OZEMPIC: 196 - [AMA 32 Sneak Peek] Exercise, squats, deadlifts, BFR, and TRT

Hey everyone Welcome to the Drive podcast I'm your host Peter Attia All right Well here we go Another A ma of course I'm joined with a new cohost for this episode Nick Stenson and Nick will will save the intros till the end But you ready to ready to jump into this Let's do it We compiled some good questions here I think it should be a fun one Yeah you showed me the list that you were working on and it's got me a little overwhelmed If we can get through it I'll be super impressed But you've you've got a good great questions So just tell me where you want to start So we got a lot of good questions following the Jeremy Lennay and some of the exercise podcast So I thought we'd kind of start there and there's some blood flow restriction questions But I thought it might be helpful for people before we get into some of those specifics Just what does your current exercise routine look like each week You know I know it's always changing But if you can give people a rough overview I think that will be helpful as we get into some of these other questions Yeah I mean the actual macro structure of what I do has not changed much in the last year The microstructure has changed a lot meaning the exercises have changed a lot But uh the the macrostructure is that on Um let's see Tuesday Thursday Saturday Sunday uh our cardio days So Tuesday Thursday Sunday are zone two Saturday is either a zone two followed by a zone five It's kind of a separate workout So each of those are 45 minute zone twos and then kind of like a 30 minute zone five as a separate workout that's done almost immediately after So basically getting out a bike clothes and putting on you know sort of stair climbing stair climbing clothes Alternatively I might just do a longer bike ride on Saturday and make it more of an anaerobic workout Uh Then from a lifting standpoint it's Monday Wednesday Friday Sunday is lifting and about I don't know nine months ago I switched to an upper body lower body split I used to lift three days a week and do upper body lower body every day So each day I was doing kind of pushing pulling and hip hinging And now the lower body component I think is Monday Friday the upper body is Wednesday Sunday and I always lift after doing cardio because I think the reverse has been demonstrated to erode uh strength training gains So Peter what happens if you miss a day because I noticed you didn't say day one day two day three you were very distinct on the days of the week I know you typically don't miss a day But if you miss

Wednesday do you just scrap those exercises and then just continue with your program or are you trying to make up in the interim No like yesterday Sunday would have been a a ride followed by lift day but I was on the track the whole day and I knew you know I knew that in advance So I just ended up doing that lift on Saturday but obviously was short changed on the zone two for yesterday So I will I pretty much will never compromise a lift I will always get those four lifts in during the week no matter what Um And sometimes it just means moving the days around or you know doubling up on a different day And what about timing Do you have a preference Morning afternoon evening Is that flexible as well within kind of your schedule A little more flexible on weekends But Monday through Friday and pretty much no flexibility those lifts have to be done first thing in the morning and not first thing in the morning So morning routine is kind of more about the kids and stuff like that but once they're out the door to school it's around 7 15 7 30 That's when I'll typically lift got it So I know from the Jeremy Lenke podcast you were talking about kind of how you were starting to incorporate blood flow restriction So like I think one of the main questions we saw from subscribers after that was you know how are you utilizing that into your exercise program Is that something you do every day Is it days like you mentioned where you were just not really feeling it and it was injury prevention or if you had an injury you were trying to recover Kind of how do you utilize that throughout the week So I have really enjoyed blood flow restriction especially since I got new uh cuffs So when I started I was doing it purely ghetto style and I still I enjoyed it but I wasn't even coming close to tapping into sort of what the potential of that was uh for the last oh God probably three months I've been using uh kind of a well it's called the brand is actually called smart cuff and it's a night and day difference So they're they're kind of absurdly expensive I don't remember how much they cost I wanna say like \$600 for the four cuffs two upper body two lower body plus the device which is what really makes it so essential meaning the device that is measuring inclusive pressure and pumping each time But it it makes such a difference that in my mind it's just totally worth it Um I do plan to try a couple of other devices out There's even more um you know extreme versions of this that apparently have better features like the Katsu one But you know I think my guess is there will be no bigger jump than the one I took from going from you know basically \$20 junkie bands to to these ones And so I do BFR every day that I lift and I just do it at the end of the workout I'll typically do 21 to 2 exercises depending on the muscle So today

for example um at the end of a leg session I did a BFR leg press set Uh at the end of an upper body session I'll probably do a bicep set and a tricep set And I'm always doing it in the way that we discussed on that podcast But just for folks to remember it's 30 reps rest 30 seconds 15 reps rest 30 seconds 15 reps rest 30 seconds 15 reps That is the standard prescribed procedure for BFR You're doing this at a weight that is 30 to 40% of your one rep max So the easiest way to calculate that is to take the rep the the weight that you can barely get 10 reps with So what is your best 10 rep weight divide that by 0.75 So your best 10 rep weight is about 75% of your one rep max And then you multiply the resulting figure by somewhere between 0.3 and 0.4 depending on how strong you are So use an example if um uh two if your best 10 rep uh of you know of of curls is £40 you would divide 40 by 0.75 Which what is that takes you up to 57 or something I'm guessing And then you would multiply that by somewhere between 0.3 to 0.4 I typically tend to go closer to 0.4 That becomes the weight that you'll use for the BFR With these smart cups you have a whole additional variable which is it comes at three different pressures So it calculates the pressure And again just for the refresher for folks the purpose of blood flow restriction is to operate at about 30% of the exclusive pressure the arterial occlusive pressure which when you're using kind of crap you know just bands you don't really have a sense of what your reclusive pressure is Unless you're applying a Doppler signal to your distal extremities which is very cumbersome Instead when you use these bands that come with an inflation uh when you use these cuffs that come with an inflation device they're actually measuring the inclusive pressure So the first time you do it it takes a little longer and then it says OK now I know what it is for your arms and your legs do you want to go at the highest level of intensity medium level intensity or a lower level of intensity which basically just adjusts the pressure And you mentioned a Doppler signal for your other bands Can you just remind people what that is in case they're using this with cuffs that don't have kind of what yours have Yeah but a Doppler device you'd have to buy one And that's the reason I think like if you're going to go to the trouble to buy a Doppler device you might as well buy a smart cuff or something similar But it's basically a medical device that we used to use in the hospital all the time when you can't feel a pulse Like if you put your hand on your radial artery here you can feel the pulse hopefully if you're healthy But in people who have peripheral vascular disease you can't So you know because their pulse is too weak So the Doppler is basically uh a little you know like it looks like a little pen you put it there

with a little bit of jelly So it um it has better sound conduction and it's basically sending a sound signal uh to the artery and it's recording that sound So when there's complete elision you'll hear nothing And if there's only partial inclusion you'll hear like a woo woo woo And it's sort of picking up that that sound So what you would basically do is use this device to figure out how tight to go But of course then you're like trying to figure out like how tight to make the band to get to that exclusive pressure And then how do you even know how to back off it So you'd have to use a cuff that at least allows you to know how many millimeters of mercury you're putting in to figure out what complete occlusion is and then backing it down in my opinion it's just not worth doing that No that makes sense One of the things I was surprised by because I was in your gym the other day and was just the difference between the two cuffs And I think because of that I asked you to pull them out just so you can show people that you have them Yeah So so these are kind of what my you know my cheap \$20 cuffs were that I used for many months And you know you you have two of these and you would gonna wrap them around your arm and your leg and you sort of look like a bit of a heroin addict because you're sort of like trying to squeeze this thing Um again I would just York on them really hard until I would my guide was once it hit seven out of 10 pain that was probably the right spot But I I find that's very inaccurate Um the the current cuffs uh this is the arm cuff So it um you know it's obviously a much more rigorous cuff and you you apply this you know slap it on then a little device hooks on to here that hooks up to a little pump that that's where I program this thing and that will achieve the inclusive pressure The other thing I really appreciate now is like look at how thick this thing is just for the arm right Um Look at the leg one like totally different right So so now I can because I could never get I was never really doing BFR for my legs when I had that little blue thing Whereas with this thing wow you get it you get you really are getting the the true occlusive effect And what are you using to measure like the difference there or how do you know like it's working How can you tell us It just feels subjectively Yeah Yeah It's it's not hurting where the band is compressing me I'm feeling that sensation of basically lactic acidosis throughout the entire leg as opposed to just the pain of being constricted where the band is when it's a thin band It's interesting to note the pressure of occlusion is much higher than systolic pressure because it's it's a function of how wide the band is So I noticed today when I did my legs the exclusive pressure was 100 and 58 millimeters of mercury Well that's way above my systolic pressure My

systolic blood pressure is very low I tend to run super low in blood pressure as evidenced by the fact that I face planted in Brazil last month Um and my upper body occlusive pressure with those cuffs is about 58 millimeters of mercury So you have one that's like oh sorry 9 94 millimeters of mercury tends to be a approximate olu on upper body 100 and 54 or something 100 and 58 on the lower body But again it's also a function of the width of the um cuff So that's why I realize you can't just just knowing your blood pressure isn't enough to do this Yeah And you mentioned you always do it at the end of the workout I assume that's purposeful Have you ever played around with like prior to your actual workout I mean maybe others could speak to it for me personally I just think when I'm doing my heaviest most neurologically demanding component of exercise I want to be a little fresher Um And I don't want to be as taxed whereas I kind of like using this as sort of a finisher or or near the end Sometimes I'll do I'll still do something after this But but it's um you know like I'll do a dead hang is usually the very very last thing I'll do You'll never do a dead hang with a BFR cuff on I I tried it didn't it didn't matter It didn't it didn't impair the ability to do it at all because the Dead hang is really about grip And that didn't seem to be impaired by uh by the upper body BFR But I have tried it once What's your record for Dead Hang these days Like a little over 33 10 Jeez And how but that's at the end of a workout And I think you know if you do these fresh I think you can go a little more Yeah Do you have a goal set in mind that you want to hit I was super happy to get over three I I mean most days when I do it I just want to go to 22 30 not go to failure and just kind of build strength without failing every time Uh Lately I've been doing a lot of finger pull ups I think I showed you that device Yeah that thing is painful Super painful gives you a new respect for those climbers Uh That was the first thing I thought of because walk people through you're not doing all four fingers right You only are doing three and you're just straight in the pull up position I do both So I'll usually start with four fingers but that's very easy relatively speaking But the the jump from four finger pull ups to three finger pull ups is so much harder Than I would have ever guessed Oh I can't imagine And are you looking to do two finger and one finger Is that the goal It's just to just add yourself up if I can do you know four sets of 23 finger pull ups uh at the end of doing you know maybe three sets of 44 finger pull ups That's that's pretty good for sure Um one other question we had on the BFR was do you ever do it in zone two training Like have you ever played around with that Thank you for listening to today's sneak peek A ma episode of the Drive If you're interested in

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