Introduction to Autoimmunity and Hormones

Hi, ladies. Welcome back to Mastering the Menopause Transitions Summit. I am your host, doctor Sharon Stills. It's great to have you all here. This has just been so much information, so many options, so many different paths and things for you to think about to help you in your hormonal journey.

And today, like always, we are going to have a really important conversation because we haven't talked about autoimmunity yet and autoimmune disease is rampant and could be affecting you.

You may already have been diagnosed with a autoimmune disease, or maybe you know someone who was. And today we're going to tie it all together with Doctor Tiffany Kaplan, who is my guest.

And we're going to talk about the connection between hormones and autoimmune disease and why are women so prevalent in getting diagnosed with autoimmune disease and what you can do about it?

So Doctor Tiffany Kaplan is here with me today, is a chiropractic physician and a functional medicine practitioner with a passion for helping people better understand and address complex chronic health conditions.

Her passion for functional medicine stems from her own personal health journey. She started out as a patient of a functional medicine doctor while she was in graduate school, and she was then introduced into the world of autoimmunity, seeing many family members suffer from conditions such as Hashimoto's and lupus.

M. S., Crohn's, fibromyalgia and she saw the need to educate people with autoimmune conditions on ways they can reclaim their health. She's a bestselling author, and she is generously here with us today to share her knowledge.

And I'm going to ask her about her story because I'm intrigued. So welcome, welcome to the summit. And thanks for being here. Thank you so much for having me.

A very important topic. And, yeah, lots of lots to talk about. So I'm excited. Thank you. Yeah. So I usually start by asking, what is your story and your journey.

How did you end up here. And it sounds like you have a, a very profound one. So I'd love, if you're willing to share it with the listeners. Yeah, I so I started out as a patient and I started to notice I was having, problems with my own health, with brain fog and anxiety and depression was becoming severely depressed.

My schoolwork was suffering. I was like, this is not me, what is going on? And of course, the conventional medicine model was like, you're just take this antidepressant.

And Joan kind of set me on my way. And then that's when I was actually learning about functional medicine, kind of getting into like, oh, what is this other thing out there?

And I saw a functional doctor for myself, like, I think there's something else going on. I don't think I just have an SSRI deficiency, like what is happening.

And, she educated me on this whole world of functional medicine and how diet matters and lifestyle matters. And, came to realize that my gut microbiome, I had a massive Candida overgrowth in my gut, and that was what was driving a lot of my, health problems, my cognitive decline and anxiety and everything, was stemming from that.

And it was amazing to see, like, journey through that transition myself kind of experiencing it firsthand. So that's what got me into functional medicine.

Doctor Kaplanu2019s Personal Health Journey

And then, like I said, kind of just family history of seeing people being diagnosed with these autoimmune conditions and kind of just not educated on what autoimmunity was or anything that they could do about the situation.

It was kind of just here, take this medication and manage the symptoms instead of and you're going to be like, stuck with it for the rest of your life.

And we were, you know, seeing autoimmune patients in our practice completely reverse or like, get into remission, and not have to rely on the medication management or like, wow, this is something I think we need to, you know, teach more people about.

So, kind of fast forward to where our practice is out now, but we're helping people with, getting into remission with autoimmune disease, and I love it.

That's fantastic, taking those medications. I'm never a big fan of pharmaceuticals to begin with, but the pharmaceuticals they use for autoimmune disease have such a laundry list of harsh, harsh side effects.

And so for anyone listening, if you are on those medications, this is for you. There is hope, there is remission. And, we're not saying to jump off your medications today, but to find someone you can work with.

So you can get to the root causes, like we're going to talk about and hopefully, feel better and not be worried about the detrimental effects. So, so first starters for those listening who really don't know the definition, maybe they've heard it, but just to really so we're all in the same playing field.

What is autoimmunity. How would you like to describe that. Yeah. So our immunity is kind of a general umbrella term. It encompasses over like 100 different diagnoses.

So autoimmune diseases can range from things like more common rheumatoid arthritis multiple sclerosis, Hashimoto's. And then we also have like eczema and psoriasis and irritable bowel disease like Crohn's and ulcerative colitis.

And so the ranges is like, you know, systemic different, problems or they're systemic autoimmune problems like lupus, which can attack multiple different tissues of the body.

But basically what it comes down to is the immune system is having an abnormal reaction against self tissue, something in your body. So naturally immune system supposed to fight off bacteria and viruses and things that can be harmful to you.

But now it can start to attack your own tissues and cells and organs. And that's when autoimmunity is diagnosed. So for somebody with say, like rheumatoid arthritis, the immune system is attacking their joints or somebody with Hashimoto's, it's attacking their thyroid gland or celiac.

Yeah. Celiac. It's attacking their gut. Right. So it's just whatever autoimmune diagnosis you may have, it's labeled based on what tissue is being destroyed.

But autoimmunity as a whole is the way we look at it is it's an immune system problem, right? Yes. Yes. When we when we, we attack ourselves. Not not a not a not a thing.

We want our immune system to be doing. But it's so easy these days for the immune system to be confused. So let's, let's just jump in. And what is the the connection for the women listening who are like, well, I'm here about my hormones and menopause.

What does this have to do with autoimmune. Yeah. So there's some more direct connections. There's indirect connection. So hormones we think of as just the chemical messengers in the body that tell ourselves what to do,

tell our body what to do.

Right. So whenever there is mixed up messages then there can be some problems that come from that. So when there's an autoimmune component going on and the immune system is attacking self tissue, that doesn't just happen for no reason, there's got to be something triggering it to do that.

And hormones can be imbalanced and be one of the root causes causing the autoimmune destruction. So that's where there's like a direct connection. It could be triggering the immune system to do that.

Also where I see a lot of autoimmune issues start to appear in, women are around periods of transitions where the hormones are changing. So like puberty, a lot of times I can trace back, you know, when did some of the symptoms or issues start?

Oh, maybe it was around puberty or pregnancy or postpartum or menopause. Right. So as the hormones are fluctuating, it also has an impact on the immune system.

And there can be those certain like times where things can get triggered. So autoimmunity doesn't just happen. There's like predisposing factors that lead up to it.

And having hormonal imbalances can be one of those things that leads to developing an autoimmune problem, but can also be what's still triggering the autoimmune like reaction that's happening in the body.

So are there specific hormone imbalances? You see that lead to autoimmune issues? More often than not? Yeah. So the the more common ones that we'll see are going to be things like, insulin resistance, very common problem that we'll find.

What Autoimmunity Is and Why It Matters

And even people that don't have diabetes for diabetes you're going to be insulin resistant without that. And I would actually say majority of my autoimmune female autoimmune patients have reactive hypoglycemia.

They get low blood sugars. And that triggers insulin surges and they become insulin resistant from low blood sugar. So it's not just a blood sugar thing, but insulin is a really common hormone that can trigger the immune system.

Same thing with estrogen. So estrogen is good. We need it. But it's also one of those cases of like too much of a good things. Not a good thing. Too much estrogen is more pro-inflammatory and can be stimulatory to the immune system as well.

And then we think of cortisol I always look at cortisol is the it's the stress hormone in the body. It helps with regulating things like our energy and our sleep wake cycle and our blood sugar.

But it's also this like resilience factor. So how much our how much stress our body can handle before it gets to that tipping point of triggering an abnormal reaction.

And so cortisol actually is one of the more important ones when it comes to menopause as well. Because as we go through menopause and the ovaries are no longer producing, like the main manufacturers of our estrogen and testosterone and progesterone, right?

Our adrenals actually help take over the function of making those hormones. So when we are looking at, like cortisol, it's coming from the adrenal glands.

And now all these other hormones can be coming from the adrenal glands and menopause. So there can be some imbalances happening with the adrenals and with cortisol.

For example, like progesterone is a precursor for cortisol. So if somebody's body is under a lot of stress and really

favoring making cortisol, you can become progesterone deficient even with normal estrogen levels.

If there's not enough progesterone to balance it out. That's an estrogen dominance and territory. Right. So there can be imbalance happening because cortisol is off because your body's under stress.

So insulin and cortisol and estrogen like those are some of the top ones that I'll see in balanced. Of course thyroid hormone matters for every cell in your body too.

So sometimes that's off. But when it comes to like triggering autoimmunity, I would say those are kind of the top ones. Yeah. It always it always just seems to come back to, to stress because in a perfect world is you physiologic explained the adrenals should pick up the slack and start producing hormones.

But typically by the time we're in the menopausal stage, our adrenals are not functioning as optimally as they should because we are a stressed out society.

And as women, we tend to give, give and give. And so the adrenals always need extra love and attention as we're going through our our hormonal transition.

And so for someone listening, do you find in your practice that hormones always are at the root cause or do you find there are other issues? Yeah, there's usually not one root cause for autoimmunity.

There's usually multiple things going on because everything affects everything in the body. There really is no, you know, vacuum system where, one system being out of place isn't going to affect everything else, which is, I think, why standard medicine isn't as equipped to be able to handle something like autoimmunity because it's so specialized and compartment it out.

So hormones. Yes, are really common root causes, but sometimes they're kind of in the background and maybe they're, being affected by something else. And that's why they're causing some problems.

Other big root causes of autoimmunity stem from our diet and lifestyle, like food sensitivities, reacting to food you're consuming, having nutrient deficiencies, having, toxins and chemical overload, you know, exposures, having leaky gut and microbiome problems like those are really common in the autoimmune triggers as well.

Or root causes. So yeah, there's not usually just one thing.

Hormonal Triggers and Root Causes

It's usually when one system's dysfunctional, there's multiple layers to it. And when it comes to autoimmunity, a big part of what triggers somebody to go from, you know, normal physiology into the autoimmune state is the abundance of too many stressors.

And those are all different types of stressors or physical chemical stress, not just mental emotional stress. So yeah, it's the overload of like different factors that lead to autoimmunity happening.

And it really is a huge and I would add to that also overuse of medications and specifically antibiotic use in me. I always think sometimes we we get sick, we get acutely ill.

And the easy fix is to reach for an antibiotic and just make it all go away. But if you start to really think about and be more mindful about the things you're doing and the choices you are making and the ramifications they have downstream, that can be leading to autoimmune disease, maybe when you have something going on, you would make a different choice with with antibiotics.

I think they they create cell wall deficient forms. And so they don't always kill all the bacteria. And so then we have cells that are floating around the bacteria that no longer they don't have the cell wall.

So the bacteria can't be flagged by the immune system. And I know I see that in my practice it's a huge cause of autoimmune disease because then that's the cell.

All deficient bacteria is burrow into the tissues and then we see autoimmune disease come up. Another thing I see frequently, which is really sad, is when someone is working on doing good for themselves, right?

And they go and they have their amalgams removed to take care of, as you said, a toxic load, which definitely we know is a is a stressor and can provoke autoimmune disease, but they don't do it with a biological dentist.

And I see a large proportion of especially rheumatoid arthritis after improper amalgam removal, because when you've just exploded your your mercury exposure so, so friendly tip it's good to get your amalgams out with make sure you do with the biological dentist who knows with the right way.

And so what are what are some of the ways you help someone discover if they have an autoimmune disease? Or do they usually come to you already diagnosed?

Most people come to us, already diagnosed. You know, they've gone the traditional medicine model and kind of are frustrated by it, by not getting answers or really getting help.

They're just in the medication management and, you know, looking for something different. But I do help people really figure out what they have going on.

A lot of times, diagnosing an autoimmune condition can take a long time, like it's on average, about seven years of somebody having symptoms before they get a diagnosis, especially something like lupus, which is a systemic autoimmune disease and has, you know, so many different things that have to show up for them to consider calling it that, that people suffer for years with symptoms and not knowing, like, what's going on with them.

And, that's actually what led to us writing the book The Lupus Solution, because I had a family member go through the same thing, like just kind of get pushed off by doctors.

Oh no, it's nothing. And ended up being lupus. So kind of crazy. But like, I think most people come to us already knowing like, hey, I have an autoimmune diagnosis and what do I do to help, you know, reverse or get into remission?

And so then we work through talking about your health, the has health history, getting an idea of where it might have started, what their root causes might be, what types of testing we might need to do if we need to look at their hormones, if we need to look at their gut, if we need to check for certain, you know, areas of dysfunction for them.

And then we do the right test to to figure that out and get some answers for them. So that's kind of where we start with, patients that come to see us.

I think you brought up such a good point about the health history and really, you know, and anyone listening can even just sit down and start to map out their health history, because often within your history, and especially when the onset of something, you can look back a year or even maybe two years and see what was going on, was there stress?

Did you have a toxic exposure? Were you in an accident? And it can start to give you ideas of where things started to go awry. So that's such a good point you brought up.

And we always think of that. We want fancy diagnostic testing and I'm all for that. But sometimes just really sitting down and thinking about our history and what's going on can really begin to give us clues.

So how do you address I, I'm sure you have a lot of listeners ears perked when you say remission because if someone is listening, the standard what you hear is this you're going to have to live with this for the rest of your life.

There's no cure, there's no anything. It's meds forever. And so tell us about that, because I'm sure there's lots of listeners going through this and oh my God, this is exciting.

What do I do? Yeah. So the I mean, to kind of define what remission is, there really is no cure for autoimmunity. The mechanism behind autoimmunity is the immune system making these antibodies, memory cells basically to remember something.

And when it's remembering parts of your own body as being the bad guy there, there's no cure for that. But when we get into remission, remission means getting an immune system into a balanced state where it's not actively causing that destruction, where it's not actively flagging that tissue as being the bad guy.

So that's what we mean by remission. There's no cure, but it's a way to live your life without having the complications and the symptoms of the autoimmune process.

So that's what we're trying to get to. So to get to remission, I mean, it's it's taking a health history, figuring out what are the root causes for the individual.

Everybody is different. You know, if I had five RA patients all lined up, they're all going to have different mechanisms behind why they got RA and what they're doing in their diet and their lifestyle that's causing it.

So learning your stressors, learning your triggers is a really good place to kind of start to handle this.

Diet, Elimination, and Food Reintroduction

That's what we help people identify and work through. So making the dietary lifestyle modifications that are going to help them work through those different issues, whatever those are.

Yeah, that's kind of where we'll, we'll start. But remission is possible with autoimmunity. So I always like to give people that hope, you know, that they can do it too.

We've helped hundreds of people get into remission over the years. So so let's talk a little bit about diet. Do you take everyone off of the major food sensitivities or how do you.

We definitely talk about that. I hope by now everyone knows about gluten and dairy and sugar and but I'm just curious what your take on it is. Yeah. So the best way to figure out what foods like your body or don't like your body is go through the elimination reintroduction process.

So that is a good place that we always start with patients. They have not done that before. We take kind of the, AP diet type of approach where we cut out the the main players, the grains, the dairy, the sugar.

Of course, anything that's like processed. Other things, like nightshades are sometimes a problem for people to, especially when they have rheumatoid type of issues going on.

So we do an elimination of those main like the AP type of diet protocol. And we do that for, you know, a minimum of three weeks depending on where the person is at.

But that's the half life of the sensitivity reactions when your immune system's reacting to your food. It it's a reaction that's like about six weeks long.

So we need to cut it out for at least the three weeks to see a difference. And then we reintroduce foods back in to test what the person is reacting to or not.

And I mean, ultimately we use the elimination diet as a tool. It's not meant to be on. It's not meant to be on for a long term. Right. It's not supposed to be a restricted diet that somebody follows forever.

Because then we also see the problems with somebody being on a restricted diet, how it affects their microbiome, and their hormones and everything else.

Right. Like the more you cut down your diet, the more problems there's going to be. So it's just a tool to start with. But yeah, I find the elimination diet is like a great place for most people to start.

Yeah, I think it's, if someone's willing to do it because it's not not for the faint hearted to take all of these, the dairy and the eggs and the nuts and the gluten and the grains and out of your diet.

I know a lot of patients are off, like, well, what am I going to eat? And and there are things you can eat vegetables and lean proteins and fruits. And so there are things you can eat.

I don't know about you, but my experience is patients usually go like kicking and screaming into it. And I have everyone do it for a minimum of 30 days.

And by the end of the 30 days when we're having an appointment, I'm like, already ready because they were fighting about having to give up this or that.

And I'm ready to, you know, talk it out with them. And then they come in and they're like, oh my God, I feel so great. I don't even care about adding anything back in.

I'm good. Like, I, I love my new diet and I don't need gluten. And I think you mentioned grains and I think that's such a big a lot of people go gluten free.

But then there's still eating grains that are cross-reactive, molecular mimicry, and they're still having problems. And you think you're you're doing good.

I just had this with a patient a few weeks ago, and it's mother who's has her son on this great diet, and he's off of gluten, but he's eating so many things that are cross reacting.

And it's like, I don't want to tell you, but we have to really look at the rice and the day, all these other things. And so I know personally when I went from everything to gluten free, it was awesome.

But when I went from gluten free to grain free, it was like, oh, it's so amazing. Yeah. I don't know if you see that with patients too. Yeah, I do, and I think it's the I was preface to like the Elimination Diet the hardest part's the first week.

You get past the first week and you were like got it down because it's just a learning curve. But people feel so much better cutting that stuff out. And yeah, a lot of people will notice, like they won't be that much of a difference going just gluten free because they're eating the gluten free bread and pasta and all the replacements and cookies and stuff.

But then they go grain free and there is usually a significant difference, and it's not all grains. So a lot of people are like, oh my God, I can never eat any grains again.

Most of the time you can pinpoint there are certain ones that are problematic for you. But that's why you do the process of eliminate and reintroduce and, you know, then you can know for your body what it likes or doesn't like.

There's really no bad foods necessarily. It's just how your body's reacting to them. Exactly. So for someone who's listening, who is like, oh, I want to take this on when they reintroduce, can you just talk a little bit about the reintroduction process?

So someone listening is like, I'm going to take all these things out, but what do I do in a month? Yes. So when you're reintroducing foods you want to do, you know, as slow as you can one variable at a time.

Because food sensitivities, if you have an immune reaction to, a food, a sensitivity reaction, the nature of it is

delayed in response. So for some people, that can be hours later or a couple days later, and then for some people like myself, it could be a week later.

So sometimes those reactions are not very easy to catch. And you need to try to do one variable at a time. I usually recommend starting out just like one new food every three days or something, just to kind of get a feel for how the person reacts and how quickly.

So somebody does react really quickly to something, then maybe they can add foods a little quicker because they can recognize, you know, within a day or so that they're having a reaction.

Personally, I was having reactions that were like a week delayed when I first did the elimination diet. So it was a lot harder to like, figure out reintroducing things back in.

It took me a while longer, but I think that's kind of the exception to it. So I would say a few days between each new food and as long as you can eat that food, and not have any reactions, you should be able to keep it in your diet.

But you want to wait a few days to see if anything changes after adding it. Yeah, I always say it's like feeding a baby. Feeding a newborn, right? You give them potatoes and then you wait for days before you start to give them carrots or whatever to see because of that delayed.

And so and then I think then at the end of the day, it's we're all we're all grown up. So you get to if you want to eat those eggs and you know, you're going to get that migraine or that joint pain, but that's your decision.

I know when I was going through the process, it can be, you know, we talk about it. It sounds very easy here. I'll just take those foods out of your diet.

But it can be it can be challenging emotionally. And I remember it took me a while. I would keep eating it and then I'd be like, oh, I feel horrible. And then we have, like, amnesia and it looks so delicious.

And then we eat it again and I'm like, oh, you're horrible again. And then you want to beat yourself up. And so it's really, really connecting it and deciding how do I want to feel.

And if you're making that mindful decision all right. This is going to be so delicious. It's going to be worth the joint pain for the next three days that that's that's your decision.

But really it's the process you're talking about is so empowering because it really puts you in charge of what you're eating and how it's affecting your body.

Yeah. Oh gosh, that was totally me with chocolate. I was in denial for so long. I was like, no way. Chocolate can't be giving me migraines. Took me a long time.

But you know what's cool, too, is a lot of sensitivity is you can heal from you can gain oral tolerance back to things. Now, I can eat chocolate just fine, but I had to stay away from it for a couple of years.

So it's like, you know, it's not a forever thing. It's it's a process. It's a tool. I always tell people the elimination diet is a tool. You know, it's a way to figure things out.

It's not, you know, I'm not punishing you to to make you take out all those foods. And sometimes it is harder before it gets easier. But it's it is totally worth it once you experience that like relief of symptoms.

Yes. And really the like you said in the beginning, oh the doctor would never say your diet has anything to do with it. And it really puts it into your being an experience about how much what we eat does affect us.

It's it's undeniable once you go through this process. Yeah, definitely.

Gut Health, Digestion, and Immune Balance

So what are you mentioned the gut. So what are some things you find and do to help help patients with gut issues and autoimmune issues. Yeah. So the gut houses a lot of our immune system somewhere like yeah 80% or so.

So it's really a direct way we can influence the immune system. But it's also influencing the immune system. So food sensitivities are a great example of that.

But then there's also leaky gut or leaky barrier. So when the barriers of the or the lining the wall of the intestines or are too permeable, there's too much space or the cells aren't as healthy, it doesn't keep things from getting, exposed to the immune system as much.

So it puts our immune system in this like hyper vigilant state. And that can drive the autoimmune process. So we look at doing we do stool testing in our practice and we look at, if somebody has leaky gut, what are the things that are like missing that are contributing to leaky gut?

Is it just the food sensitivities and inflammation from the food that's causing it? Is it stress levels? Is it toxins? Are they having like microbiome problems that are causing it.

So the stool testing also looks at the microbiome. And then we also look at like digestion absorption. So when it comes to food it's like you know you are what you eat, but really you are what you can digest and absorb.

So there's a lot of digestion problems that people experience, especially people that are in fight or flight mode all the time. They're stressed out all the time. They're not feeling good.

Chronically ill patients tend to have problems with digest eating. And so we'll see that that's something we need to work on for people. And then tying in with hormones too, if you have microbiome disruption, it can also influence your hormones.

So like there's an enzyme in the gut called beta blocker. It. And when you produce too much of that because of maybe like you have too much bad bacteria or something, then that can cause you to reabsorb extra estrogen back into circulation and you can become estrogen dominant.

So like our microbiome and our gut can also directly influence our hormones. And then that can influence our immune system. So it's kind of all connected.

Again there's no way to really separate these things out. But gut health is extremely important when it comes to autoimmunity. Yeah. And I think I know I as soon as I see an A and a positive on a blood test, I'm like, we're doing a gut test and kind of following and and seeing.

And then if you see the permeability, the leakiness I always work on healing that up first before really looking at the food sensitivities, because I think someone who has leaky gut is going to have so many food sensitivities.

So so I think it's important for those of you listening, for whoever you're working with, that you make sure it's it's being done in that order that your gut being addressed before, whether you're doing the elimination diet or you're doing food sensitivity testing.

I personally really love the Zoomers. I think the Food Zoomers really do a do what they're called. They zoom in and really look at the minute protein particles and can really pick up things, more accurately than just a general food sensitivity test.

But you really want to be getting accurate information, so maybe maybe you can eat eggs and you know that to me, foods I don't think anyone really needs to eat dairy unless they're a baby cow.

And I think, you know that. And gluten is. So I don't know your experience with your patients, but I know myself and

my patients. When you go over to Europe, I you can tolerate, right?

You can. Can you talk a little bit about that? Yes. I see that all the time. People are so worried. They're like, oh my God, I'm going on vacation. What can I eat?

And then they go to Europe and they're eating all the bread and pasta and stuff, and they're like, oh, this is great. I can, I can eat this when I get home.

And then they eat it when they get home and they fall apart, you know, like, it's so different how they have hybridized the, we products and stuff in this country is crazy.

It looks totally genetically different than what our body is used to recognizing as food. And so most people do not do well with, especially gluten containing grains, but just how food has been changed, you know, even even 20 years ago, like, totally different.

So and little bit like, say, all the glyphosate they're spraying on it, triggering autoimmunity, which, you know, glyphosate outlawed in many places, but not in, not in the United States.

So if you're listening to this in your not in the United States and you're, you're you're lucky here in that in that aspect of things. But it is I have I have a fond memory and I do not I, I had asthma as a child, and I cured my asthma initially by just going off of gluten and dairy, which I had existed on my whole entire childhood.

And I have a fond memory of being in the in the loop and eating like a croissant and and being fine. But I want to I want to circle back because you talked about digestion, and I think that's in some ways such a simple piece, but such a profound piece when when we're talking about health and autoimmunity and hormone balance, because it is true, you, you, you aren't really what you eat.

You're what you absorb with the food you eat. And I find that hydrochloric acid deficiency is rampant. I find that many patients don't have gallbladder sufficiency.

They don't have proper bile flow, they don't have pancreatic flow. So I'm curious if you could just speak a little bit about that, what the listeners should be looking out for and what they can do.

Yeah. No, I see that all the time. And in people a lot of times don't have symptoms. So that's where or symptoms that they recognize, right. That that's where it can get easily missed.

And with something like hydrochloric acid not having enough stomach acid, it looks like too much acid most of the time. Right. So people get confused and they're like on antacids and taking PPI medications and stuff, trying to block this too much acid that they have.

But most of the time it's not making enough. So a couple things that happen, you know, if there's not enough stomach acid, the food has to sit in the stomach a lot longer.

So it's like fermenting that valve at the top of the stomach, not being told to close. So there's a reflux of things going back up the esophagus. And even if you don't have the burning and digestion, those symptoms, I find a lot of people have silent reflux.

So that is happening and it's irritating their throat and they're getting lots of mucus or feeling like they have irritation or post nasal drip or different symptoms, and they don't realize that that's what it is.

But a big part of, I think, where the connection between being autoimmune and having problems with making enough stomach acid making up pancreatic enzymes is the connection with the nervous system, right?

When the body's under stress, it goes into fight or flight. You can't be in fight or flight and rest and digest at the same time. You're not going to be making your enzymes and having good peristalsis and being able to absorb

things.

If your body is tensed and stressed out in sympathetic state. So when the immune system is in that hypervigilant state, it also gets your nervous system to be there.

And that's where I think a lot of times we just need to work on the stress, you know, stress management with people and getting them to calm down, you know, before they're eating so that they actually benefit from their food more or supplements, you know, in the meantime with something like hydrochloric acid or pancreatic enzymes or bile salts or whatever it may be that they're, they're missing.

But yeah, digestion is a huge problem with people that have bad immune. Another factor, though, too, if the foods aren't being broken down well, they look foreign, right?

When food gets to the small intestine to get absorbed, it's supposed to be fully digested. And when it's not, then it looks like something that could be harmful to you.

And that's where food sensitivities happen. So the more that you can digest, the more you're going to be able to tolerate food to such a such a good point.

So what are before we finish, what are a couple of tips or tools for for coming it down, like you say, for the listeners to to relax so they can can eat their food and digest and get into their parasympathetic state.

So you could do things that will stimulate the parasympathetic. So the vagus nerve. Right. Doing different breathing exercise is one of my favorite breathing exercises to teach people is four, seven, eight.

So you breathe in for four. You hold it for seven, you let it out for eight. Breathing out, you know, for twice as long as really stimulating that that rest in digest mode of the nervous system.

So something like that's really easy. But just even being mindful when you eat, so many people are eating on the go, eating in their car, running and walking around and stuff needed to sit down and take time to eat and and be mindful of, like the food that you're putting in your mouth, taking time to actually chew your food.

So many people just, you know, really are not chewing the 30 times they're supposed to or whatnot. So just simple things like that. But I think as a big picture, just trying to figure out what other stressors you have control over, and that's how you're really going to get your nervous system out of the fight or flight response and out of autoimmunity is by figuring out what are the stressors in your life that you have control over the foods that you're eating, the lifestyle habits that you're leading, you know, what are the things that you can change that's going to tell your body, hey, it's okay.

You know, we can we can calm down. That's a big part of it. Well, I certainly appreciate what you shared because I am in addition to being a physician, I'm a mindfulness teacher, and I think mindfulness is the best medicine.

And so I hope that those of you listening, really even just taking one of the things that Doctor Tiffany said, like, really? Because sometimes I think we just hear these things, oh, you should choose your food.

And we hear you say it and it sounds like a good plan, but then we don't actually implement it. So taking one of those things, whether it be committing to not eating on the go or at the counter in the car, or actually chewing your food and just making that a practice and getting that down can have profound effects for your health.

And it sounds so simple, or maybe silly, but these things really work. Doing the the breathing exercises. These are the things that really promote health and really change your nervous system.

So I love that you brought that up. Is there anything else about autoimmunity that we didn't touch on that you want to share with the listeners? I think just being your own advocate, I just see so many people that are, again, stuck in the conventional model of being told diet doesn't matter.

You know, you don't you can't really do anything about this. It's just your genetics. Like all the lies that lie around autoimmunity. I think people just need to, educate themselves.

I know there is a lot more to it and that you can make changes and, just going through your own health history and figuring out when did you start to notice when things were wrong, what was going on around that time, and trying to connect the dots, or working with a practitioner to like to help figure out where things kind of are stemming from.

I think it's just, yeah, people need to be aware that there is a lot more that they can do when their symptoms present symptoms are the way your body is communicating with you that there's a problem. So pay attention.

And what about I'm curious your thoughts of like emotions and what's the emotional, aspect behind or along with autoimmunity. Yeah. There was the a study adverse childhood experience study, where they did correlate to people that have had childhood traumas with having a much higher risk of developing an autoimmune disease later in life.

Stress, Trauma, and Self-Advocacy

And I think what it goes down to is that whole cow, your, immune system and nervous system change when in trauma, go into fight or flight mode. And it's the way that your body is trying to protect you, but it it can start to have, the wrong reactions.

Right? Like it can trigger your body being more hypersensitive to things you're eating and getting exposed to and start to develop that, like pretest all those predisposing factors and trigger an autoimmune disease to happen.

So, emotions are definitely the mental emotional state is definitely something that is, a root cause of auto immunity. Again, it's usually there's multiple layers and that's part of it.

And we mostly focus with people in the physical chemical stressors that they have going on. But it's also good to recognize that that childhood trauma, that neglect that you feel or abuse or whatever could have been what led you to this point in working with a therapist or somebody to kind of unravel that is is very helpful for some people.

Yeah. I think it's important to also acknowledge that trauma can come, you know, there's capital T trauma, there's little T trauma. And so to, to be kind to yourself because being ostracized at the the basketball game could, could have changed the course of your life and how you think about yourself.

And I, I think with autoimmune disease, when you think about it, it's your own immune system attacking yourself. And so from an emotional perspective, where are you attacking yourself?

Where are you beating yourself up? And and it's not to can be very easy if you are in that mode to then beat yourself up for beating yourself up. And that is not why I'm bringing this up.

There will be no self-flagellating here, but to just recognize and to start adapting. And as Doctor Tiffany says, absolutely. Getting professional help, therapist eMDR, whatever it is that works for you, to start unraveling, but to start just consciously paying attention to how you talk to yourself often we are we are awfully nasty to ourselves, more nasty than we are to to people we dislike or to anyone we interact with.

And so starting to adopt a kinder, gentler, communication and dialog with yourself can really, can really help you start to unravel the physical aspects as well.

So do not beat yourself up. If you have an autoimmune disease, do not beat yourself up saying, oh my God, I'm still just said I'm beating myself up. It's just to have an awareness, it's just to breathe into it.

You can do the four, seven, eight breathing and just breathe through and allow yourself to shift. So some really great, you know, tips here and things that you can really start doing.

The breathing, the chewing, the health history, the digestion, the elimination diet. So there's lots of juicy nuggets to put into your menopause transition journey and try on and see what works for you.

And I know Doctor Tiffany, tell me she's got a free gift. For those of you listening, can you just tell us what it is? Yeah. So we have an autoimmune recipe book because again, everybody is like, what do I eat when I have autoimmunity?

You know, so we have some, like, safe recipes that people can eat can kind of ease people into eating healthier. So it's a good, little resource. And we'd like to give that to everybody that attended I love that.

Thank you. And yes, I know recipes are are often sought after. So that's a fantastic thing to help because it can be overwhelming. Well, well, what do I eat now?

If you're used to only eating one way or cooking one way? But again, if you can shift the perception and look at it as like a journey, a journey towards health, something new, you're going to learn something fun.

What can you discover? Being curious about it? It can be, can be a nice process to change your diet and give yourself that gift of of healing nutrition.

So, so thank you for that. And thank you for being here and for giving your information and hope. And, I just appreciate you taking the time and to everyone else, as I just mentioned, you've got lots of little tidbits.

So, take what take what works for you or what calls to you and you want to get started with and really try it on even even, as I said, the chewing go on a journey of 30 days of committing to chew, remembering that you'll probably finish a meal and be like, oh my God, I forgot to chew that meal.

But that's okay. Do it for 30 days and keep reminding yourself until it turns into something that you are regularly doing, and watch the difference in your digestion.

Watch the difference in how you're feeling. So we'll be back again. Until then, be well and we'll see you soon.