

An Interview with Saray Stancic, M.D.

by Mark Huberman

Saray Stancic, M.D. is triple board-certified in Internal Medicine, Infectious Diseases, and Lifestyle Medicine. She graduated from New Jersey Medical School in 1993. After completing her fellowship, she accepted the position of Chief of Infectious Diseases at the Hudson Valley VA in New York. She served as Translational Medical Leader at Roche Pharmaceuticals, where she led clinical trials in the field of viral hepatitis while continuing to practice in infectious diseases at the Bronx VA in NYC. In 2012, she left infectious diseases to fully dedicate her time to the field of lifestyle medicine. Dr. Stancic's interest in lifestyle medicine is rooted in her personal story as a patient living with multiple sclerosis. She is the founder of one of the first lifestyle medicine practices in the country and mentors the Lifestyle Medicine Interest Group at Rutgers New Jersey Medical School. In 2018, she was appointed Chief Medical Officer for WellStart Health, a digital, team-based, intensive lifestyle medicine program. She is the executive producer of the documentary film, *Code Blue: Redefining the Practice of Medicine*. Dr. Stancic seeks to spread the power of lifestyle medicine on a global scale and bring needed change to how we train physicians. For more information: DrStancic.com and codeblue.com.



Having recently viewed the wonderful new documentary, *Code Blue*, I know that your diagnosis of multiple sclerosis (MS) profoundly changed the course of your life and caused you to question the assumptions of your own medical training. How old were you when that fateful diagnosis occurred?

It was 1995, and I was only 28 years old. I was at the beginning of my medical career. It actually happened while I was on call. I fell asleep for a brief nap in the middle of the night, and when I woke up about 30 minutes later, I couldn't feel my legs. It was that abrupt. That evening I had an emergent MRI that confirmed I had multiple lesions in the brain and spinal cord.

Had you had any significant health issues prior to that?

Not really. But you know, in retrospect, there were certainly episodes of fatigue when I was in medical school, but I just ascribed this to the intense pressure of the education.

How debilitated were you from this acute crisis?

It was pretty tough. I became largely dependent on a cane or crutches.



Dr. Stancic with Mark Huberman

From what I understand about the etiology of MS, it just gets more disabling over time. Am I right?

There is a spectrum and different stages to multiple sclerosis, but in general, it's a progressive, disabling, and incurable disease. And at that time, there was only one medicine approved by the FDA to slow the progression of MS. It was an injectable drug called Betaseron, which had numerous side effects. Every night I would have to inject myself. I would often wake up in the morning wondering what else might go wrong.

The disease caused me to become very sedentary. Believe it or not, I didn't do any exercise between 1995 and 2003, because every time I tried to do so my body temperature went up and I became symptomatic. My doctors would say, "Don't exercise, conserve your energy."

One of the most common symptoms that MS patients report is fatigue, and this was certainly the case with me. It was not the type of fatigue you might experience if you don't sleep well; it was debilitating to the point that I almost couldn't function. Anyone suffering from MS can relate to this.

So, there you were as a doctor and you couldn't fix yourself?

Yes, that was another aspect that was truly painful.

Was there one book, documentary, or lecture that finally raised your antenna to question what you were doing?

Sadly, it was not until 2003—eight years into my diagnosis—that a study made it to my desk looking at the positive impact on MS of consuming blueberries.

The researchers had placed a group of MS patients on a blueberry-rich diet and compared them to those who weren't on a blueberry-rich diet. It was actually not a very good study and involved only a small number of patients, but the conclusion was that those who ate the blueberry-rich diet felt better.

The authors spoke about the antioxidant capability in the phytonutrients and fiber. This terminology was pretty new to me, but it really piqued my interest. So that article was the catalyst that sparked an interest to search the medical literature on anything linking diet and disease, in the hope that there was something I could do beyond my current treatment. And when I did that, I was struck by the ample evidence that was available on how diet and lifestyle can not only affect risks and outcomes for MS, but also for nearly all of the chronic diseases that I was seeing in clinical practice.

Was there one particular author whose work really clicked with you?

There was a constellation of articles I was reading, but one by Dr. Roy Swank was probably the one that made the greatest impression. It was an article published in the *New England Journal of Medicine* in 1952, in which he discussed the incidence of MS in Norway. In this notable publication, he hypothesized diet might be playing a role in the high rates of MS in that country. He published several articles arguing that saturated fat was somehow playing a role in the pathogenesis of MS, and so he began to treat patients with a low-fat, plant-based diet, with good results. In 1990, the *Lancet* published a study that followed 140 of his patients over 34 years and essentially found that 95% of them were disability-free. I found that amazing.

Did you think to yourself, "Maybe that could be me"?

I absolutely did, and again, I just delved into the litera-

ture, and the more I read, the more validation and hope I found.

In my experience, even for those suffering significant health crises, the transition to a truly whole-food, plant-based diet takes a long time. Was this the case for you?

Yes. In the beginning, I took small steps in the right direction. But within a couple of months, I realized that this was really valuable, and I went all in—100%.

How soon did you begin to see relief from your MS symptoms?

Very early on. I started to notice some small things improving, particularly less fatigue. I mean, this is going to sound silly, but just having a normal, healthy bowel movement was one of the first things I experienced.

It may sound minor, but to MS patients this is actually a big deal! But there was another thing that happened to me early on that is hard for me to objectively give you evidence on, but I just felt better. I was more positive and truly hopeful about life for the first time in a long time.

Were you able to wean yourself off your medication?

Yes, I was, and believe it or not, I was on over a dozen of them.

How liberating was that?

It was amazing! I was a young woman who couldn't leave the house without a pillbox. And learning how to sleep was an enormous challenge, since one of the side effects of the medications was interrupted sleep. So, then I was given another medication to sleep, like Ambien, and I became dependent on that. Imagine how empowering it was to learn to sleep on my own again. Now I consider myself a professional sleeper! I go to bed at 9:30 at night and wake up at 5:30 in the morning, and I feel amazing. When I wake up, I typically meditate for about 15 minutes, and then I run or hike. It's a great way to start the day.

During your plant-based renewal, did you have a doctor?

I did, but unfortunately, most of them were just not in agreement with the decision I had made; that was hard for me since I was pretty much on my own.

I would imagine that in early 2000 there weren't a lot of lifestyle physicians around with whom you could consult.

Not that I knew of, and "lifestyle medicine" wasn't even a term that I was familiar with. I really didn't have any support. It's interesting, because one of my MS specialists was not only my physician, but a professor who I really admired

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as a student. I almost felt like I was disappointing him by not following his advice as an expert. But I knew something wasn't right; my quality of life was nonexistent. I was 32 years old, and I could barely get through the day. I also have to say that a part of me thought all of this didn't make sense. It just didn't seem right that every time I would go to my doctor and report something, all I got was another prescription. And the prescriptions just kept adding up.

Tell me about your husband and how he reacted to all of this.

I actually met him, believe it or not, about six weeks before my diagnosis of MS, and truly think any other man would have run in the opposite direction. But he's always been there for me, and I can't imagine where I'd be without him.

Did you ever fear that with the condition you suffered and the many medications you were on that you wouldn't be able to have children?

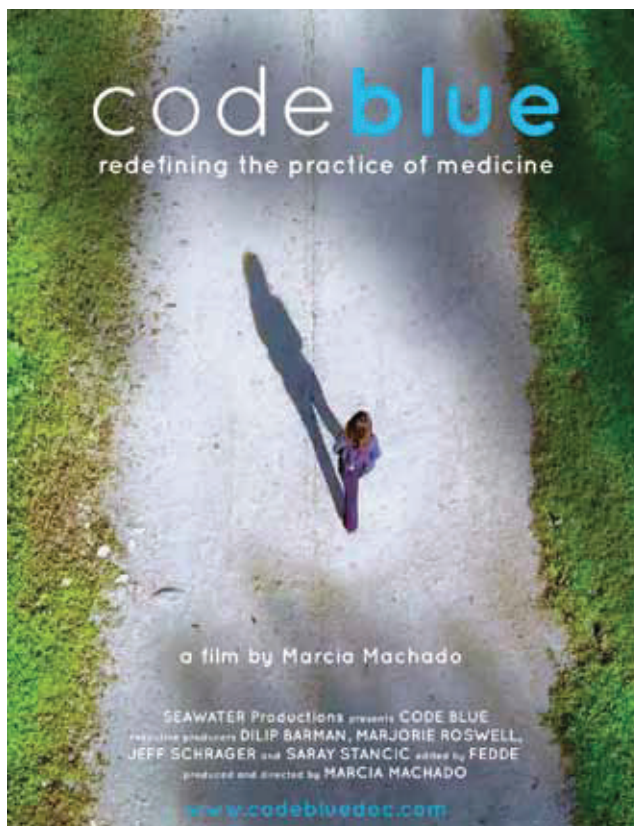
I was very worried about it, because I really wanted to have children. Making the decision to have children was difficult knowing that I was suffering from a disabling disorder; I questioned if I would be able to care for them. I wondered if it was even responsible for me to do so. But I had an incredibly supportive husband and that gave me the courage.

Were you plant-based by the time you decided to have children?

No, I wasn't. My son was born in 2000, when I was still struggling with the disease. But my daughter was born in 2003, during the time I became plant-based.

Do you think her genes are a little bit stronger because of it?

A little bit. But fortunately, both my kids are great, and although it's often really hard for teenagers to eat this way, I actually see mine influencing their circle of friends.



The film Code Blue follows Dr. Saray Stancic as she reflects upon her journey from a multiple sclerosis diagnosis to wellness.

Are you inspired at how eating a plant-based diet can prevent and reverse so many other chronic conditions?

Absolutely, and that's so very important. The diet and lifestyle benefit all kinds of conditions.

So, the diet you now advocate is not simply for MS, right?

Right. It always drives me crazy when I see books that claim that this is the "Alzheimer's Diet" or the "Diabetes Diet," etc. No! It's all the same thing! It's a diet rich in fruits, vegetables, whole grains, legumes, nuts, and seeds. We should all be eating this way to reduce our risk of disease and improve our health outcomes. Most people are sitting behind a computer for eight hours, then sitting on the couch, watching one TV show after another. We are also highly stressed, don't get enough

sleep, and we drink and smoke too much. These are the behaviors that promote inflammation and promote chronic diseases.

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How large a role does heredity play in our susceptibility to chronic conditions like MS, and how doomed should people feel if they have a history in their family?

Heredity certainly plays a role and presents obstacles, but the great thing we are now learning is that such inherited genes can actually be turned on and off depending on the lifestyle choices we make. I know that I

still possess genes that promote or can lead to multiple sclerosis. And I certainly know that if I go out and start eating cheeseburgers and other processed foods, and if I become sedentary again, I will turn those genes back on again. But I am determined not to let that happen. I try to be cognizant of all the lifestyle decisions I make, every single day.

Would you consider yourself cured of MS?

I never say I'm cured; I say I can now better manage my MS. I have a lot of respect for this disease, because it is a disease where one day you're fine and then the next day you're not. We also don't yet clearly understand its etiology,

but more and more studies are confirming that the make-up of the bacteria in our gut is what is fueling autoimmune diseases like MS. And for me, it's become such a beautiful message, because not only is my MS quiet and well-managed, but I also have no evidence of heart disease or diabetes.



Dr. Stancic empowers audiences to reclaim control of their health through adopting a healthy lifestyle.

macy. And if the top medical schools like Harvard are not talking about this, then why would anyone believe it? It's not that they are bad doctors, who just want you to be sick, it's that they don't know any different because they have not been taught any different. And if

it's not taught by the top professors in the country, and it's not on their medical boards, then why should it be important?

And you don't expect to get any?

I do not. I am also convinced that the diet and lifestyle I have adopted have tremendously reduced my risk as a woman of developing breast cancer or Alzheimer's disease. I have found a lot of other benefits as well. I have a positive outlook on life, and I love to be around like-minded people, sharing the joy of this lifestyle.

Have you now become the go-to MS doctor for people suffering from that condition?

I do see a lot of MS patients. In fact, just yesterday, I had a patient who came from overseas to see me. My hope is to collaborate with a neurologist and to work with him or her in helping manage MS patients, because it is a really challenging disease to treat.

Why do you think highly educated medical professionals can perform bypass and stent surgery every day but not see the connection between the clogged arteries and the diet and lifestyle they lead? Do they think all that plaque just comes from thin air? Do they really think that the only alternative for their patients is prescribing medications to relieve their symptoms, while not for a moment giving a thought to prevention?

I think there are a number of reasons, but the primary one is that they have invested so much money in an education where diet and lifestyle intervention is not only not taught, but it's not even mentioned, so it is given no legiti-

"It's not just the doctors who we are not correctly educating, but it's also the nurses, the physical therapists, and everyone else who is involved in the healthcare profession."

Isn't it also true that insurance companies don't pay physicians to talk to people, but to perform a procedure or write a prescription for a pill?

That's exactly right. There is not a lot of profit in lifestyle medicine, but we really need to sit together as a group of interested parties and figure this out, because the path that we're on today is not sustainable.

Was that your motivation behind your documentary, *Code Blue*, to begin that conversation and to shine a light on the problem and solution in medical education?

Absolutely!

How did *Code Blue* come about? Was it your passion to tell your personal story?

Actually, it wasn't me wanting to tell my story at all. However, after hearing about my story and the work I am doing, the filmmaker, Marcia Machado, approached me in 2015 and said, "I think your story is amazing and we should tell it."

Had she ever done any health documentaries before?

She had made documentaries in many different areas, but not in healthcare. So I said to her, "The story is not me, the story is the fact that physicians go through all of this training only to learn nothing about the most powerful intervention available to us—an intervention that can prevent

80% of disease—an intervention that can better manage and actually help patients reverse their diseases. That’s the story we need to tell.” So, we compromised: I agreed to tell my story, and I also got to tell the larger story.

But your personal story sure gives the film its heart.

Thank you for saying that. But, for me, the greater need is to tell the story that we’re not properly teaching our health-care professionals. And of course, it’s not just the doctors who we are not correctly educating, but it’s also the nurses, the physical therapists, and everyone else who is involved in the healthcare profession. I truly think that if we all spoke to this universally, we could really create a cultural shift. But it has to be something that community and healthcare professionals come together on and agree that it’s important.

When the film is shown, I try to invite healthcare professionals to be in the audience. I ask patients to go to their doctors and clinics and speak the words “lifestyle medicine” and “plant-based nutrition.” I want doctors that are skilled in these areas. And I want doctors and medical students to demand this of their experience. I want them to remind their medical school professors and administrations that they are the ones paying the tuition, and that either they incorporate this kind of training into the curriculum or they are going to some other school where they do.

Each time you watch the film, does it recharge your battery?

It really does, and particularly when someone sends me an email telling me that they just saw the film and it really moved them to change their diet and lifestyle.

Tell me about your current medical practice.

I have a lifestyle medicine practice in Ramsey, New Jersey, about 20 miles from New York City. My practice is devoted to helping patients modify their behavior. My initial visit is two hours, where I sit with the patient and take a very thorough history and physical, and then I teach them about this lifestyle and answer their questions. I often will go to their homes.

So, you are one doctor that still does house calls?

Yes, I do. I even go food shopping with them, cook with them, and engage their family members.

I assume health insurance is not paying for this.

It is not. It’s private pay. However, I always complete an itemized statement for patients, and they can submit it to their insurance companies and often get reimbursements. I

just don’t deal with them directly.

Do you have office colleagues or is it just you?

Currently, it is just me.

Now that you have a documentary about your life and your goals, is there a book in the works?

That’s actually something that’s about to happen, and I am very excited about it. The book is going to be about lifestyle medicine and is going to be a prescription for wellness for everyone—not just someone who has MS or heart disease. The focus will be on what we need to do to maintain a life free of chronic disease and to allow us all to age gracefully and not end up suffering in a nursing home.

As I am sure you are aware, within the spectrum of the whole-food, plant-based diet movement, there is a spirited debate between those advocating the consumption of healthy fats and those arguing for no added fat at all. What is your opinion on this?

I have looked at the objective, peer-reviewed medical literature, and where I land is that some healthy, whole-food fats, like avocados and nuts, are fine, but they sometimes need to be used sparingly or judiciously. I believe that our primary diet should consist of fruits, vegetables, whole grains, legumes, and seeds, and then nuts and avocados in smaller amounts.

And if overweight is an issue, then the whole-food fats should be utilized more

sparingly?

Exactly so.

What about salt, oil, and sugar? Should they be avoided as well?

I think they should be limited and whenever possible avoided. I’d highly recommend a book on the subject called *The End of Overeating* by Dr. David Kessler, the former head of the FDA. In this book, he describes foods laden and layered with sugar, salt, and fat as hyperpalatable, which can promote overeating.

I assume you practice what you preach.

Oh, my goodness, absolutely!

More religiously than most because of your condition?

I think I’m very strict and very diligent, not just for myself, but also because it is important for me to be an example to my community and my patients. They often see me shopping at the supermarket and riding my bike to my office. I often encourage patients to walk to my office, and I will

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celebrate them for coming in without their cars. So, again, being the example is very powerful.

Tell me more about your husband and children.

My husband is just an amazing man who has always stood by my side. He's an obstetrician with a group in Jersey City. It took him a little longer to adapt to a plant-based diet, but after a health scare about 10 years ago, he was 100% on board.

Does he sneak his plant-based nutrition into his OB-GYN practice?

Since his practice is in an inner-city community, there are obvious challenges, but he does share plant-based nutrition and lifestyle information with his patients and his team. His administrators have invited me to speak at his organization, and I've shared my story and my work with them.

Do you feel lucky to share this lifestyle with your husband, since it can be a tough and lonely lifestyle for folks going it alone?

I do feel very lucky. I always encourage patients to bring their significant other with them for the initial visit, because it's not only a learning experience for them, but also the important people in their life.

What about the Stancic children?

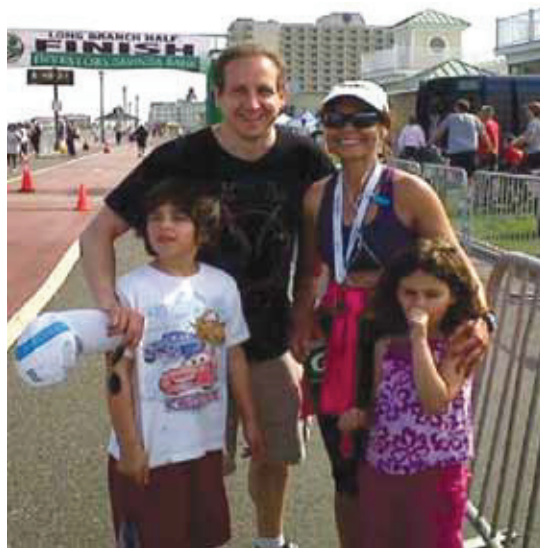
They are great, happy kids, and both are plant-based. My daughter, Emily, is 15 and my son, Nicholas, is 18. Emily has a beautiful voice and has a love of Broadway, an affection she shares with her father, who does a lot of community theater.

Do you have any particular heroes in the whole-food, plant-based world?

There are so many, but certainly Drs. Dean Ornish, Michael Greger, Caldwell Esselstyn, Colin Campbell, Neal Barnard, and Joel Fuhrman are extraordinary individuals who are at the top of my list. I was honored to have several of them appear in my film.

How rewarding is it to now be one of their colleagues?

It's incredible to have the opportunity to meet and share a stage with them and to help further this important movement. I often think about how much courage it took for them to speak out during the early days of their careers, where they were often subject to criticism. It is exciting to see how much greater acceptance and respect they now receive as more and



Dr. Stancic with her family at the finish line of the New Jersey Marathon in 2010

more studies are being published validating what they have been saying.

You sound pretty optimistic.

More so than ever! And you know why I'm optimistic? It's because I spend a lot of time with students, especially medical students, who are becoming more and more interested in what I and my colleagues have to say.

Have you been able to get in the medical school door to share your message?

Yes, I have. In 2015, the New Jersey medical school where I graduated invited me to be the mentor of their Lifestyle Medicine Interest Group, and that has given me an amazing opportunity to spend time with passionate young men and women, like Saul Bautista, who is featured in *Code Blue*. Saul is an extraordinary young man who has done so much for his community in Newark, including nutrition education outreaches to high schools and elementary schools.

Do you find that young medical students are hungry for the information you and your colleagues are sharing?

Yes, they are very eager to learn more.

When you look in the mirror today, it has to bring a smile, doesn't it?

Absolutely! I mean, the fact that I can wake up every morning and feel as good as I do is such a wonderful thing. It's such a blessing to have control of my life and health, and so rewarding to be able to help others achieve the same good fortune.

I have this beautiful piece of artwork, a caricature of me, in my office at home, given to me back in 2000 by a diabetic patient of mine who was a well-known artist and cartoonist. We developed a very special relationship over years of caring for him. Sadly, he died from complications related to his diabetes, but near the end of his life he said to me, "Dr. Stancic, promise me that you will do everything you can to deliver this message as far and wide as possible." I made this promise to him about 15 years ago, and every time I look at that beautiful drawing, it fuels me to keep moving forward.

I think that is a beautiful note on which to end this interview. Dr. Stancic, you are an amazing person, and it's been a privilege to meet you.

Thank you! You are amazing as well. 