

PLAYBOY INTERVIEW: SANJAY GUPTA

A candid conversation with TV's most respected doctor about staying healthy, avoiding bogus medical advice and the upside to marijuana

Yes, there is a doctor in the house. Whether it's mass injuries in an earthquake, a celebrity cancer scare or the war on obesity, Dr. Sanjay Gupta is the source millions rely on for health information. CNN's chief medical correspondent zips from war zones to virus hot zones and somehow finds time to practice brain surgery three days a week. When, say, a measles outbreak or a congressional health care hearing makes headlines at CNN headquarters in Atlanta, the multi-E Emmy-winning newsman barely has time to pee before Wolf Blitzer once again barks out, "Doctor, tell us the latest."

Born and raised outside Detroit, where his immigrant Indian parents worked as engineers for Ford Motor Company, Gupta has always been a go-to sort of guy. He spent weekends as a kid reading in the library, got accepted into a medical school program at the age of 16, began practicing neurosurgery in his early 20s and was writing speeches in the Clinton White House before the age of 30. When he landed a job on the medical staff at Emory University in Atlanta in 2001, he figured he'd hatch plan B as a TV talking head. He now juggles time in the OR with his CNN gig and as a special correspondent for CBS News, where he occasionally

appears on 60 Minutes. Since that pace is too breezy, Gupta writes novels, competes in triathlons (before his first race, at the age of 40, he taught himself to swim by watching YouTube videos) and spends quality time with his wife and three young daughters.

Contributing writer David Hochman, who last interviewed Bill Maher, met with Gupta during a week when Ebola was back in the news. "I was astonished that Sanjay never lost his focus or his cool even as the pressures mounted to find quick answers about the virus," Hochman says. "People were panicking, but the doctor, operating on virtually no sleep, remained the picture of intelligent reassurance."

PLAYBOY: Which is tougher, brain surgery or the news business?

GUPTA: It's funny. When I did my residency in neurosurgery, I couldn't imagine anything more demanding or physically exhausting. But now I have weeks at CNN when I'll go five days on three-and-a-half hours of sleep a night if there's breaking health news. They're both extremely busy, intense jobs. Some weeks I practically live in the newsroom, and I still see patients and do surgery on

Mondays, many Fridays and often on Thursdays too. But I like the balance. My job at the hospital gives meaning to my job on TV and vice versa. They're similar challenges in many ways. They both have the element of surprise. You need to stay sharp and on your game, on top of the latest information, and both get your adrenaline going in a serious way.

PLAYBOY: Health news has become a media circus all its own in recent years. Scary viruses, various doping scandals, debates on vaccinations, autism, genetics research, assisted suicide. What happened to "Take two aspirin and call me in the morning"?

GUPTA: It's why I got into the news business, actually—to help people make sense of the immense amount of information out there. I don't think more is happening on the health front. I think people are just more tuned in to these issues. But it doesn't have to be overwhelming. You end up choosing what's important to you. If you're not dealing with, say, Alzheimer's in your family, you switch the channel if I'm talking about it. But if you *are* dealing with Alzheimer's, it could be the most important five minutes



"News gets out and it's not easy for people who aren't scientists to parse the information in a meaningful way. That's my main responsibility as a journalist. I'm a consumer of this content too, so I want to know what's true."



"I like and respect Dr. Oz. He clearly over-extended his language, and I think he would tell you that. I understand the predicament. You have to engage the viewer. But I don't think he's irresponsible."



PHOTOGRAPHY BY MARIUS BUGGE

"There's a funny thing about doping in the NFL. I don't think we're missing it; I think we've just become complacent. There's no way these guys can be that gigantic. Clearly there's doping going on in the NFL."

of information you get all day, all month or all year. The question is how to make it broadly relevant to people.

PLAYBOY: When a health crisis—let's take Ebola—becomes news, do you worry about crossing the line to fearmongering?

GUPTA: That's a fair question. I think it's a tough balance to strike. Remember avian flu? It killed 70 percent of the people who got it in Southeast Asia. As with Ebola, we worried that people would get on planes and bring that flu virus back to the United States. There was no reason to believe it wouldn't be as lethal here as it was in Asia. People were worried, so we reported on it. It didn't come to the States and spread. Did that mean it never would? It's a hard call. We'll always be judged by what ultimately happens. If avian flu ended up being bigger than anybody thought, people would say, "Why didn't you tell us more about this?"

I've been working in news for 13 years, and if I've learned anything it's that you can't dismiss people's fears. If all that people know about a disease like Ebola is what they've seen in *The Hot Zone* or *Outbreak*, you can understand the interest. It's new and it's scary. I'm conflicted about whether we give these scares too much attention. On the other hand, people don't watch CNN all day long. I think it's at most 15 minutes every few days for the average viewer. Part of the reason we cover stories over and over again is because it's unlikely that someone watching today at noon will be watching at eight o'clock and again at midnight. If nothing new is happening, we'll taper off the coverage.

PLAYBOY: A lot of health news is based on weak science, if not completely bogus data, even when published by reliable sources such as *The New York Times*, *Time* magazine and CNN. How can we as consumers tell good from bad?

GUPTA: News gets out and it's not easy for people who aren't scientists to parse the information in a meaningful way. That's my main responsibility as a journalist. What I do comes from a purely selfish perspective. I'm a consumer of this content too, so I want to know what's true, what's sensationalistic and what's ultimately going to help me. At CNN we have the luxury of being an international news organization. Reporting facts is our primary driver. Whether it's some new study or the latest headline about MERS or cholesterol, I can turn to our researchers, fact-checkers, et cetera, to know we're dealing with sound information.

The biggest sin isn't right or wrong, it's the quality of the data. When you look at sources, if someone has an agenda, that's a red flag. A study funded by a pharmaceutical company should raise suspicions. It's also up to the consumer to be diligent and smart. A headline or 50-word online article doesn't give you a

full picture. Good information requires a little more digging. Which populations benefit most? Are there generic factors that matter? What's the metadata over the long term on this study? Like everything else, it's ultimately up to you to make smart decisions about your health and health care.

PLAYBOY: Margarine used to be healthy; now it's poison. Green tea extends life; green tea has no effect on life span. Sleep too little, you die younger; sleep too much, you die younger. As someone who's reporting on all this, why should you be trusted?

GUPTA: It's one of the more challenging parts of my job. We've tried not to get into the habit of reporting every study that comes out. A big part of the problem is that people want shortcuts to health. You eat açai berries and you're going to lose weight? Sounds great. But there are no cure-alls. We go through these trend cycles: Everybody's eating grapefruit or drinking coconut water or taking some

We're one of the fattest countries on the planet. People just say, "I'll get liposuction."

wonder supplement. But you can't jump on every trend and expect it to make you healthier. Every human is different, and much depends on family history, age, lifestyle. We all agree on certain things: not overeating, getting some exercise every day, staying away from fried foods, not smoking.

PLAYBOY: You walk into a hospital and see two office doors. One says Dr. Oz, the other Dr. Drew. Which do you open first?

GUPTA: It depends on what you're looking for. Dr. Drew is a psychiatrist and treats chemical dependence, so if I had a problem with addiction, I'd see him first. Dr. Oz is a great surgeon, very well regarded among cardiologists and also a friend.

PLAYBOY: He got in trouble for touting miracle diet cures. Did that surprise you?

GUPTA: I like him and respect him. He clearly overextended his language, and I think he would tell you that if he were standing here now. The fact of the matter is that he has a show to do every day. I understand the predicament. We al-

ways have a ton of news to report, but you have to come up with a show every day that may not be based on the news. That's challenging. Also, to get people to watch you, you have to engage the viewer. He explained himself by calling it flowery language. That's a subjective thing. It might have gone over the line, but I don't think he's irresponsible. Ninety-nine percent of his messages are completely accurate and really important. The more people hear information about our bodies, our diet, our fitness, the healthier we become.

PLAYBOY: What's your biggest concern about the health of America right now?

GUPTA: I think it's sugar. The thing about sugar is that it's insidious. We get it in our sodas, our juices, our cereals and candy, of course, but it's also in our sauces, breads, yogurts. Even if something's not sweet there's often a ton of sugar added to make it moist. As human beings, we used to have to work for our sugar. You got it once a year after harvest when fruit fell from the trees. You could eat as many apples as you wanted. Even honey was protected by the bees. But now we eat as much as 130 pounds of it a year. And that's killing us.

PLAYBOY: Should we treat sugar the way we treat tobacco?

GUPTA: I think people just need to be more aware. Obesity and obesity-related diseases are the biggest health issues in the United States, and that means diabetes, heart disease, stroke, certain cancers, those types of things. It's a result of what the American diet has become. Chicken wings, sodas, ketchup, energy drinks—they all have a ton of sugar. But it's hard to change behavior, particularly when it comes to eating. Also, we're victims of our own success. We've become a society where we can take pills for high cholesterol. We can have operations for clogged arteries and operations to remove huge amounts of fat. Philosophically, you could say, "I'm just going to enjoy my life. I'll eat what I want to eat, and if I get in trouble, medicine can take care of me."

We used to be a country other countries looked to as an example of health. Americans were fit. People wanted to be fit like us. Now we're one of the fattest countries on the planet. Instead of making people motivated to get in shape, people just say, "Oh, I'll get liposuction or gastric bypass surgery and keep eating what I want." It has become the American way.

PLAYBOY: How does our health care stack up against health care in places like Norway, the U.K. and Australia? Are they beating us?

GUPTA: In some ways, definitely. We're dealing with a much larger population, of course, but we spend too much and get too little in return. We don't have as much to show for it in terms of the things that matter to people: life

expectancy, quality of life, overall outcomes. Even for very basic things like prenatal deaths the numbers aren't great. We need to do better.

PLAYBOY: What's your assessment of Obamacare so far?

GUPTA: Fundamentally, the Affordable Care Act is a good thing, but it has problems. The rollout was terrible. Kathleen Sebelius did one interview after the rollout, and that was with me. She didn't come off looking so good. There was this sense that having cleared all the hurdles of Congress and the Supreme Court, they could relax. Not very impressive. I also think the numbers of people being helped by this could have been higher had more states agreed to expand Medicare coverage under the act. But they said no thanks, and that left around 30 million people without benefits. Overall, it's great that more people are insured, but even that doesn't create a healthier America. Access to health care doesn't solve the problem. We all know people with terrific health insurance who are still wildly unhealthy. You almost need to take a beat and ask what the real goal is. Is this an equality issue? Is this a health issue? These are questions the government could have asked more forcefully.

PLAYBOY: You turned down President Obama's offer in 2009 to become surgeon general. Do you feel you've had more influence as a media person than you would have had in that position?

GUPTA: Aside from a few cases, such as C. Everett Koop, the surgeon general hasn't been highly influential. I was looking to take the job at first, but I knew the Senate confirmation hearing and the vetting would be laborious for me and my family. My father worked in the automotive industry for 30 years and has retirement investments that he would have had to divest himself of if there were any related to health care. The bigger issue was that I wouldn't be able to practice surgery anymore, and I love being a surgeon.

PLAYBOY: Wait—the surgeon general can't be a surgeon?

GUPTA: It's the great irony of the job. You can practice afterward, but you need to be surgeon general full-time while you're in the position. The problem is that if you leave surgery for four or eight years, you have to retrain. For neurosurgery it's a seven-year training program. To not be able to practice medicine for essentially a decade seemed a very big deal. I was only 39 at the time. The surgeon generals have mostly been a lot older and retired.

PLAYBOY: It seems you've always been an early achiever and an overachiever. Did you sell a million dollars' worth of lemonade on the corner as a kid?

GUPTA: It's funny. I did the Junior Achievement thing when I was young and was named outstanding business-

man of the year. I sold greeting cards that you could personalize. I got a ton of orders. This was pre-internet, pre-everything, but it was actually a real business. I was 12 or 13 years old, and at that time I thought it was going to be my career.

PLAYBOY: You went to college at the age of 16 and graduated from medical school at 23. When did you sow your wild oats?

GUPTA: You know, I missed out on many things in life—the sowing-the-wild-oats period being one of them. I think there's real value to it; it just wasn't in the cards for me. And it wasn't just about getting into medical school. After that, I went straight into a seven-year residency, then into a faculty position and ultimately into this dual life I have now. There's been no rest. I've had no rest for 30 years. I'm 45. For 29 years it's been nonstop. Partying and carousing were never my strong suit.

PLAYBOY: Were you surprised by the reaction you got when you came out in

I saw how useful marijuana is and also that it doesn't have a high potential for abuse.

favor of medical marijuana? One late-night talk show host started calling you Ganjay Gupta.

GUPTA: A little surprised, yes. I was concerned years ago about the potential for substance abuse with legalized marijuana. But I hadn't really dug into the research on the benefits of this plant. When I did, I saw how useful it is for many patients and also that it doesn't have a high potential for abuse. Nobody overdoses on weed. I've spoken to hundreds of people—patients, scientists, researchers—who have used it to calm down epilepsy, to ease symptoms of multiple sclerosis, to help with pain. We need to start thinking about marijuana as medicine. It has been used as medicine for thousands of years. While I think developing brains are susceptible to certain harmful effects and would never advocate marijuana use for young people, I think time will show that cannabis can help adult patients with symptoms when nothing else can. It can be

useful when everything else has been tried and hasn't worked. Look around the world. Israel has done some incredible research in this area. We visited and talked with scientists like Dr. Raphael Mechoulam about marijuana's anticancer effects and the benefits for those suffering from PTSD. I think it should be a legalized medication in this country.

PLAYBOY: What's your personal history with weed?

GUPTA: I tried pot. I didn't really like it. It wasn't medicinal quality. Someone offered it to me, and it definitely had an effect. Mostly it made me anxious, and I didn't like that feeling. I'm an in-control sort of guy, so I honestly wouldn't do it again.

PLAYBOY: Let's talk about sexual health. Can a person masturbate too much?

GUPTA: [Laughs] I've heard the expression "Everything in moderation except masturbation." I don't think you can overdo it. But it raises a point: We don't talk enough about sexual health in this country. It's probably one of the most important areas people can talk to their doctors about, and they don't. STDs are an issue, for instance, because people don't like to talk about them, or think about them.

PLAYBOY: Since 2005 the number of syphilis cases has doubled, with men accounting for 91 percent of those cases.

GUPTA: And many are older men. We did a story on retirement homes where older guys who are newly widowed or divorced are out there again and not thinking about protection. The discussions regarding safe sex were more for my generation than my parents', so it's probably time for some public awareness.

PLAYBOY: Okay, moving on up: Is it true we use only 10 percent of our brains?

GUPTA: We use almost all of our brain but not at the same time. I'm not sure where that 10 percent thing even comes from. It may be from a really bad Cheech and Chong movie. I like to think of the brain as major cities spread out in different locations, and the brain is made up mostly of highways that connect those cities. The highways don't always have stuff on them. There's a traffic jam on one highway and no traffic on another. I think that's where the myth that we're not using all our brain comes from. But we need all the parts, and you're able to call on them at any given time.

PLAYBOY: Researchers last year replicated Alzheimer's cells in a petri dish, which some say is a key to finding a cure to brain illnesses. How close are we to ending diseases such as Alzheimer's, Parkinson's and ALS?

GUPTA: Well, they're all neurodegenerative diseases, but they're different, so we're at different points. Parkinson's affects a very discrete, tiny area of the brain. We know there's not enough dopamine in that part of the brain. You could potentially, either through stem

cell injections or actual cell genesis, create new cells or inject cells that make dopamine and affect Parkinson's. Alzheimer's is different because plaques can be located in different parts of the brain. It's more global. Our best hope might be an Alzheimer's vaccine or something that creates a system in the body like immune cells that fight cancer. We're working on that. I think we could see something within our lifetime.

PLAYBOY: You're an avid football fan. What needs to be done in light of the NFL concussions scandal?

GUPTA: They're doing their best to rethink protocol. From a player perspective, the real problem starts long before the NFL. Sub-concussive injuries happen during practices and drills over and over again, even at the pee-wee level on into college and the pros. Shifting from a three-point stance, where the lineman leads with his head, to a two-point stance could make a big difference, even during drills and practice. But the most devastating damage comes from what's known as second-impact syndrome. Say someone has had a concussion, which is a true brain injury, and it's not taken seriously, and they go back into the game. If they get hit again, they could die. We've seen that happen. Too often coaches, trainers and medics just let it slide.

PLAYBOY: Speaking of letting it slide, is it safe to say the NFL gets a pass when it comes to steroid use, or are we just missing it the way we did with Lance Armstrong?

GUPTA: There's a funny thing about doping in the NFL. I don't think we're missing it; I think we've just become complacent. There's no way these guys can be that gigantic. Humans don't evolve that fast. If you look at pro football players from the 1970s and compare them with their counterparts today, you wouldn't recognize them. Football players from that time were sort of lean and trim, and today's players in those same positions are massive. Clearly there is doping going on in the NFL and perhaps the NBA and NHL too. But the whole sport of football is based on hitting people hard, so these guys make themselves huge.

PLAYBOY: Do you think steroid use explain the rise in violence in the NFL outside the game?

GUPTA: I think so. You can actually put steroids at the nexus of a few different things. First of all, I think they make the players bigger and stronger. Long-term steroid use has an impact on the body in terms of weakening heart muscle and stuff. You hear about retired NFL players developing diseases associated with steroid use at an early age. We know that as a result of being big and strong, you hit people harder, and we're seeing more devastating injuries. Thirdly, yes, they make you aggressive. It was so jarring to watch Ray Rice punch his fiancée in that elevator video. I'm not saying it was steroids,

but it would make sense if doping was behind the general rise in aggression in the sport. You can't just turn that stuff off when you get off the field.

PLAYBOY: Some say another kind of juicing is going on, and that's the rampant use of Adderall and Ritalin on campuses to stay competitive and improve test performance. What's your take on that?

GUPTA: It's a reality. Many students believe medications like those give them a cognitive advantage or cognitive enhancement right before a test. The truth is they might. A drug like Adderall does make people very focused, particularly people who are more easily distracted, even without a diagnosis of ADD or ADHD. I don't think it's a good long-term strategy, and those drugs are wildly overprescribed. With something like Ritalin we're not seeing the results parents, doctors and teachers thought they would see. If you look at the data on Adderall, for example, it has not been great when it comes to pursuing novel

I don't take supplements. It's very hard to put the good stuff from nature into pill form.

tasks or thinking creatively or being able to figure out complex problems. But for regurgitating things you've already studied, for focusing on details, it seems to have some benefit, which is why I think students are taking it.

PLAYBOY: Google co-founder Larry Page is spending a ton of money to find genes that predict certain diseases before they reveal themselves. There's even talk of sequencing genes to see if someone is prone to crime and violence. What are the ethical implications?

GUPTA: Well, again, it's happening, and it will happen more as the price of these genome-sequencing tests goes down. But the moral quandary is trickier. Let's say you find out you're predisposed for something like Huntington's disease, which has no cure. What is the ethical responsibility at that point? To inform? Not inform? People usually want to know only if it's something they can treat. These are real questions. We think about these in the abstract, but I've

known people in this situation, and it's life-altering. It completely changes everything about your life to have information that forecasts your future.

As for predicting who's a criminal and who's not, we don't yet have objective signs. We can speculate, but we're not there yet. What we are seeing is data on where something like OCD lives in the brain. There are neuroscientists who believe they know. And if they know, we could, for example, treat OCD surgically.

PLAYBOY: Wouldn't it be a more boring society if we took a scalpel to all our behavioral tics and foibles?

GUPTA: I think you're right. We could lose the heterogeneity and quirks that make the world interesting. Look, in many ways it could already be happening, because parents want to medicate so many things already and children start younger and younger. If a kid doesn't perform well in school for whatever reason, just give him a pill. I joke that the same qualities that drive you nuts as a parent might actually help a child find success later in life. The same level of diligence an annoying kid uses to get his way could be used later to pursue some wonderful scientific research that cures a disease.

PLAYBOY: Let's play a quick round of "good for you or bad for you." Energy drinks?

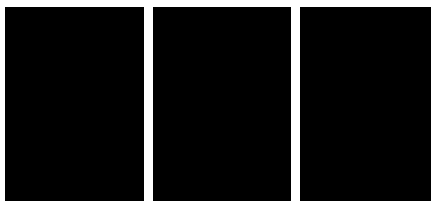
GUPTA: For an otherwise healthy person, not bad. We saw some reports of people dying after drinking them, but it turns out they probably had pre-existing heart problems. That doesn't excuse it. It was still devastating for the families. They didn't know that an energy drink would topple their children over the edge. But in moderation it's okay for most people.

PLAYBOY: Cleanses?

GUPTA: Save your money. Your healthy liver is exponentially a better cleanser than a cleanse.

PLAYBOY: Cell phone radiation?

GUPTA: I obviously use a cell phone. I have two of them. But I don't love putting one to my ear more than I need to. This is one of those things where sometimes there's a provocative discussion among the neuroscience community. Ionizing radiation is what everyone pays attention to. Microwaves, X-rays—we know those things are ionized cells and cause cancer. But the phone is releasing non-ionizing radiation. There's not as much evidence that non-ionizing radiation causes problems. But we never looked at it in the doses we're looking at now. People have these things planted to their ear all day. I think that could become a concern. Some of the international studies have found upticks in cancer among people who use cell phones the longest amounts of time. But correlation doesn't equal causation, and other factors may be in play. I personally use a wire earpiece when I'm on the phone. It keeps the radiation source away from my brain. And I don't keep it in my front *(continued on page 000)*



SANJAY GUPTA

Continued from page 66

pocket because that's where the bone marrow is, and I'd rather be safe.

PLAYBOY: What's your take on vaping?

GUPTA: The CDC has released a statement about it saying there are a lot of chemicals in the vapor that we simply haven't been able to define. That's scary. My feeling is, they're better than cigarettes and okay if you're using them for smoking cessation. But why are they marketed to people who don't smoke? There's clearly a mission to get young people and nonsmokers to use a product they weren't using, and that doesn't fit the core mission of e-cigarettes.

PLAYBOY: You appear to be in great shape. You run triathlons. You must take your vitamins.

GUPTA: I don't take supplements. Despite their best efforts, it's very hard to put the good stuff from nature into pill form. I do take 1,000 milligrams of fish oil twice a day. You see some conflicting studies, but the meta-research over the past 15 years or so is very compelling that it may reduce the risk of heart disease later on.

PLAYBOY: What's your workout regimen?

GUPTA: I run, bike or swim probably three or four days a week and for a good distance. I like to be efficient and I like to heart train. We know human beings tend to operate best at a lower heart rate than people typically do during an intense gym workout. A lower heart rate is ideal for fat burning and cardiac endurance. So I run longer distances at a slower speed in the beginning of my training sessions. Then I get faster and faster, but the heart rate stays the same. On off days, I'll use the pull-up bars in my office or my bands or do pushups. It's important to do something every day.

PLAYBOY: Have we gone too far in our obsession with extreme CrossFit training?

GUPTA: I think CrossFit is a great workout. You can build a lot of muscle strength, and that's important. Cross-fit focuses on strength, so if that's your goal, go for it. I'm much more interested in endurance. Early in our evolution, when we chased animals through the jungles to kill them, we didn't run faster than they did. We just ran longer than they did. The one who could chase the longest ate the best. That's how you got your meat. It fits into my interest in human optimization.

PLAYBOY: Human optimization?

GUPTA: Yes. If you optimized your health and your life, what would that look like? There are clearly people who function at a higher level in terms of their physical and mental wellbeing. There are societies that do that too. I find that idea fascinating.

How do you optimize people? How can you be as healthy as you possibly can?

PLAYBOY: Do you meditate?

GUPTA: I do, for 15 minutes a day. It's funny. I talked to Deepak Chopra. He actually came to my office once and taught me a bunch of techniques. It was quite useful. He's a fascinating guy. There are a lot of things he does in terms of bringing meditation to the masses that I find interesting and useful. I also spend a lot of time talking to Herbert Benson, who's a cardiologist out of Harvard and a true mind-body sort of scientist. What I do is a combination of their teachings. I have a hard time clearing my mind like Deepak says you must. I just can't do it. Instead, I find one thing to focus on. Usually it's a word, and through that word I channel everything I'm thinking. *Gentle* is a word that I use. It's very soothing.

PLAYBOY: You just told us your mantra.

GUPTA: Well, eventually you get rid of that word as well, and your mind is completely clear. But I also optimize my mind in other ways, by doing puzzles and challenging myself to do new things creatively.

PLAYBOY: You wrote a novel a couple of years ago that David Kelley adapted as a TV medical drama. When did you squeeze that in?

GUPTA: The novel took me 10 years to write. It was a totally different style of thinking to create characters and plot lines as opposed to having stuff handed to you the way it is in television news, or the type of physical work you do as a surgeon.

PLAYBOY: How much of your drive comes from being a first-generation American?

GUPTA: I think my parents lives as immigrants were very different from mine. I learned to appreciate the values they brought as I got older. But they were trailblazers themselves. Both worked as engineers. My mom was the first woman hired as an engineer at the Ford Motor Company, which is a point I'm very proud of in our family. We lived in a small town in rural Michigan, and there weren't many people like us.

PLAYBOY: Were you ever a victim of racism?

GUPTA: Yeah. Everybody was white except me; everybody was the same religion. There was no real diversity where I grew up. Once, we moved into a different house in our neighborhood and had given out the wrong forwarding address, but all our mail still arrived. One day I thanked the mailman for finding us, and he was like, "They could just write 'Gupta' and 'Michigan' and it would get to you." We stood out. I would often get digs about our family, our culture, our food. One time in college at a Michigan-Iowa game, these guys from Iowa used some really bad language and threatened an Indian friend and myself with physical violence. I was upset, mostly because I didn't do anything about it. It's funny, though. I remember watching the presidential election returns in 2008, and when Obama won, I called my friend and said, "A black man just won Iowa. What do you think those guys are doing now?"

PLAYBOY: You worked as a White House fellow in the office of First Lady Hillary

Clinton. Does that tell us everything we need to know about your politics?

GUPTA: I'm a pretty liberal guy. Being journalists, we work our whole careers predicated on freedom of speech. I value humanitarian causes that are liberal, so I probably lean more liberal, though not as liberal as all my colleagues within CNN.

PLAYBOY: What kind of president would Hillary be?

GUPTA: She was a really good boss. I ended up writing a lot of speeches, so I spent a significant amount of time briefing her and collaborating. She's very knowledgeable. You don't want to walk into a room with Hillary Clinton without knowing every detail about what you're discussing. She'll call you on it. That was good for me and it fit my personality. I think we got along pretty well.

As far as being president, that's a good question. I'm a little biased because I know health care is an important issue to her. She certainly has a better pedigree than she had as first lady. She's been a senator, she's been secretary of state. She has good relationships with world leaders. But it raises the question of what makes a good president. Being very smart is important, and she is, but some of the best presidents weren't necessarily the smartest people in their class. You have to be very strategic, and I think she is. You have to have clear positions on issues like ISIS, which she's very engaged with. I think the least important factor is that she's a woman. She downplays that and even said to me that there are countries with women in power that also have a strong history of oppression against women—Benazir Bhutto in Pakistan, Indira Gandhi in India. The fact that Hillary's a woman shouldn't make a difference.

PLAYBOY: From a health standpoint, is she too old?

GUPTA: No. I was recently at the Clinton Global Initiative and spent a fair amount of time with her. She's sharp. She has good energy. I think if anything she's sharper now than she was back in the 1990s.

PLAYBOY: According to the Congressional Budget Office, annual Medicare costs will reach more than \$1 trillion by 2022. Is that sustainable?

GUPTA: I think there's enough support from both Democrats and Republicans to sustain Medicare for at least the foreseeable future. Almost since its inception it has been in financial trouble. It got even worse as the cost of prescription drugs became as big a line item as it has.

PLAYBOY: Do you think drug companies exert too much influence over doctors?

GUPTA: That's a difficult question. Big pharma clearly has an impact. These companies go into doctors' offices directly and you hear about pretty astonishing kickbacks. We saw former Virginia governor Bob McDonnell convicted on corruption charges last year. A pharmaceutical company took his wife on shopping sprees and paid for his daughter's wedding in exchange for getting the governor to push some new drugs. You'd have to assume that many doctors, whether it's in

their prescribing habits or treating habits, are influenced like that. Some doctors live pretty lavish lifestyles.

PLAYBOY: At the same time, you hear about doctors doing more work for less pay as insurance companies attempt to lower premiums.

GUPTA: I think that's true. Doctors get paid in different ways than they used to, and that may not be a bad thing. I mean, focusing more on outcomes and value as opposed to just procedures or number of times you see a patient makes sense. It's part of the Affordable Care Act: rewarding outcomes, not just numbers of procedures. I think fundamentally that could get us to a good place in our country, but the transition is always a bit challenging.

PLAYBOY: Let's switch gears. Tell us one thing people don't know about Wolf Blitzer.

GUPTA: He's a really good dancer. He actually does this routine off camera, I think it's called the Dougie Doug.

PLAYBOY: It's called the Dougie.

GUPTA: That one, yeah. He'll do it right when we cut to a commercial after saying, "Stand by for breaking news." I always think that's a funny phrase. Stand by for breaking news. It's really urgent, but we're going to make you wait anyway.

PLAYBOY: Do you remember the first time you did a TV report?

GUPTA: Absolutely. It was here at CNN. A study had come out looking at the impact of Agent Orange on increasing cancer rates among Vietnam veterans. It was a pretty big story because the Vietnam vets were probably all exposed to this chemical at some point. The government at the time had still not conceded that Agent Orange was the cause of illness among these veterans. Billions, if not trillions, of dollars have now been spent on benefits for these veterans who developed cancer. This was April 2001. Not long after that, 9/11 happened.

PLAYBOY: You went to Afghanistan and later to Iraq. What was the moment like when you improvised with a Black & Decker drill to perform brain surgery on a wounded soldier in the heat of the Iraq war?

GUPTA: Some moments get seared forever in your memory. There were sandstorms that day. I had been embedded for a few weeks with this group of naval doctors called the Devil Docs, a group supporting the First Marine Expeditionary Force. You get to know each other really well when you're hopscotching around the desert, responding to whatever calls come in. In a sandstorm things come to a stop because you have no air support. We were outside Camp Viper, south of Baghdad, when one of the lieutenants asked if I would stop being a journalist and take a look at a patient.

His name was Jesus Vidana. He had been on patrol somewhere nearby and had taken his helmet off for some reason. He got shot by a sniper in the back of the head and was declared dead in the field. But then someone found a pulse, and that's when they came and asked if I'd put on my surgeon's cap. He had a significant injury to his head and had too much pressure on the brain from the bullet. The blood was pressing on his brainstem. We needed to

take a bone out of his head or he'd die. We didn't have the right tools, but I remembered seeing a Black & Decker drill with all the bits. We had sterilizing solution, but I needed to create a sterile barrier because it was really dusty inside the tent and I literally had to have the guy's brain exposed. I filleted a plastic IV bag and essentially used that to create the outer layer of his brain. I drilled the hole, extracted the bone, relieved the pressure, and it worked. We wrapped him up and put him on a Black Hawk.

PLAYBOY: Did you ever hear from him?

GUPTA: I did. He did really well. But it was a wild time. I operated a few times like that out in the field. People know I'm a doctor from TV, so I get asked, and I'm happy to oblige.

PLAYBOY: People must ask you for free medical advice constantly.

GUPTA: All the time. Airports are notorious. People have time on their hands. They think they know me because I'm the guy from TV. They forget I don't know them. Soon enough they're pulling up their shirts to show me something or asking me to second-guess their doctor. The worst is when you're stuck on a long red-eye, you want to get some sleep, and the guy next to you is like, "Oh, I am so glad you're here," and pulls out all his charts and medical history. "Oh, and when you're done reading that, my aunt Louise behind me has a couple of questions."

PLAYBOY: Does your family find this annoying?

GUPTA: My wife is great. We were at a restaurant, just the two of us, which doesn't happen very often. Somebody came up and said, "Hey, I'm really sorry to bother you, but I have this pain in my back and it's going down to the lateral part of my foot. It's been there for some time." My wife goes, "It's an L5-S1 disc that's herniating and pushing on your right nerve route. You should probably get an MRI."

PLAYBOY: She's a doctor too?

GUPTA: No, she's a lawyer! But after 14 years with me, she hears me on calls in the middle of the night; she hears me on TV. I think she's learned a lot through osmosis.

PLAYBOY: Is it hard for you to turn the world off?

GUPTA: I could be better about that. You try to keep a clear separation. I want to turn off my phone when I'm at home. My family is good. They're understanding.

I've thought a lot about the whole idea of work-life balance in our culture. Much of it revolves around guilt. For people who are constantly forced to make choices between spending time with their family and their kids or getting ahead at their jobs, it can lead to resentment on both sides. What we've come to value in the workplace has been eating lunch at your desk, or at the studio in my case. Spending time with your family, doing things that truly bring you joy and give your life more meaning tend to get minimized. I think we can create a more productive workforce through measures that may surprise people, that may be counterintuitive.

PLAYBOY: Like working from home?

GUPTA: Working from home, leaving the office earlier. A lot of it has to do with breaking down the walls between work and life. Let your family in on your work life. Include them in the things you're doing so they can be invested as well. At the same time, share your family life with your work people, not keeping such a clear distinction.

PLAYBOY: You're remarkably sane. Do you have any vices or eccentricities?

GUPTA: Let's see. I never kill bugs. I don't drink hot beverages—you have to sip them, and the whole thing takes too long. I sometimes do chin-ups when I talk on the phone. And I play the accordion. I took 10 years of lessons.

PLAYBOY: No doubt there will be a chart-topping album and world tour in your future.

GUPTA: I don't know about that. Maybe if Mumford & Sons are reading this....

PLAYBOY: Who would appear on the cover of your Hottest News Anchors calendar?

GUPTA: Oh my God, that's like asking to guess the weight of a woman. Nothing good can come from this. Do I have to answer that? Is that the last question?

PLAYBOY: It depends what the answer is.

GUPTA: I'll have to pass. I'm a busy guy, but I like going home at the end of the day, and I don't want my wife locking me out. I can just imagine the headlines.

