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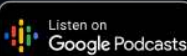
BREAKTHROUGHS

FOR ALL

100 YEAR LIFESTYLE PODCAST
EPISODE 21 - TRANSCRIBED

WITH DR. ERIC PLASKER &
DR. STEPHANIE SULLIVAN

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Dr. Eric Plasker, DC, Practicing Chiropractor for 35 Years and Best Selling Author & Creator of The 100 Year Lifestyle

Dr. Eric Plasker has been a practicing chiropractor for 35 years and a leader in the chiropractic and wellness industry for decades. In 1999, he founded The Family Practice where he's helped thousands of chiropractors lead their communities by delivering high integrity, lifetime chiropractic care to more people.

An international bestselling author and creator of *The 100 Year Lifestyle* book series, 100YearLifestyle.com and The 100 Year Lifestyle Chiropractic Network, Dr. Plasker's team is committed to transforming health and longevity worldwide and attracting more people to the chiropractic lifestyle.

Dr. Plasker is regularly featured on traditional and social media platforms reaching millions while also speaking to "live" chiropractic and corporate audiences worldwide. He and his wife, Lisa, have been married for 34 years. All three children are all practicing chiropractors.



Stephanie G. B. Sullivan, DC, Ph.D. Director, Dr. Sid E. Williams Center for Chiropractic Research Life University

Dr. Stephanie Sullivan, Graduate of Life University's College of Chiropractic 2008, serves as the Director of the Life University Dr. Sid E. Williams Center for Chiropractic Research (CCR). Dr. Sullivan's responsibilities include mission-driven leadership and advancement of the CCR, research compliance, and the conduct of chiropractic research. Utilizing her background in banking, marketing, and management Dr. Sullivan has worked to increase the number of research projects conducted at Life University as well as raise the rigor of studies to include high-impact clinical trials.

Dr. Sullivan is also a neuroscience Ph.D. graduate of the Biomedical and Health Sciences Institute at the University of Georgia. Her research focus includes development of the Well-being and Health Expression Evaluation List (WHEEL), sensory gating, cognitive efficiency and the effect of chiropractic and applied clinical neuroscience on brain-body neuroplasticity.

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Dr. Sullivan (00:00) Intro: Well over the last few decades of life - what they started realizing is the brain is still amazingly resilient. So you can go create new neurons and more importantly, you can create new connections.

Dr. Plasker (00:12): Welcome to the 100 Year Lifestyle Podcast. Dedicated to you and your loved ones living at 100% for 100 years and beyond. I'm your host, Dr. Eric Plasker.

Yes, we are transforming health and longevity consciousness worldwide so that you and your loved ones, of course we're not going to leave them behind, can live at 100% for 100 years and beyond.

Our special guest today, one of my favorite people in the world, I respect her so much, Dr. Stephanie Sullivan. It's Doctor, Dr. Stephanie Sullivan. Doctor of Chiropractic, Ph.D. in neuroscience. Stephanie, welcome to our podcast and thank you for this time.

Dr. Sullivan (01:05): Thank you so much. It's absolutely wonderful to be here. I appreciate the opportunity.

Dr. Plasker (01:10): We've worked together. Your dedication to your craft, your passion about neuroscience, to meet somebody and know somebody who is passionate about extrapolating data and collecting information and facts and helping us learn how to think about that is so inspiring to me because you have that skill that is so important for all of us.

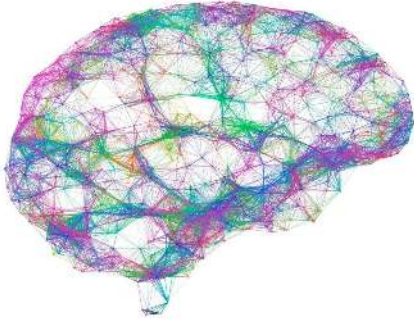
So thank you for your passion and your work.

Dr. Sullivan (01:37): Good. Well, thank you.

Dr. Plasker (01:39): So neuroscience. Why should our listeners, who are moms and dads and raising kids and working and CEO's or salespeople or teachers or musicians or athletes of all ages, [why should anybody care about neuroscience?](#)

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Dr. Sullivan (01:58): Well, neuroscience is really the driving force behind everything that we do.



Whether it's making decisions on a day to day basis or even just moving through space or being able to talk, or interact, or work with your children.

Dr. Plasker (02:12): You know, we used to think, and we've talked a lot about neuroplasticity on our podcasts - and because we've learned so much about the

brain and the nervous system, we used to think that it was just fixed and you were stuck with it, so to speak.

But we're learning that is completely not true. Which is so exciting for neuroscientists.

And it also has to be super exciting for ordinary earthlings like me and everybody else listening.

So talk about how neuroscience has changed. What were maybe some of the old ways of thinking that maybe now we're learning that - wow, that wasn't true and now this is true.

Dr. Sullivan (02:50): Oh absolutely, and it is. It's a phenomenal field. Originally they thought you were born with the neurons you had and some started kind of cleaving in the early stages.

But then you needed to kind of take care of your brain. Well, you still need to take care of your brain, and your mind, and your body.

It was this very negative perspective that you couldn't regenerate your neurons. Well, over the past few decades, what researchers started realizing is the brain is still amazingly resilient.

So you can go and you can create new neurons and more importantly, you can create new connections.

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We can still remember things that we're learning at 97 years old. But you still have to take care of your brain health at every age.

And here's the other part - it takes time. So when you're learning something, if you learn it, it's kind of stored in your short-term memory.

But then as you repeat it, it actually gets solidified within your memory as well.



Dr. Plasker (03:48): I think that's so important, especially for anybody who may be listening who knows somebody who was diagnosed with a condition and they got a prognosis.

Maybe that was based on old science. Old news that we're learning was fake news, right? Because it wasn't really true.

So they get a prognosis and they wrap their mind, they wrap their habits, and they wrap their spirit around that prognosis. They declare how the rest of their life is going to be. Which is completely not true.

And it took away from many of those people, the possibilities of who they could be if they just had this new information.

And so when you say that even if somebody has a situation or a condition, it may not be too late for them because of what we now know about the nervous system.

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Dr. Sullivan (04:33): Exactly. Exactly. That's so true. And I'm glad you said that they wrap their spirit around that perspective because if they've been told they can't improve or there isn't anything that they can do, well, we're our own self-fulfilling prophecy.

So by understanding - and this new neuroscience really showing - hey, you know what, you're not static every single day.

Everything you put into your body, everything you do to your body contributes to how it's going to perform and how it can grow and how it can evolve.



Dr. Plasker (05:07): Yeah. Beautiful. And what you said that it takes time. That short-term can become a long-term.

How does that actually happen neurologically?

Does your body actually create new neurons? New connections? How does that work?

Dr. Sullivan (05:19): Yes. So your body does. Whenever you first learn something, you

have these things called dendrites.

So, they actually go out and they form new connections with different areas of the brain. So, they can do long distance or they can even do very short distance changes.

Whenever you learn over time, then it creates more and more connections.

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So you can involve different areas of the brain, whether it's thinking about something that if you're on a beach, well now you can start to remember the smells of the beach.

You can remember the sound. So the more you engage your brain, the more connections you're going to have between that particular memory.



Dr. Plasker (06:00): Right. And when you say more connections - and I don't know what the number of new connections is, but it's more than three, correct?

(Laughing)

It's like millions and millions of connections. So, when you start to think differently and you start to embrace this - and this is why I think this is so important from a 100 Year Lifestyle perspective - is that if you make what we're talking about here your lifestyle, over time we're talking about trillions of new connections.

For you, you can actually reinvent yourself constantly over time as a neuroscientist and a chiropractor, I know from a research perspective, so much of the healthcare research that has been done.

And it kind of drives me crazy a little bit because we are a lifestyle care, wellness, performance-based, consciousness here.

It drives me crazy that most of the research that's been done related to the nervous system and every other condition for that matter has been condition-based research. You have this pain, you have this backache, you have this problem, and how can we make you feel better in the moment?

Maybe, as quickly as possible. We measure that and give you a solution just for the moment. How is neuroscience changing this from your perspective?

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Maybe from a condition-based model to more of a holistic lifestyle. Maybe even a performance-based model? With much of it being led by Life University, my Alma mater, and obviously where you go to work every day.

Dr. Sullivan (07:28): Absolutely. So, how is neuroscience changing this healthcare perspective? Well, really what we're focused on is kind of changing the healthcare dialogue from that condition-based to a health expression and an understanding that you can evolve.

You can grow. And the way we do that is thinking about these foundational outcome measures, like neuroplasticity, your ability to improve your memory, your ability to improve your attention.



By understanding these key foundational metrics - your blood pressure, your heart rate, things like that - these key kind of biometrics are almost like a resilience factor. So, if you're able to improve these key measures, well not only does it affect one thing, it affects several different things. So, if you're able to improve your brain's neuroplasticity, well, maybe you're less likely to get dementia, maybe you're more likely to remember where you did actually put your keys or your phone.

Things like that.

So, it really underlies so many conditions because the challenge with traditional research is it's almost like a research treadmill.

You pick a condition and then you have to research that condition over and over and over and over again.

And then once you've done 20 years of research on it, then you can say, hey, definitively there was a difference.

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So rather than getting on that treadmill, we're looking at these key outcome measures that multiple conditions like neuroplasticity, like blood pressure, heart rate, flexibility, gait, your ability to even do things as simple as your ability to move in space.

Things like arm swing. A lot of people don't think about how they move their arms. But how you move your arms is now being shown that it's kind of an early indicator for people with Alzheimer's disease or Parkinson's.

So even before they've been diagnosed with the condition, things like this actually are giving you clues ahead of time.

Dr. Plasker (09:29): Yeah, and we see it every day in practice, too. We had a woman just yesterday. She had not had any type of chiropractic care previously and we had her walk up and down the hallway and you could see she was dragging her foot. She was swinging her arm unevenly. It was a very awkward swing and for her it was advanced.

And within just a couple of adjustments, it all balanced out and she gets it now. She understands neuroplasticity.

She's been listening to our podcast. She's committed to changing her life and changing her brain. The thing about it is she originally got injured because of those subtle abnormal foot swings, her gait, and her arm, she tripped and she fell. She broke her leg and they treated her broken leg. They say, Oh, she just tripped.

Dr. Plasker (10:15): But the reality is she tripped because of what you're talking about.

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And so the part that bothers me, I think in many ways about the condition-based research, especially the way it's done today, is that assumptions are made, conditions are researched, and then people are treated with things that change the way people feel, or change their chemistry, that are just temporary changes.



And then they're designed to sell a product. Many of those products are pharmaceuticals and drugs that have side effects that can be severe, especially if taken over time. And they're designed, and it shouldn't be this way, they're designed to sell a product.

Do you know what I love about what we're doing and what we're talking about in this kind of research?

We want people to know. Can I tell you? We're selling people on themselves.

Dr. Sullivan (11:01): That's true.

Dr. Plasker (11:02): We want you to know that if you understand your brain and you are objective in the way you think and you make your own choices and you do what people like Dr. Stephanie are laying out for us as we understand the brain, you can change your entire life and experience a whole new you for decades into the future. Come on. Isn't that exciting?

Dr. Sullivan (11:21): That's why I get up every morning because I get to research this and really share the information so that people can make their lives better.

Dr. Plasker (11:33): Awesome! Do you want to talk about your WHEEL?

Dr. Sullivan (11:35): Yeah, absolutely. So, I mentioned a little bit earlier how we're kind of looking at these foundational factors so that we can tell a bigger story.

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So what we've done in our lab is, we're creating what's called the Wellbeing and Health Expression Evaluation List. So it's a set of core metrics.

Dr. Plasker (11:51): That's the wheel by the way. Wellbeing, Health, Expression, and Evaluation List. That's the "WHEEL" thing.

Dr. Sullivan (12:00): Yes. That's the "WHEEL" thing. So when we're looking at it across all the health care domains - physical, mental, social, and so on - I know several different lists of several different kind of domains of health.

So, what we want to do is create these set of core outcome measures that not only chiropractors, but other health care workers, or with the invention of biometrics that the everyday individual can look at.

And then it's an indicator for how you're doing. So, is your normal heart rate, is it improving on a daily basis? Is it going down with exercise?

Do you no longer hit 140 when you try and walk up a series of stairs? So, developing the set of core metrics that you can look at to say, okay, you know what, I'm healthier today than I was yesterday, or I'm healthier today than I was a year ago. And then what we're doing is we're taking...

Dr. Plasker(12:51): Or I'm not healthy or as healthy today.

Dr. Sullivan (12:53): That's exactly right. Yeah. Or you're going backwards and then that's a point for you...

Dr. Plasker (12:58): Can you see changes that quickly? I don't mean to interrupt you, but can you see it that quickly, day to day if you're measuring these metrics?

Dr. Sullivan (13:02): If you're watching your trends over time, absolutely. And then if you're monitoring it from our standpoint, okay, well if I'm looking at my metrics and I noticed that over the past month my heart rate's gone up when I walk to the mailbox or something like that.

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Then you can think back as an individual, okay, well what have I done differently? Has my diet changed? Has my diet improved or gotten worse? Did I watch Netflix a little bit more than usual?

Dr. Plasker(13:30): Sitting too much.

Dr. Sullivan (13:31): Exactly.

Dr. Plasker(13:32): Drinking too much.

Dr. Sullivan (13:33): Exactly. So, you can start by understanding that you could start to make different decisions.

And then the other part of that is once you have these metrics, well we need to understand how they change and is the nervous system engaged in that process?

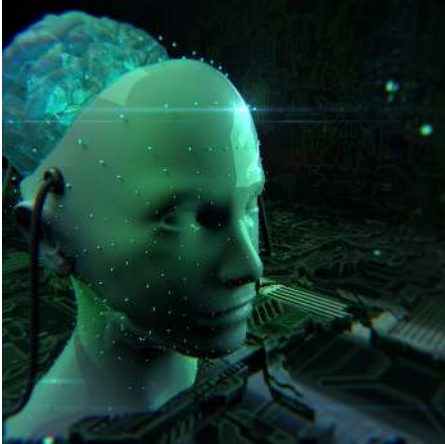
So, understanding the background basic science so that you're getting kind of a big picture. Okay, well here's why it's important for my heart rate to be lower. So, things like that.

Dr. Plasker (14:00): To me it's very exciting. We actually just did a podcast that has gotten a lot of traffic. [If you haven't listened to it yet, it's on Habit Patterns That Optimize Your Health](#). I believe that's the name of it. And we talk about destructive patterns, survival patterns, complacency patterns, comfort patterns, and human potential patterns.

And when it comes to your nervous system, these new habits and these conscious things that people do, creating new patterns for themselves.

Can you talk about - is that what these new connections help people to do? Is it to create new patterns in the brain and reinforce new conscious choice habit patterns that people do?

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Is that what we're doing is we're rewiring our brain and our nervous system?

Dr. Sullivan (14:43): Yes, absolutely. So even let's say, take chiropractic just for example. There's several things that can make an impact. Exercise and things like that.

But if we're looking at your chiropractic care and we're looking at the effect on the brain where there are studies now starting to show that chiropractic influences an area of the brain called the prefrontal cortex.

So, our studies have shown actual changes in the dorsolateral prefrontal cortex.

Well, what's important about those areas is those are your decision-making areas.

That's how you decide to stop Netflix before you hit that continue button or you decide not to pick up that chocolate chip cookie.

So your executive function regions are so important in helping you make those changes.

And somethings like chiropractic and exercise are actually showing changes in that region of the brain.

Dr. Sullivan (15:38): And a study we have in publication now that's currently in the reviews actually shows that after the adjustment information flow initially, it's kind of coming from your lower brain regions going to your prefrontal cortex. Afterwards, it's actually coming from your prefrontal cortex.

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So, now it's your prefrontal cortex that's driving that information flow.

So, while we still have to do more studies to see how that relates to memory, to attention, to decision responses, then to me that's an amazing indicator of how lifestyle changes can make a difference in the decisions you make.

Dr. Plasker (16:17): Love that. And you know, we're sitting here and you can hear the passion in Dr. Stephanie's voice. You should see the passion twinkling in her eyes as she's describing all of this. Passion leads to so many great things.

So we love that you're passionate about this. You know, we talk in the 100 Year Lifestyle, we talk about this lifestyle care continuum where you go from crisis care through this critical transition to lifestyle care.

Where crisis care for many people that have a healthcare crisis - they'll, as an example for chiropractic care, go consistently to get some relief and stability in the spine and nervous system, correct their subluxations, etc.

Then the critical transition is kind of what we're talking about here.

We call it the critical transition because it's a critical transition that people need to make from crisis care to [lifestyle care](#). Where you stay consistent regardless of how you feel so your body can change.

Dr. Plasker (17:09): This is the rewiring process and then lifestyle care is keeping it that way as a part of a lifestyle.

Now, one of the other things that we talk about is what happens when you stop? Because we talk about neuroplasticity.

You make these changes going from crisis care through this critical transition to lifestyle care. But when you stop and you go back or you don't go through that critical transition. What happens?

Does the body - does the brain - is it a roller coaster where it starts to remodel one way and then it remodels back?

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Because we talked at one point, you and I, about negative neuroplasticity like going in the wrong direction, can you describe what happens there for those roller coaster people that are listening?

Dr. Sullivan (17:49): Oh, that's actually, that's a phenomenal point. Because we think of neuroplasticity as something positive, but it can actually be something negative.

So, some of the early studies that they did on neuroplasticity is they would tape people's fingers together. So if you tape, let's say your first two fingers together, it doesn't take long, maybe a day, sometimes a week for your brain to actually start remodeling.

So, if you go from someone who's vibrant and active and moving to now all of a sudden you're just sitting there, your brain changes very quickly in response to that.

Where before you were getting, because it's based on sensory information, everything we hear, we touch, we see is all information that goes into our sensory system.

So, if you're not using it, then it's going to say, okay, I'm very efficient. Your brain is also very efficient. That's another key thing to keep in mind. If I'm not using, let's say my two fingers individually, I'm just using them as one.

Well you know what, I'm not going to use those neurons. I'm going to map those together so your brain can actually kind of decrease what it's using as well. So, it can have that negative impact.

Dr. Plasker (19:04): Very important information. Let's say for a child who gets a new game, a video game, and doesn't get off the couch and gets stuck in the tube, right?

Or maybe the person that starts sitting way more than they used to and they stop exercising or somebody that has a lot of stress and starts holding it in their shoulders, very relevant really for all of us.

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Dr. Sullivan (19:26): Right. And think about it from this perspective. So dementia is something they commonly think about in aging, right? Well, what happens as we age?

Are we as active as we used to be? Not always. Do we tend to sit a little bit more? Do we tend to not go out and do adventures or travel more?

Well, all of that. I hate to say this, but our bodies are almost made to self-destruct. So if we're not taking care of it, it's going to not use or not continue to develop those areas in your brain.



It makes sense then that if people who have kind of stopped living, then they're going to suffer the effects of dementia. They're going to maybe lead to early onset of some degenerative cognitive changes.

Dr. Plasker (20:17): We, have another saying, "your innate intelligence will organize around the thoughts that you think, the choices that you make, and the lifestyle that you live." And the organization that we're talking about is neuroplasticity.

How your body changes and yes, this is why retirement is an outdated concept. And a question - my dad, he started taking statin drugs, took them for a very long time, had a situation where he had a vision for his future that did not pan out the way that he thought for his retirement. And he could never ever create a new vision for his own life. That combined with the Statin drugs, which we know can cause destructive changes in the brain. Correct?

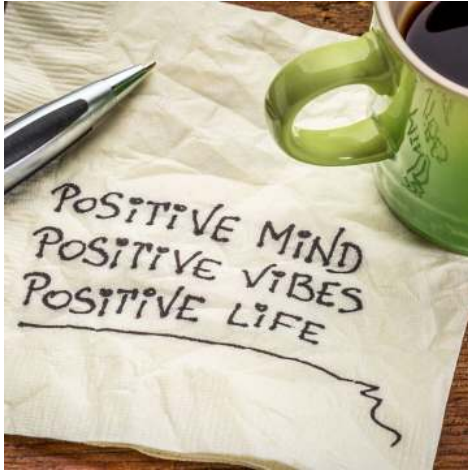
That combined with the statin drugs, which we know can cause destructive changes in the brain. Correct?

Dr. Sullivan (21:04): And in the body.

Dr. Plasker (21:05): And in the body. I'm curious when it comes to neuroplasticity, we've talked about movement.

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*But what about thoughts and vision and how does that change the brain?
Negative thinking to positive thinking?*



Dr. Sullivan (21:18): Absolutely. There's actually a whole body of research that is wrapped around [positive thinking](#).

So there are some amazing changes and benefits to thinking positively versus thinking negatively. Plus, let's take that a little bit further.

If someone's lonely, if they're kind of depressed, if they're thinking negatively, and that's all they're focused on, are they going to be more likely to get out and do things?

Are they going to be more likely to move or to exercise or to have that social engagement?

We're social creatures, so you know, we need that interaction and that stimulation from other individuals.

Dr. Plasker (21:58): Beautiful! [So listen, everybody, get up off the couch, start thinking positively, start moving, take the games away from the kids, give them something else to do.](#)

Get them outside playing and as we start to wind down, if we can, some preliminary results from the research that we did.

I know that we sponsored a study about the benefits of lifetime chiropractic care and we're just scratching the surface of data. And we did a part two that we don't even have that information yet.

So, we'll come back and talk about that at another time. But what's exciting that you're seeing from the first study that we did?

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That our listeners who are considering making that transition from crisis care to lifestyle care.

What's a take away that's valuable for them, real quick.

Dr. Sullivan (22:44): Bite Size? Okay.

Dr. Plasker (22:45): Bite size or you know, whatever you feel like you can say at this point.

Dr. Sullivan (22:47): Okay. We've presented some information and presentations.

I always, as a researcher, I kind of do that asterisk, we're submitting this for publication so it hasn't been through peer review. We're just excited about the results that we have.

So, the first thing is when we - and to give you some background - so, essentially what we did is we worked with Eric. You were phenomenal.

And working with doctors who then worked with their patients to, believe it or not, fill out a hundred question survey about where they are, what their age is, what's their health like, what is their flourishing level like? What's their mental state like?

And then gather all that information. And we wanted to compare it across the age of the individual and then also how long they've been under care.

So, a couple of key things is we found the individuals who were older, and I'm paraphrasing, so individuals who were older didn't tend to decline in their health if they'd been under chiropractic care for a period of time.

Dr. Sullivan (23:46): I mean to me, that's a "goosebump" moment. Now that was only one question out of 100 in our pilot study, I think we had 112 individuals who had completed the survey. But to me that's a little glimmer that we definitely want to explore further.

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And then the other thing is we noticed that people progressed through chiropractic care because this was a chiropractic study, they actually progressed to wellness care.

So, they weren't staying in pain.

Dr. Plasker (24:13): And they chose it!

Dr. Sullivan (24:15): And they chose it and they chose it and they continue. They were on maintenance or wellness care.

So, by doing that they stayed out of pain and they weren't your repeat pain patients. So, to me those are some of the little soundbites.

Dr. Plasker (24:27): And that's just a taste, everybody. We can't give you everything yet. We're so excited.

It's funny, I had to get a life insurance policy renewed just recently. 30 years ago, when I got my first policy. The medical doctor that came to do my blood tests, urine tests, and all that stuff way back 30 years ago, he thought I was a lunatic because I talked about longevity and 100 Year Lifestyle stuff and lifestyle chiropractic care, healthy spine, and all those things. Eating healthy, all those things when it wasn't cool in my early years of practice.

The same Doctor came back 30 plus years later to do this new test. He checked everything and he looked at my age, 57.

My blood pressure was 110 over 68. My pulse was 56. My everything was blowing his mind and he asked me how many medications I was on.

Dr. Plasker (25:24): I said, none. He said, well, have there been any changes to your family or your medical history?

And I said, well, I don't have a medical history. And at the end of it, the second time around, 30 years later, he was very honest.

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He looked at me and he said, "You know what, Dr. Plasker, when I first met you 30 years ago, I thought you are freaking lunatic."

And now he said, "Do you know many people that I see your age that are not on any medication, that don't have any medical history?" I said, I don't know, 50%? He said, "Zero."

And I know so many of my colleagues, my chiropractic colleagues, who are living this way, who are functioning at very high levels, and are just living a different way.

They're living their Ideal 100 Year Lifestyle and you're making it happen in the research you're showing us.

Everything that we've kind of known all along, does that drive you to know, like in your gut feeling when you go to research something do you kind of have a sense of, wow, I hope this pans out?

I know your objective, but are there things that you hope to learn as you move forward in these projects?

Dr. Sullivan (26:29): Oh, being objective is always the challenge because, of course, we're excited and so we want to see the results.

But the bottom line is chiropractic has been around for over a hundred years and even bone setting before that.

Honestly, adjusting the spine, or working with the spine has been around for - I think one quote said, "as long as people have had spines." So, there has always been these amazing results.

For me, I really see my role as kind of telling the story. Just using the language of research. The results are there.



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Chiropractors, or if you're a chiropractic patient, you see the changes in your body, you see the changes in your patients. So you know, it works.

My job, and this is the really exciting part, I just get to tell the story. I just get to look at it and I say, okay, I know it works because I've seen it in my patients. I've seen it in myself.

Well, let me understand it. Let me figure out how I can measure it better so we can tell a different story or tell the full story.

Dr. Plasker (27:30): How it works? This is how it works.

Dr. Sullivan (27:32): Yeah. Exactly.

Dr. Plasker (27:33): Yeah. I love that. Well, I got goosebumps. This has been amazing. Thank you so much. I hope you all have enjoyed this time with Doctor, Dr. Stephanie Sullivan.

That's not a slip everybody. As we said in the beginning, double doctors because you're just so dedicated to all of us, really.

I know you're passionate about the research, but you're really committed to all of us being our best. We call it living our ideal 100 Year Lifestyle. So, closing thoughts before we sign off?

Dr. Sullivan (28:00): Closing thoughts before we sign off. You know what you do that I think is amazing? Setting that precedence and setting that mindset ahead of time to think about what you want to be 50, 60, 100 years from now is so important.

And also, I don't want people today to get discouraged if they're already that individual that's 70 years old and on 12 medications.

The beauty and the power of the body is how it can heal, and the brain also. So start making those little bitty changes right now. Get up off the couch. Even if all you could do is just walk around your living room, start doing it. So, get up.

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Or if all you can do is focus on trying to remember where you placed your keys or practicing things like mindfulness. Go see your chiropractor. So know that where you are now doesn't have to be where you stay.

Dr. Plasker (29:00): Love that!

Dr. Sullivan (29:01): So, that would be it.

Dr. Plasker (29:02): Wow. Hey everybody, what a treat today.

Remember, your 100 is coming, you make the call. That's what we just talked about for 35-40 minutes.

You making the call, you making the choices, reorganizing your brain.

Love and appreciate you all for sharing our podcast with your friends and family. Our social media, our articles, all of our platform stuff is growing because of you making such a difference.

To all the people, all of the doctors who are listening, so listen, thank you so much. One more time, Dr. Stephanie Sullivan, and Dr. Eric Plasker signing out.

Dr. Plasker (29:42): Thank you so much for joining us on the 100 year lifestyle podcast. We hope you enjoyed this episode.

If you have topics that you want us to cover, people you want us to interview, maybe you have some stories that you want to share, stories of yourself, loved ones, people in your life, we would love to hear from you and share your story.

Please email us at info@100yearlifestyle.com. And remember, nobody wants to get to 100 or even 50, 60, or 70 for that matter, crippled, broken, and alone.

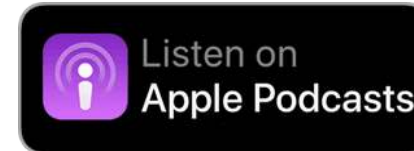
So please share the 100 Year Lifestyle, all of our podcasts, social media pages, website with your family, friends, and coworkers so they can take this journey with you.

And until next time, adjust your lifestyle. Live your best life today and every day on the road to a sensational century.

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