful stuff that they do there.

[00:55:40] Highly encourage you to check that out and if you're interested in. Nutrition and recovery side, for better performance and body composition and muscle, check out the Flex Diet Certification. Flex Diet Certification opens again January 15th, 2024, so depend on when you listen to this podcast, pretty soon.

[00:56:01] Go to flexdiet. com, and you'll be able to get on to the waitlist, and that is the best place to get all of the information, and we've got some really cool bonus items for you. Right now flex Diet is only planned to be opened twice. This coming year. That may change, but I don't know. That's what the plan is.

[00:56:19] So far. That's what we've done the last couple years so far. It'll be open for one week, January 15th through January 22nd, 2024. So go to flex diet.com for all of the details. If it's beforehand, you'll be able to get to the wait list if it is during the time that is open. it'll automatically send you to the certification page with all of the details.

[00:56:40] If you have any questions about it at all feel free to contact me. Thank you so much for listening to the podcast. We really appreciate it. We've got a ton of great interviews already lined up for this year. A couple of them have already been done, so we appreciate you listening and stay tuned for much more.

[00:56:59] Thank you so much. Have a wonderful day and happy 2024.

[00:57:02] Do you suppose they have any life on other planets? What do you care? You don't have any life on this one!

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