How to Recover Smarter After Every Workout with Dr. Michael Ormsbee (ep – 89)

[00:00:05] **Dr. Ginger Hultin** Real question, are you listening to this episode right now with sore muscles? Because I'm recording it that way. So I think we could be in the same boat. If you're an active person, this is a cycle I'm sure you know well. Physical effort, fuel, recover and repeat. While so many of us are great about optimizing the effort part, today I want to draw your attention to the other half, recovery. Here's the thing, if you're not recovering properly between workouts, the next time you hit the gym, it's going to feel harder, your progress is going to take longer, and your risk for injury, it's greater. And if you are just getting started, getting insanely sore can make you shy away from going back to the gym at all. So today's episode is all about recovery. And to help me unpack it, I connected with someone working out of a research lab in sunny Florida, Dr. Michael Ormsbee. Mike is a professor at Florida State University and the executive director of the Institute of Sports Sciences and Medicine. His research focuses on exercise and sports nutrition and, as an athlete himself, he doesn't just test these strategies in the lab, he lives them. So if you're ready to hear the nitty gritty of recovery in a way I promise you can apply, stick with us. Before we jump in, let me remind you, even if your goal is simply to take more walks during your week or feel a little less tired after your workouts, this episode is for you. Whether you're a professional athlete, a recreational one, or simply an active adult trying to feel better in your body, the strategies we unpack today will be useful. We're going to break the conversation into three simple pillars, nutrition, hydration, and sleep. Recovery matters for everyone, full stop. I'm so excited to dive into this conversation with Dr. Ormsbee, or as he's less formally known, Mike. To start, you'll hear him explain why he's been called the Toyota of health and fitness. And then we get into recovery nutrition. Let's go. Dr. Ormsbee, welcome to the podcast. I am so excited for this conversation because today we're talking all about recovery.

[00:02:36] **Dr. Michael Ormsbee** I love it. This topic is huge. I get questions about every single day.

[00:02:40] **Dr. Ginger Hultin** And you call yourself the Toyota of health and fitness, which I love. I have a very similar approach, dietetically speaking. So tell me a little bit more about exactly what that means to you in a world that this topic feels so flashy right now.

[00:02:56] **Dr. Michael Ormsbee** Just to be clear, someone else called me that originally. And when you're sort of getting out there in the public with speaking about science and other things, there's different brands that people have. And so one of the exercises was what is my personal brand, and it just so happens that I'm not going to be your flashy race car type answer. I'll be reliable. I will be dependable. Something that's sort of evidence-based has a track record of success and can have some fun getting you there too. One of the big mottos that we have out of our Institute and the work that I do is What can you implement that is so small, you barely even notice you've done it. This long and steady is the way that I do my finances and it's the way I do, my health and fitness.

[00:03:32] **Dr. Ginger Hultin** And it is actually what works. I think a lot of people don't want to hear it. I hear a lot people being like, but I want results. So that makes me motivated. And I'm like, that backfires over and over.

[00:03:42] **Dr. Michael Ormsbee** That is a tricky situation though, right? Because people do want to see it. So you're up against this fight of I want to see a shift tomorrow. And so we only have to link it back to why are you doing this? What are you trying to accomplish? And then reminding folks you didn't get in this situation in one day and we're not going to fix it in one. Give yourself a little grace. If it took 25 years to feel like you feel, let's give us a little time to get back to feeling great.

[00:04:05] **Dr. Ginger Hultin** Yeah, absolutely. To start with the science of when your body is actively recovering after exercise, whether it's a leg day or a walk, how should listeners best understand what is actually going on with muscles and bones?

[00:04:19] **Dr. Michael Ormsbee** In general, what we're trying to accomplish is control damage. You want to do enough to make some progress and to modify the muscle or the bone or what the tissue is we're tying to load, but not in such a way that you just completely wreck yourself and are unable to recover for a long period of time. And honestly, the amount of recovery and the type of recovery shifts as we grow older. We are just able to handle more of this as we're younger. And as we get into middle age and on, you just have to give yourself a little grace and building in purposeful rest days. You have to have the discipline to not work out hard some days. And that is something that's a little bit hard to get across. And so you're creating this controlled damage, and then

you have to provide an atmosphere where you can help repair and rebuild. It's almost remodeling a house. For example, you have have demo day where you take some stuff down and build down in order to build it back to a better place than it was before. And that demo just has to be a little bit at a time so that you come back. And you can repeat this day after day or whatever your plan is every other day so that you have an opportunity to succeed without being so sore that you just don't want to do anything. The way that I like to talk about is adapting rather than breaking it all down. So you don't wanna say I'm broken from that workout. You're like, my mindset is I'm sore, but that's because I'm adapting. And so for folks listening, the repair and remodel process is something we need to pay attention to, particularly as we're aging. And that has to do with your recovery, the modalities recovery, some exercise strategies, but also for sure how we deal with our nutrition.

[00:05:48] **Dr. Ginger Hultin** What do you find to be the most effective approach to what people should be eating when they're remodeling or recovering?

[00:05:55] **Dr. Michael Ormsbee** The very first thing that we look at is, what's your caloric intake in general? Like total calories. What are you eating? What are you not eating? And it turns out for a lot of people who are super active, they actually are in a place where they're underfed. And so I would look at total calorie load. Are you matching your energy expenditure with the food you're trying to bring in? And it's purposeful eating, it's not just haphazardly grabbing things. It's everything has a place and a strategy for why you're eating and how you're recovering. Now, that's not the most fun way to eat, but it is something you have to at least dial in on for a couple of weeks here and there so that you have an idea of how much you're eating, which is a good strategy. Once in a while, grab a measuring cup and see what you're actually eating, because it'll probably shock most people on either way too much or way too little in that realm.

[00:06:38] **Dr. Ginger Hultin** I catch a lot of people under eating slash under fueling. There's so much in our society that is like eating less is better, and that is certainly not true, especially when you are either a pro athlete or just an everyday athlete or someone trying to be more active.

[00:06:53] **Dr. Michael Ormsbee** Yeah, and what's really fun is when I can show somebody the volume of food they can eat if they're making the right choices and how much it actually is, even though the calorie load is lower than other choices they were making before where it was just super caloric dense foods and so they were having foods that would not fill them up would be high in calories. And I'm thinking, I'm eating like three platefuls over here, and it's

still less than what that one dose was for that person. And so once you get nutrient density, caloric density sort of dialed in, people often will say to me, like, you're just like eating all the time. What's up? And I'm like, well, look at what I'm eating. I'm eating a ton, because I'm one personally feeling and recovering. I'm also still training hard all the time. And I have a plan for what I've doing here with these choices.

[00:07:36] **Dr. Ginger Hultin** Yeah, and volumetrics is a term that some people use for this. You can eat a lot of fruits and a lot of veggies, which helps you with your fiber and your gut microbiome. And I like to hit recovery with antioxidants from foods in that way. Is that part of your strategy?

[00:07:51] **Dr. Michael Ormsbee** Yeah, but it's sort of built in because I think of it as having fruits and vegetables and having a ton of them that makes up most of my plate at most meals. And so because of that is sort of build in, I don't purposely seek it out. It's just someone inherent in what I'm actually eating.

[00:08:05] **Dr. Ginger Hultin** It's a double benefit.

[00:08:07] **Dr. Michael Ormsbee** Yeah. One of the things you asked about was in terms of just general recovery. So I start at the top with what's your caloric intake. If I'm building a plate, I'm looking at my protein intake. I lock that in on every single meal. What is my protein source and how much protein is it? Then I know how many calories that is for that particular meal. Once that is locked in, then I fill in the gap with my carbohydrates and my fat sources, so that if it's a really intense workout day, then i will dial up my carbohydrates. If it's rest and recovery day or just one that you get too busy and it didn't happen, then I would shrink that down. But the protein is always locked, which is why I like to give the recommendations in grams per kilo or grams per pound, as opposed to a percentage, because if it's a percentage and you eat a huge meal, your amount of protein drops. We dial in that protein that anchors my plate. And once I have the plate anchored, then I adjust the other numbers. And I'm not afraid of carbohydrates. That's a big part of recovery. That's big part some of the hormonal processes that we need. And I just work for myself or for others. What do you enjoy? What do like to have? And then we implement that into their plan.

[00:09:16] **Dr. Ginger Hultin** Yeah, I practice so similarly. I really like the idea of the protein anchor, and then you build in the other two macros which is fat and carbohydrates. And a lot of people forget fruits and veggies are carbohydrates, right? We absolutely need to have those fibrous carbohydrates.

[00:09:30] **Dr. Michael Ormsbee** Especially if you're working with a new person, we have to do a little bit of education on what is a carbohydrate, what is protein. And so I like to meet anybody at the level they're starting at. Just because I like eat a certain way and I've been doing it for 30 years, doesn't mean that person can do that. And that's where we go back to those little bitty habits.

[00:09:48] **Dr. Ginger Hultin** You and I have both been doing this for a really long time. And I think a lot of people listening are like, well, how do I know how to do that? And the message from me is you don't have to figure that out alone.

[00:09:57] **Dr. Michael Ormsbee** So I have a huge luxury of having a lab right next door to me. And so if somebody has access to a university, a lot of times they have an exercise science or nutrition department where they can measure this stuff for you. Now there are some calculations that I would start with. If you don't have access to those things, they're free, they are online. Most of them will actually get you pretty close, but if you really want to dial in. Then I would go ahead and test the resting metabolic rate. And then you can actually understand how many calories you do need to be eating. And this shifts over time. In fact, a recent paper came out just this past week from UNC Chapel Hill from Abby Smith Ryan's lab. And they were able to show that through the perimenopause and to menopause shift that the resting metabolic rate actually came down. The calculations were overestimating that.

[00:10:45] **Dr. Ginger Hultin** Oh, interesting. I've heard anything from resting metabolic rate going down by two or 300. Were they seeing more?

[00:10:51] **Dr. Michael Ormsbee** Yeah, that's right. They were dropping over time. And so that's a shift that sneaks in. You don't understand it's happening. And they ended up having some issues with overeating and they didn't really even notice it. And that's just a side effect of a process of life for women.

[00:11:04] **Dr. Ginger Hultin** I'm really glad you bring that up. We talk a lot about midlife. We talk about hormonal shifts here. And to what you said, fitness changes as you get older. It's not always static.

[00:11:13] **Dr. Michael Ormsbee** Yeah, there's so many reasons why, and there are some answers, but there's not a lot of great ones. So I know a lot women that struggle with this phase, I mean, fortunately we're having more evidence and research come out that helps support women in this phase. But right now it looks like there's a small shift in caloric needs. There's probably shifts in how you feel, which may make your exercise or your workouts maybe not as intense or as as hard as they used to be, plus it's a time when you're potentially caring

for children and parents. There's a lot of stress in your life. It's also the highest earning potential of your life and so there's these stresses that just come in and weigh on it and upset the energy balance equation in one way or the other. Plus you have actual physiological shifts in the receptor numbers of your adipocytes so that you're storing fat differently. All these things sort of hit at the exact same time and creates a perfect storm to one, not understanding what's happening, and two, feel like you're swimming upstream for sure.

[00:12:08] **Dr. Ginger Hultin** I love how you highlight all the complexities that are going on with these changes. It's not just hormones are shifting, it's creating big changes in the whole body.

[00:12:16] **Dr. Michael Ormsbee** Yeah, no doubt about it. And that's what's so hard is you see people that will say, you can fix all this with some hormone therapy or some herb that you've never heard of. And it's just, that's a big leap to say you can do that with one change or one of these different modalities.

[00:12:32] **Dr. Ginger Hultin** Totally. Yeah, we have some really great episodes on the pod that we can put in the show notes about menopause and I love that you're bringing it up here too. This episode is brought to you by Orgain. I'm always looking for protein sources that are nutritionally well balanced and right now Orgain has new ones at Costco that are worth knowing about. Try their new 30 gram A2 ultra-filtered protein milkshake. Why A2 milk? Well, most milk that people drink comes from cows that produce both A1 and A2 beta-casein protein. When A1 protein is digested, it may release more of a peptide associated with digestive discomfort. A2 milk comes from cow that produce only A2 beta-casein protein. When A2 protein is digested, it releases less of the peptide associated with digestive discomfort, so for a lot of folks, A2 milk is simply easier on the stomach. With 30 grams of protein, two grams of sugar, and only 160 calories, it's a great choice on the go. Available now for a limited time at Costco in creamy chocolate. Check them out at Costco.com. I knew I was going to be aligned with Mike's approach. We've talked about it more than once on this podcast. It all comes back to the small barely noticeable habits you can reliably do. It's not flashy, it's functional. So as we look at this practically, there's a myth I want to bust that connects directly to everything Mike and I just talked about. For this myth busting minute, I want tackle something you've probably thought after a workout that maybe didn't leave you wrecked the next day. If I'm not sore, I didn't get a good workout in. Well, let's unpack that. Muscle soreness is really an indication that your muscles were challenged in a new way, either through a new movement or an unfamiliar intensity. That's why you can try a new sport or pick up lighter weights than you usually use, and still really feel it the next day. It's not always about how hard you went, it's about how it challenges your body in new ways. On top of that, genetics and lifestyle

both play a role in how you personally experience soreness. So if you're not getting as sore as you used to after your regular workouts, that's actually just a sign that your muscles are adapting. This is a situation. You don't want to be so consistently sore that your body never gets a chance to recover. But you do wanna be challenging yourself with new movements and engaging different muscle groups over time. It's one of the reasons I recommend working with a personal trainer if that's a fit for you. They can help you do this in a more controlled progressive way that keeps your body guessing without running it into the ground. Bottom line, no soreness does not equal no progress. Your body is just smarter than that. Okay. Now that we've busted that myth, it's time to tackle another huge piece of the recovery puzzle, hydration. And after that, we get into sleep, and whether fueling before bed is actually a good idea, the answer might surprise you. I do wanna talk about hydration because I think this is another place that my clients at least really struggle. Talk to me about hydration in regards to a fitness recovery.

[00:16:16] **Dr. Michael Ormsbee** This is always a fun topic to get in. So I would say that by and large, the literature will say that at least for athletes, and I think it will apply to everyday folks too, even with knowledge, they're showing up to game day in a under hydrated state. And so most people are walking around a little subpar in terms of their hydration status. So that's just sort of in general. And then with the athlete data that for sure, like they're showing up one, two percent dehydrated or under hydrated as they come into a game scenario. And we know that little shift impacts things like reaction time and their ability to focus and have cognitive decision-making abilities. And so that's not a good thing. And so what we like to say is hydration starts before exercise, not after. We should be really thinking about this in pre-planning. One of the simplest strategies that I implement every day is the very first thing that I'm doing. When I get up and walk into my kitchen is drinking a full glass of water. And even if I don't feel like I want it, I will do that every day just to set the boundary, set the basement here in terms of like where I want to be starting from. Now, the other parts of this vary quite a lot, but then when it comes to like sweat loss and the environment you're in, that will change so much. It's individual, how much you sweat. I'm in Florida, so it is going to be hot and humid. And so here we have to think about that. And it makes a difference and we'll see athletes walk in with headaches and discolored urine and they're certainly under hydrated. And we'll do a USG score, urine specific gravity, and it'll tell you exactly where you're at in terms of under hydrated, normal hydration or over hydrated. And so your hydration status starts before exercise, and then it finishes with recovery, and we have got to replenish what we lost in that session, but the bottom line is make it purposeful. Like the research that shows planned drinking strategies always do better than doing this just haphazardly. And so if you just have a strategy, okay, I know I'm gonna have a

glass of water, a full one right when I wake up, boom, you're set there. And then people have other drinks, right? Coffees or teas or whatever that is. And then make sure you're having set times where, you know, you are going to actually drink actual water. I think that's a good way to approach it.

[00:18:23] **Dr. Ginger Hultin** People just get so busy and sometimes you don't realize that you're thirsty and all of a sudden you worked out and then you lost several pounds of water. And I feel like instead of being reactive and chasing it, I really like to help people do what you're talking about which is be proactive. Drink water in the morning. I have people fill up their water bottle so they have a visual for the day, and they're trying to hit their targets that way.

[00:18:45] **Dr. Michael Ormsbee** Hundred percent. And then the backside of that is if you've lost one pound, then you should probably replace at least a pound of fluid on the backside. And so you can easily measure that as well. Now that gets a little bit nitty gritty. Some of it you can just do with a urine spot check. Although that's not always 100 percent accurate, but that's a good somewhat of a barometer. If you have dark brown urine, you probably need to drink some fluid. And then we have to just be a little bit cautious because sometimes different supplements and different foods can actually change the color of your urine. So you just need to be a bit aware of that, but by and large you can use the urine check sheet and feel pretty good about what choices you're making.

[00:19:21] **Dr. Ginger Hultin** What is a pound of water? How much is that?

[00:19:24] **Dr. Michael Ormsbee** Yeah, so we'll replace with 16 ounces of fluid, and that'll get us back pretty close. I guess we should probably talk about over-hydration because there are times when you can drink way too much water and that can be a really big problem. And actually in people who are physically active, we see cases of this which is called exercise-induced hyponatremia where you have very low sodium because you drink so much water without the addition of salt to it. And that can be a problem. So you do need to be careful not to drink too much water, but that's not usually what we're seeing.

[00:19:57] **Dr. Ginger Hultin** I'm glad you bring that up. I just feel like there's some of these little sayings out there. My clients come to me and they're like, well, I know I should be drinking a gallon of water a day. And I'm always like, is that true? What thought process goes into that? What does that mean for you, your fitness, where you live, your body size? There's not just one suggestion that's right for every person.

[00:20:18] **Dr. Michael Ormsbee** Yeah. And I'll tell you, one of the big things people miss in this is, is how many fruits and veggies are you eating because there's so much water in some of them that you're getting a lot of water through your food choices. But if you're somebody who doesn't eat any of that or very little, now you're in a deeper hole.

[00:20:35] **Dr. Ginger Hultin** Yeah, it's a great point. To continue the conversation about rest and recovery and sleep, this is another area that I know there's a lot of research and I see people really struggle. How important is sleep when it comes to recovery and how do you manage this?

[00:20:50] **Dr. Michael Ormsbee** It's absolutely critical. You've got to take care of your sleep. And I think we've been in this overstimulated, underslept environment where people brag about working late night and pulling all nighters. And I'm supposed to be impressed by it. That doesn't impress me. What I want to know is how you can get your work done while you're awake. Be efficient. And honestly, I struggled with a massive bout of insomnia not too many years ago and had to really work through some problems. And it just got me hyper-focused. We were already studying it in the lab in terms of outcomes from how food impacts sleep, but we ended up looking at different strategies like structuring your environment and how we do other things with light and exercise and things to impact our total sleep. But it is certainly critical to recovery processes. So much of that happens while we're asleep, not only cognitively, but also in our muscles and as we regenerate and growth hormone spurts and all that.

[00:21:44] **Dr. Ginger Hultin** Yeah, I do think it's something I talk a lot about with my patients, and it just doesn't get the attention always that it should and people think they can skate by, but then they're not getting the rest and recovery that they need.

[00:21:55] **Dr. Michael Ormsbee** There was a military study a few years back, and they looked at pilots and they asked every single pilot how much sleep they need to fully function. And every one of them said they were the type of person who could only get four or five hours and be totally fine. No problems at all. Then they actually measured it and looked at their responses. And there was one odd human that could handle that with no problem. Every single other person was still at a detriment, even though they thought they were not. And so there are certainly people who can maybe handle a little bit less than others, but by and large people need their sleep and we have to prioritize it, not as a secondary factor, but as a primary thing that they're focused on for this recovery, not only for their recovery from workouts, but for their day to day, to perform at work, to be an elite human, you have to sleep and make it a priority.

[00:22:41] **Dr. Ginger Hultin** I love it. I love that quote. To be an elite human, we all want that. One thing that you talk a lot about that I'm particularly interested in is this timing and pre-sleep eating. Can you talk a little bit more about how you approach that?

[00:22:56] **Dr. Michael Ormsbee** Yeah. So we got very much interested in timing of food before bed. And so when I was just starting my research career at FSU, I would always eat at night. I never thought anything about it, but I was making choices that were typically a protein dominant food or food choice, or even just a protein shake. And I would have that all the time. I never though about it. And then there was a show at the time called The Biggest Loser on TV, which would have all of these trainers saying, stop eating, don't eat after six, don't eat after seven. And even today, you'll see many of the podcasts, guests and hosts saying, don't eat three hours before bed. It will completely wreck you. Blah, blah, blah. And I see that all the time. And I'm always the one in there commenting nuance, please. We have to understand what the person's after. What are they eating? How big a meal is it? What is it made up of? Did they just finish a game? If you look around a professional sport, everything takes place at night. Everything. Many people work out after work. And so if you've depleted yourself from a workout and it just happens to be the nighttime, you better have something to come back so you can go again and be recovering and then go again tomorrow. And so our perspective started early days. Well, let's feed things that we see people eating. And I was pulling off of what I had known from the bodybuilding community and the people who lift weights all the time where they would purposely wake up and have a protein shake. If they woke up to use the restroom, they just have a shake sitting there. They just down the shake and go back to bed. People still do that. And we'd put together a series of studies detailing what specifically 30 to 40 grams of protein would do for recovery, would do for performance. And ultimately we started looking specifically at sleep and what is it doing to sleep? And so that's where we've come over the last 17 years.

[00:24:42] **Dr. Ginger Hultin** That's really cool. I hope that this alleviates some anxiety for anyone listening that's, I could only work out after my kids go to bed at nine, but then everyone says not to do that. And then I can't eat and it's this barrier when actually maybe that's the most realistic thing for you, and you still need to fuel your fitness.

[00:24:57] **Dr. Michael Ormsbee** So time of day of workout is that's so hard getting your kids to bed and going to work out like that's a hero that can still pull that off. So kudos to those people going to do that. If that is your scenario and that's the only time you can do it, then that's only time you can do it. You

have to make it work for you. There is evidence that exercising real close to bed makes it harder to fall asleep because you're just jacked up from the workout. You need time to cool back down. So that sort of out of the picture, let's look at food. You need to recover. All of our data show no interruption with sleep. They show an improvement or no change in recovery, one or the other. Nothing is showing a negative. And we look specifically at fat metabolism. So we are able to put microdialysis probes directly into your belly fat. And when we put those probes in, we can see the fat liberated from your fat cell in real time. And we didn't see any difference in any of our studies so far, looking at this, when people take a pre-sleep protein or not. And so for us, that shows protein and small calories. We're not talking a huge meal, it's like 150 calories. That scenario does not change lipolysis or fat oxidation when we measure the breath samples in men or women that we've tested so far.

[00:26:09] **Dr. Ginger Hultin** That's so interesting. I hope that really puts people's minds at ease. I do a lot of work on eating timing because I think one thing people do poorly is intermittent fast all day or forget to eat, bottom load their day and eat a lot of calories or ultra processed foods late at night. That is not what we're talking about here. We're talking about something more targeted, protein forward, light on calories. It's kind of a different scenario.

[00:26:34] **Dr. Michael Ormsbee** For sure. In that scenario, there are lots of great data that you shouldn't eat a large mixed meal before bed. Just a couple of weeks ago, there was a paper that was showing in sedentary people who were not exercising, not a fitness lifestyle. Those individuals, if they did not eat three hours before bed, had better outcomes in terms of some cardiovascular variables and some blood pressure and these other things. And some of that may be related to a large meal changing our sympathetic parasympathetic drive at that time. There's not a lot of great data there. A lot of that is speculation. I'm told from friends in this field that some of that data will be coming soon. However, we're not talking about that in a protein, a small protein dominant meal. So far that's been protein shakes. We've also tested cottage cheese. I would speculate, this is just my speculation, but things like eggs or Greek yogurt would also be in this space of low calorie, high protein. Here's a great one. In 2004, there was a study by Waller's group, and they looked at cereal, it was milk and cereal. And so everybody had dinner and then one group was told they'd be allowed to have this snack later at night. And so when they did this over time, those who were compliant, if they were told they could eat again later at night, they had less at their dinner meal. But if they were not allowed to eat later, they actually would go back for more servings at the dinner meal, and the totality of that meant that they actually ate more when they were not allowed to eat before bed. If you simply know you have an option for later, you may not double and triple down on what you're doing at the dinner portion.

[00:28:10] **Dr. Ginger Hultin** There's always this mental emotional aspect in nutrition, and that's really important to acknowledge. We've covered a lot today. For anyone that's listening, that's whoa, I have so many ideas, but I'm not sure where to start and I feel overwhelmed. What advice would you give?

[00:28:24] **Dr. Michael Ormsbee** Of anything that you've listened to, I had to grab onto one of the concepts and just implement that one. So for example, maybe what you grasp from this whole thing was you should anchor your plate with protein. That's a great anchor. So just every time you eat, just make sure you have a protein source in there. And then as we get older, that actually should probably be a little bit of a greater portion of protein. But if you can anchor your place at a protein, that's a good takeaway. Maybe that's too hard for you at this moment in your life, totally fine. Try the water. Just have a glass of water when you wake up and do that for three weeks straight. And if you can get that done, you'd be like, that was so easy. It's totally doable. Not a problem. And this is how we usually ask people the question, on a scale of one to 10, how likely is it you can have a glass of water every single day? And you might be like six. And I'd say, okay, not good enough. I won't take it until it's a nine or a 10. On a scale of 1 to 10, how likely is that you can have a glass or water upon waking three days a week? And you say 10, I can definitely do three days. All right, do that. And then maybe the next step is just four days a week. And so you just do what's the minimal barrier, maximum benefit. Start there.

[00:29:29] **Dr. Ginger Hultin** I find your advice very realistic and something that people can chip away at with big gains if they do small things. The work you do is so interesting. I'd love to hear a little bit more as we wrap up about your programs and your institute for folks that might want to learn more about what you do.

[00:29:46] **Dr. Michael Ormsbee** Yeah. So I'm at the FSU Institute of Sports Sciences and Medicine. We're a research Institute primarily. We also serve the community and people from all over that come in for testing. So all of our research grade equipment is available to the public, and people can book to come in and do VO2 max testing, lactate threshold testing, resting metabolic rate testing, potentially work with one of the dieticians, potentially get training in our muscle lab that's right attached to us. So many different services that folks will want to use. We even have an anti-gravity treadmill. Some people like to come and run on. So there's lots of things that the community can get testing for and working with experts that are here training to be experts or PhD students. There are postdoctoral fellows. There's professional staff that are all here trained in this space. And it's really good community. And the easiest way to find that is just to Google FSU ISS. And then to see what we're up to, the best

places for that are probably on one of the social media outlets, and they can either just go to Mike Ormsbee, I post everything that we're up to, or our institute is at FSU ISSM, and people can catch on there and see what we're to and have fun watching.

[00:30:53] **Dr. Ginger Hultin** I have enjoyed following you quite a bit on social and will put all of those links in the show notes. And when I come to Florida, I'm going to come on down and check this out.

[00:31:01] **Dr. Michael Ormsbee** Perfect, let's set it up. Yay.

[00:31:03] **Dr. Ginger Hultin** Well, Mike, thanks for all your expertise today. I learned so much. In this conversation, we touched on a topic that I think needs its own deeper dive and that's where we're headed next. In our next episode, we're going to explore one of the hottest topics in nutrition right now, protein. And I'm excited because this is an area that you've researched very deeply. So everyone follow along and be sure to join us for the next episode. What a conversation with Dr. Ormsbee. I keep coming back to this, recovery isn't something that just happens to you. It's something you have to choose intentionally. If intensity is what you're about and you have a big race or a big training block coming up, you know what to do. Don't fear carbs and don't fear food volume. Make sure you're eating enough, especially of foods packed with nutrients. Anchored around protein on your plate. But maybe your goal looks different right now. Maybe you're feeling the effects of not drinking enough water throughout the day. And for you, that glass of water first thing in the morning is going to be your best, most underrated friend. Regardless of where you are in your fitness journey, sleep is totally non-negotiable. So on that note, my official recommendation to you after this episode is get to bed just a little earlier tonight. Thank you so much for spending this time with us. And as we teased, in two weeks, it's protein time. I hope you'll join us because I am ready to ask every question I know you've had on your mind. Until then, rest well, recover intentionally, and you'll come back stronger.

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