Before You Choose IVF, Ask These Questions | Iliriana Balaj | Ep. 172 Transcript

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Introduction to Cervical Mucus and Fertility

A lot of people don't know your cervical mucus is what literally filters sperm. It helps bring the healthy sperm pretty much where it needs to go. So how do you track that mucuss?

You could pretty do it like right now, but essentially it's just like wiping with a toilet paper and then you see whatever discharge that you have and depending on how watery or clear or stretchy it is, is how fertile you are that day.

And when you're ovulating, I would say it's going to be the most egg white. It's gonna be very stretchy. A healthy point of view podcast, your top rated show, bringing experts from all over the world to talk about health, wellness, beauty, and mindset.

Today we have Ili Balai. Illyriana is an integrative nutrition coach, NASM certified personal trainer, author, and founder of Live Healthily. Recognized on ANK's Female Founders 500 after surpassing $4 million in sales.

After transforming her own health, she now empowers others to uncover root causes and make informed choices around fertility and wellness.

Podcast Intro and Guest Background

There was a study in 2024 that they did on women who had unexplained infertility and they found out that when they actually went and did the elapsed surgery, 90% of them ended up having endometriosis.

That's a number you just cannot ignore. So we did all the quote unquote extensive testing that the offer at these IVF clinics and yet they told us that we have unexpained fertility.

They didn't have a single reason for why we weren't getting pregnant. The tubal factors account for about 10 percent of the reproductive therapy cycles.

You feel like that's a big gap in the fertility space. We're just looking to. Welcome to another episode of a healthy point of view podcast, your top rated show, bringing experts from all over the world to talk about health, wellness, beauty and mindset.

I'm your host, Sam Tejada. And today's guest, todays topic, we're gonna be talking about medical neglect crisis. Well what the heck does that mean? This one actually hits a little bit close because I've dealt with it personally.

And I've had family members deal with this as well, too. And we're seeing a lot of this. This is the infertility industry. The infertility industry, what's happening?

What is true cause of inferitility? Sometimes they just want to cut the corner and go straight to the solution and never look at what the actual root cause is.

Today is going to be a story that we are in the middle of the story. And who do we have today? Today we had Ili Balai. Welcome, welcome, Welcome. Hello.

Thanks for having me. Absolutely. It's a pleasure having you on a Healthy Point of View podcast. You know, we got to meet a while ago. We were at a biohacking dinner that Kavita put on here in Fort Lauderdale.

And it was pretty cool. I was like, Probably the only guy there, but. Yeah, like literally besides my husband, it was

like you too. Right, your husband was there.

But it's cool, we met a lot of different people with, you know, specializing in different areas of the biohacking, health and wellness, people who have different type of products, et cetera.

And I got to get to know you, and your story, what you have going on. And throughout the year since then, me being able to kind of follow your journey on social media, one of the things that I told myself is, man, a lot of things you have going on, I think the world needs to hear about it.

So I'm happy that you can come on the podcast and talk about your journeys, specifically today's message when it comes to infertility. But before we get into any of that, I want the viewers and listeners to get to know who you are.

So I wanna go way back from your upbringing, from when you were five years old, and talk about what brought you to where you're at today. Yeah, so born and raised in the Bronx.

So I think like my parents, my dad's an immigrant. When he came to America, it was just like hustle, be a good person, make money, take care of your family.

I grew up on a lot of just ready meals and all the things. so I didn't grow up in health and wellness space by any means. Eventually, as I got older, I was always into sports.

So that was kind of like what kept me, you know, fit, in shape, especially in your teen years. I feel like people go, either way. But I'm always in to sports, my brother and I, so we've always been very in-shape.

Eventually that intrigued me into getting into personal training, bodybuilding, which is like the extreme version of, y'know. You did body building? Yeah, and so I didn't officially get all the way to the end, because I like, am getting way too Just didn't like how I was looking because you know you have to have a very specific look to get all the way It was probably like eight weeks out from a competition I like this is I'm ready to to it's too much and he starts to feel it as a woman like on your hormones and Everything but I loved bodybuilding in general like training that way that's kind of when I got into supplements protein powders pre workouts all of the things and And then, yeah, I mean I struggled with my health pretty much since I had my first cycle around like 14, 15 years old.

I'd really painful periods, had really bad cystic acne, i had chronic migraines, chronic bloating. Pretty much anything you could think of, just like as a teenager and it went into my early 20s too.

And even being a personal trainer and like looking at every calorie just wasn't resolving my issues. I was put on birth control as soon as I had my cycle.

And I put seven different types of birth controls in the matter of seven years. So they were just kind of Because every time I would go on one and have a new symptom or would take away one thing and leave another thing.

So I struggled with that for a really long time. And I think for me, what really woke me up and got me into health and wellness was this whole discrepancy that was happening.

I'm like, I really fit. The fittest I've ever been. Yeah, and I never felt worse. That's when I got into ingredients and all the crap that's in protein powders and pre-workouts.

You know, even things that are quoted and quote unquote healthy food are not so healthy for you. They have the artificial sweeteners and things. That have been linked to a lot of the symptoms that I was feeling.

So once I finally cleaned up my diet and really started focusing on hormone health and gut health is when I became a health coach and is, when, I started my business live healthily, which is a non toxic marketplace.

And that is kind of from there just started to grow. I mean, I really started on social media as someone people could relate to. They're like, yeah, i'm also the fittest I am, but I do struggle with acne and I struggle bloating and i don't

understand why.

Or yes, i was also put on birth control that didn't actually solve my issues. How do you feel better? You know, I also struggled with, you know cystic acne, whatever it may be. I was just somebody who Was also trying to figure it out.

So that's essentially how my page grew. Obviously now my business is like what I do full time. And influencing is what i say or like content creation is.

What I just do for fun because helping people is obviously what we're in the business of what.

Health Struggles and Functional Medicine Journey

We do. For. But. Yeah. That's kind of like the long winded version of how I became essentially healthily, which is who I am now. And I love that because what you've been able to do through your platform is help so many people, right?

You even hit the Inc 500 women's success in business. You had like over $4 million in sales at that point of your product, which is great. That means you helped a lot of people through that.

Now what made you, a lotta people deal with health issues all the time, but not that many are willing to televise it the way that you have done on the social media platforms.

What made you actually do that from the beginning? Yeah, I think for me, i've just always been an oversharer. I don't feel like we should feel shame about things that are so common, right?

I mean, even when it comes down to infertility, there's a lot of shame around feeling like I can't achieve this thing that I should achieve. Um, and the same thing with like acne, like so many people struggle with acne.

Why are we scared to talk about it? Or, you know, we, the more we talk, about the, more you realize so much people go through it and that we're all just trying to figure out how to not go, through and how, to resolve it.

So for me, I've always just been outspoken. I never really felt. Shame around things that everyone kind of goes through or like most people go through Yeah, I don't know what made me feel like I should just tell everybody like, you know I remember sitting in my car after my dermatologist appointment because I was dealing with and, you know, severe dandruff and acne and just my skin was the worst that it ever was.

And I'm sitting in my car and I am just showing everybody my prescriptions that I was given like five prescriptions from my dermatologist. Like, I don't even want to use these, right?

But that's how we start these conversations of people being like, hey, like I didn't do that. I ended up, looking into liver health and like estrogen metabolism and these things that you just never hear of before.

So through my own sharing, I've gotten to learn a lot, and it's opened up doors for me to find healing in different ways, you know, no matter what I have dealt with, whether it is something as simple as bloating, which feels not so complex as something like infertility.

Yeah, you know, a lot of the things that you talk about and your journey in particular, and how you've helped other people as well, it's any more of a functional approach, right?

Taking a very deep dive to really try to crack the code and see what the root cause is. What is the issue with today's allopathic traditional medicine world?

I mean, we're just looking to we look at the body as different things, right? You know, I think of, you know just when it comes to, acne, for example, We think it is just this topical issue that oh, it's just something we are going to put a topicle on it.

We're going put on a steroid, take Accutane and then it will be gone. And what we don't realize is that acne can be triggered by the foods that you eat.

It can triggered be how your body's metabolizing estrogen, it could be trigger by how you're liver is functioning, It could triggered the products you put on your skin, right?

Not just the actives for acne like salicylic acid or whatever it is, but the synthetic fragrances and the endocrine disruptors. there's so many other ways and unfortunately when you have one issue in your body you go to one specialist that only specializes in that one thing like I remember I was struggling with gut health and I only went to like one GI doctor specialist and then I have to go somebody else for my hormones which is my endocrinologist and from my skin I go a dermatologist everything is so separate And I think that's really the issue is we don't look at how everything is connected because it really is a domino effect, everything in our body.

Like as soon as you put something in your mouth, it's not just like, okay, you're digesting it. There was 12 other systems that were happening from the way your saliva breaks everything down, the bacteria in you mouth.

The smells that you get, like literally everything to get to that point just to digestion. And then that is the whole other system. And I think the allopathic medicine model just forgets about that.

And it's trickled into everything, into even the most complex things when it comes to even like cancer, or again, like in my case, infertility, where it is not just trying to resolve being infertal.

It's why is the body rejecting fertility in the first place? Right, right. You know, when you first got into really taking a deep dive into your health, before even the whole infertility stuff came about, what was the one thing that, When you started taking that deep, What was that one that was like a huge surprise to you about your Oh my gosh, it was so I used to struggle with chronic migraines.

I use to get 15 migraine a month minimum. So it's like practically every day I was waking up with a migrain and I would have to take insane amounts of painkillers just to go through my day.

It was working two jobs. Also went to school. So I was on the struggle bus. I mean, having a migraine is different than a headache because you feel like your vision is going blurred.

You're so sensitive to light, you can't eat, or like nauseous. So it was really severe. And I had no clue why. Obviously, all of the doctors, hormone doctors were like, yeah, this isn't something we really treat.

We have to go to a neurologist. I'm like, OK, so I remember going in there. I'll just they did all these weird scans on me, put things on my head. It is like a sleep, like sleep exam.

And then he sent me home with Percocets. Mm hmm. That's it. Like, you don't understand. He's like I don' understand what you just like. You don''t have a tumor.

you don't have migraines. Come to find out, I was so minerally depleted from birth control, which no one ever told me that birth controls depletes so many essential minerals for just basic function.

So specifically I so magnesium deficient that it was causing these severe migraine. So that was a big wake up call for me that I ended up having to deal with my migraines for like another four or five months until somebody was like, have you tried magnesium?

I'm like that sounds a little too simple, you know, like what do you mean? But once I deep dived into all the depletion that i went through for seven years on different types of birth control, I am like yeah that actually makes sense.

And nobody found that out for me. I would have had to be on Percocets for the rest of my life. That's scary. Yeah. So that's just like the type of danger that can happen if you don't have proper care.

And you are being neglected by the medical system because he's like, I was 23 years old. You know, i'm way too young to already on all these prescription meds for pain.

you know. so that was a huge wake up call that I'm like I really have to do my due diligence because I can end up in a really bad scenario. That's unfortunate.

And I mentioned this all the time, that we live in such an algorithmic, pharmaceutical-driven system where you go into the doctor's office, and regardless of what you have, the first thing they try to do is pull out that prescription pad and give you some kind of prescription.

Instead of really taking that deep dive and trying to figure out, well, why are you having these type of symptoms? Something like a micronutrient deficiency test would have let them know if you had a deficiency in magnesium.

And that is how you said it's such an easy fix where you're just like, it can't really be magnesium. You can go to the vitamin shop and just go grab some, right?

But yeah, so those things are very interesting. Now, fast forward to you the topic that we're going to be covering today, which is the infertility. At what point in time did you decide that you and your husband are ready to have kids?

Yeah, so I think we're a little different than a lot of people because obviously I'm so proactive about my health. So when we got engaged is when started doing a of the things people do once they find out that they're not getting pregnant.

We did a sperm analysis before we even started trying. And how old were you guys around that age? So, when got engage I was 27. 27? Yeah. So I was already living a low-tox lifestyle.

My husband and I both do. We only eat whole foods. we don't eat out a lot. You know, we both exercise. Like we're pretty, you know pretty healthy at this point.

So at that point when we got engaged, planning our wedding, I'm like, let's do some testing now because I know we are going to want to try shortly after our So I did a sperm analysis, I a Dutch test, a GI map, an organic acids test.

I do a hair mineral analysis. We did everything just to prepare for pregnancy. And I already started taking prenatals, and I was reading all the pre-natal and pregnancy books, because I wanted to be trimester zero.

It was three months before, but I want to start even earlier. Because I know if we did find something, we'd have time to resolve it. So once we got married, then it was kind of like a year until we were like, OK, like now we're ready.

And then essentially when we started trying, I thought it would be easy because that's you're like I'm like the epitome of health. I mean, my doctors at the time, even my OBGYN was like.

You're going to have no problems, but you can't really tell somebody's fertility by just looking at them, right? People get pregnant in all different types of health conditions, whether you're obese or you are skinny or on drugs or not.

That's the one thing about fertility people don't realize is that there isn't a visual marker or even sometimes health markers for it. It's kind of crazy.

Now, were you off of the birth control at this point? Yeah, I've been off a birth-control for, since I was 23. 23, okay. Yeah. So, at that point, like, off for at least five years, and, um…

Yeah, so I was good to go for that and I've detoxed and worked with all my functional practitioners to make sure that my hormones in the right place.

Trying to Conceive and IVF Clinic Experience

So yeah, once we started trying it took some time and we were just like, okay, I'm not going to panic because I know it can take a couple months. But I think at the six month mark is now I am 30 at this point.

Once we got like married at like 28, waited a year, and 30. That's when I went to my OBGYN because Kind of where else do you go? I was already working with a functional practitioner and she's like, well, if you want to get other blood work, I just go to your OBGYN.

So and just for reference on where you guys were at, were you and your husband already at that stage where your like getting the ovulation test? You know, it's OK.

Today is the day that we have to, you know. Try to conceive. Right. We're like we're in it. Yeah, because once we started, like I'm doing this right. You're already tracking stuff.

Yeah, like I know my cycle like the back of my hand. Yeah like i'm on it. So um, and I, know that's Not a lot of people when they get started I think a, lot, of, people like see what happens and then they start getting more strict about, okay i'M gonna you know I was like, the opposite iIm from the beginning you're just very type a yeah so um yeah i went to my ob gyn She ran like a progesterone And i got tsh on me like very i think i maybe had like four or five markers She's like, yeah, I don't know, like your traditional is like a little on the low side, but you know that'll kick up once you're pregnant.

I'm like OK, well, that's not happening. And she goes, we'll give it a couple more months and then I'll refer you out. So we gave it. A couple of more.

Months. Nothing happened. Then the refer out was just to an IVF clinic. Mm hmm. so I went to a clinic in South Florida that a lot of people go to. It's just like.

Very popular one. Had a. Lot of great reviews. So I went, I remember going into that clinic with like a stack of all of my functional testing that I've ever done.

Cause I'm like, you know, more eyes on this, the better, right? Like maybe they see something is there, they're fertility specialists. Like, maybe there'll see.

So we go to our appointment and we're sitting there. We're talking to the doctor. I like. Hey, do you want to look at any of our blood work? We already have a semen analysis that we did.

Um, if you'd like to see, my hormones, she goes, we don't believe in that. like straight up and I was like, okay, you know, that's an interesting because wouldn't you want to see any information about like what my body's been doing the past two years like it was really, it should be embracing all of it.

Right. They should be like, yeah, give me everything I want to. I'm going to be, like you know, an investigator. Let's figure it out. And then we kind of pretty much got like a five minute PowerPoint on how babies were made.

and I like OK. Um, and. Timed my appointment so that I can get an ultrasound to see my follicles because I knew exactly where I was in my cycle and she and also on top of that, I got a little age shamed.

i mean, i'm 30, which I don't consider old by any means. and she was like well I'm going to assume your AMH is low and your amh is your anti-malarion hormone which is it shows kind of like your ovarian reserve like how many eggs are kind working with and just automatically assumed mine would be low No, it's not and it was above actually average for my age and she was kind of thrown back by that So it just like kind I felt like I was just kind Of being teed up for something at that moment and I'm like, I just met you lady Like I didn't make any promises about what I want to do yet Like, i'm just trying to figure out like why this isn't working for us because we're a very healthy couple, you know So I end up going into my ultrasound right at that moment after like our 15 minute talk to an ultrasound.

She's like, wow, you have a lot of follicles. This is great. Like there's no notes, like this looks amazing. So put my pants back on and she ushers me into another room where a little college kid is sitting in the room with a single piece of paper telling me how much IVF is going to cost.

And my husband, I just kind of look at each other and we're like, and I still have this folder, like I Still have it just to like remind myself of like how insane that whole folder that has a sheet with all like hey, you can get this.

You know, we can finance it for you like the deal like this like amazing. Yeah. So he essentially tells me how much IVF would cost. The rundown and I'm like, OK, so my husband, I essentially take it.

We go back home. I mean, you know what? Let's just do all of our testing with the clinic and then we can make a decision because if they find something that's worth noting or like gives us an answer, then this is obviously going to be our route.

Like I've never been against, technology, science. This is why we have this. So I end up doing an HSG, which for people don't know, and an SIS, but it essentially checks to make sure your fallopian tubes are open so they flush dye through your tubes.

And then also an SAS which kind of just shows your uterine cavity to makes sure there's no like divots or things that would make implantation really hard.

So I did that they told me everything was open. They're like everything's draining. Well, like your flow pin tubes are draining while your floating tubes or open We don't see any cysts or any issues.

So that was great news I remember even sharing that with my audience like being like, okay, everything looks great. We did another semen analysis which came back Absolutely amazing.

So that was also great in our favor. We both did genetic genetic testing, which came back, you know, unremarkable, there was nothing to note there. we did hormone testing which Came back great.

so we Did all the quote unquote extensive testing that they offer at these IVF clinics. And, and yet they told us that we have unexplained infertility.

and this would IV F would be our only option. Meanwhile, they had no reason. They didn't have a single reason for why we weren't getting pregnant. Everything looked amazing.

So that was really confusing to us. And we kind of were saying like, OK, we're going to take like a month or two to just think about it. When I tell you I was getting a call almost every single day, like can we get you in?

Like, let's schedule you for, you know, your IVF prep and like let us get in and blah, blah blah. It was like you're in the sales funnel. Yeah, and I'm like, you guys don't even have a reason for me, right?

Like I don' even feel like I qualify for this medical intervention because what I thought IVF was for is for people who don''t have fallopian tubes, who do have structural issues, Right.

who dont have any sperm, but we're coming up with that we have all of those, like we all those are coming back unremarkable and yet you are still pushing this on me.

So, That was kind of just an insane realization of how easy it is to just get funneled into it, especially if you don't know how to advocate for yourself.

You don' know your options. And, you know, when we walked out of that clinic, we weren't given another option. I mean, if we told them like, yeah, were not comfortable with IVF.

They didn't have anything else to offer us. That is quite literally what they do that is their specialty. Well, you're

someone who has quite a bit of knowledge in overall health, right?

Most people that go into that office, they see that person wearing that white lab coat and they just do whatever they say. Yeah, I mean, also you're like the most desperate you could ever be.

You want a baby and, you know, does kind of feel a little predatory. Like that's how I felt. They're kind dangling this carrot in front of me. If you don't do this, that is how it felt to me and for me I never want to be in a position where I feel cornered into a decision.

I want feel like I'm making the more informed decision with the information that I have. Right now the information that I have the facts are my tubes are open from what they told me my husband has sperm from What they?

Told me I don't have any cysts fibroids and everything looks a-ok. So with that information Why aren't we getting pregnant? That's what I care about, you know, and you still don' We got no answer, and we essentially took the next nine months without anywhere to go, because this is when I realized we don't actually have fertility care in the United States.

What we think fertility is, is essentially just IVF. But IV doesn't treat infertility. I mean, most people that go through the IV funnel end up always needing IV to get pregnant.

So we're never actually treating the infertility, right? We're bypassing whatever the issue Is if we can bypass it, because for a lot of people, it never gets bypassed.

They never find out why they never found out what the issue was or whatever it may be. So we went on essentially the next nine months. I was on another podcast.

It was an Alex Clark's podcast and then. She had a napro surgeon on her podcast, like two months later, and she ended up mentioning because obviously she's a friend of mine and She ended mentioning to him like my scenario because it was just a mystery, a medical mystery at this point.

Like she was like, she is the healthiest friend I know. I've never known a healthy person in my life to not get pregnant. This is opening my eyes to everything.

And that's when he connected with me. In my entire life, I've never heard of restorative reproductive medicine. I did not know it existed. So it wasn't like I was seeking this out.

It kind of just fell into my lap. I found out that we have no napro surgeons in the state of Florida, which is kind of crazy. There's less than 30 of these doctors in The United States, Which is insane.

So I end up connecting with him. I hop on a call myself, my husband and him, he's like, let me just look over whatever you've gotten until this point.

You know, I don't have to be your doctor, but I wanna help you and see if I see anything. That's cool. So I was like, you know, at this point, because we just went nine months with nothing, like we're kind of just like crossing our fingers and being like hopefully everything works because my tubes are open, all these things.

So he he took all of my blood work from like four years. He's like I want to see everything. I wanted to know your mother's history, your great great grandmother's.

History, I like. want. To know everything, that's a good start, which I'm like yeah, it was already like this is great, so he looked over everything We spoke for an hour and it wasn't him mansplaining how babies are made.

It was literally like, what's your history? What symptoms do you have? And at that point, my only symptom was infertility. I don't struggle with pain.

And I struggle painful periods. You know, I get I ovulate every single month because I'm like I have all of my charts. Here you go. My hormones are great.

From what I know. And he goes, Usually, when I see this, I say this with silent endometriosis, and I think that's what you have. And my jaw dropped because I always thought endermetriose was super painful.

You're just, you know, bleeding out every single month. Your period is horrific. and for a lot of women, that is the case. So I didn't even think this would be an option.

For me, it wasn't like I automatically trusted this guy. I was like, great, like his model, because they don't believe in IVF and that's just not they're part of their protocol.

So I'm like great. He's going to sell me a surgery. And I go under the knife. Who's gonna find nothing? And now I am back to square one. Like great! You know?

So it was not like that I trusted him automatically. But the stats just made so much sense. There was a study in 2024 that they did on women who had unexplained infertility and they found out that when they actually went and did the elapsed surgery, these women with unexplained infertility, 90% of them ended up having endometriosis.

Oh, wow. 90%. That's a number you just cannot ignore. Yeah, that's crazy. So you're like, if you have unexpained fertility right now and your only symptom is infertilty, there's probably a high chance you had some sort of endometric, you know?

So that enough was I'm like, you know what? I'll do the surgery. Like, let's do it. It's a it's. A minimally invasive surgery, they do like three little incisions, one in your belly button.

You don't even see them and it gets exploratory. So if they go in and they find something, then they'll take it out. But if. They go and. they. Find nothing.

Then yours is backed up and you're good to go. Right. For me that would have been my worst-case scenario, which is such a weird thing like no one goes into surgery Hoping that they find something wrong, you know, so it was a really big red I say it's almost like getting a colonoscopy You know you go in there to get it checked if there's yeah a few different things to pop them off, You Know Yeah, exactly.

So you're just kind of like, okay. We'll see what happens So schedules my surgery for a couple months later And I go in for surgery, I come out and this video that I had of me coming out of surgery went mega viral.

And for two reasons, one, just the shock factor, but two, a lot of people have, you don't realize how many people had the same experience of just after so many years having answers.

So I came out the surgery and I found out that stage one endometriosis I had a cyst blocking my cervix. I have multiple fibroids covering my uterus. And I've had blocked fallopian tube that I was told was open by my IVF clinic.

On top of that, I also had an infection in my urethra called endometriitis, which I never heard of before. So I come out of a surgery thinking I have nothing because I don't live with pain and I five different conditions that are impacting my fertility that I was never told by my IVF clinic that's supposed to do their due diligence before ever recommending me something as severe, you know, as intense as IVS.

So I just bawled crying for probably a month just because I was in shock for myself.

Unexplained Infertility and Restorative Reproductive Medicine

But I felt for so many women that I've formed relationships with over my two years of infertility at that point that have been struggling for answers.

And it's just shocking because I'm like, it is me, somebody who takes such diligent care of my health. I mean, I live the low tox lifestyle. Like you will not find a single endocrine disruptor in my home.

like I do not eat. But I haven't had fast food in maybe a decade. You know, It's like me and my husband. It is like both of us are just in it. We exercise, we take care ourselves, like we filter our water, We only sleep on an organic mattress.

We are next level. You have all the boxes. Yeah. And then I end up having all of these things. So where you're at right now, this stage, right? Taking this in consideration that one in six people worldwide experience infertility.

Would you say that at this point, when you come out of that surgery and you find out these five different things that you have going on with you, would you that infertility, the fertility struggle might actually be more of a healthcare problem in our system?

Yeah, I don't think we have a fertility crisis in America. I think. We have. A medical neglect crisis when the medical system completely. My doctor thinks I had endometriosis for 15 years, which means the day that I went on birth control for a painful period is probably the.

Day I. Had endometric, but instead I was put on. Birth control. For seven years. So yeah, I don't think we actually have, if the fertility crisis that we have right now is just a direct symptom of the metabolic issues we've have in this country, the medical neglect that were dealing with, people just, doctors completely ignoring the fact that women have endo, it takes what, 10 to 20 years for a woman to even get diagnosed with something like that?

We just found out that PCOS is actually a metabolic condition, even though we know this in the functional space for Years, you know, it's like well the matriosis that's one of the things that You can really only find out if you have it if go in right?

Yeah, I mean they're trying to find other ways to Diagnose it that aren't so invasive. But right now currently the gold standard is laparoscopic surgery.

Yeah and So it's a lot. And I think that's why also, unfortunately, a of clinics, you know, there's this idea around IVF or like their their kind of thing that they push a law is like, we don't want to over test patients, You know?

We don' to give them, put them under a surgery that the don need. But I feel the same way about IV. Why would we put someone through IV if they don actually need it?

Right. Right. If that's also invasive, that also, you know, financially intense, it's emotionally intense. I mean, we have embryos on the line. There's a lot more on.

The line than I. Mean, That's really how I kind of gauged it in my head. And I'm like, I am putting way more. On the. Line with IVF than. With a laparoscopic surgery, which, You know I was up and walking.

Not that bad, you know, for how much I found out after like it was 100% worth it for me and to get diagnosed with something that I didn't know I had for the past 15 years.

I mean, You just can't you can go wrong. And you know what, I've seen a lot more of that recently, more from the allopathic side where they're critiquing people in the wellness space for taking that deeper dive to figure things out.

Even with something like the full body MRIs. Oh, you shouldn't do that, why are you doing that? Even wearing wearables. They're saying that you're creating health anxiety, which I have seen that.

I haven't seen people create health anxieties from over doing it, looking at things a little bit too much. But at the same time, the only way that you can actually catch things is by measuring, right?

You have to be able to look at stuff. It has to data-driven. You know, for something like this, you have go inside and

see what the heck is going on. Yeah, I mean, of course I want a better way, but in the meantime, even for the price, I can do at least four surgeries for the price of one round of IVF.

So for me, it was just easy. I'm like, yeah, why wouldn't I? I mean, IV is also invasive. To just do an egg retrieval, you do have to go under. They put this giant needle through your uterus.

And it's still a lot. It's very invasive, and there's a on the line for that. You just really have the kind of pick and choose. What your lot is, but I don't I think what should come with a lot of these clinics is the informed consent aspect of it.

You know, like if I went into my clinic, it was like there's a chance you have endometriosis, you can get a surgery and you. Have a 40 to 70 percent chance of getting pregnant naturally within a year.

Well, OK. And then they're like, or we can just do IVF and not see if you have endo and just try to see. If you get pregnant. I mean, that's that the conversation that should be happening.

But I was never given that option. No one ever talked to you about potential endometriosis besides that one doctor. No, I've never in the amount of gynecologist that I have been to, and my mom has had a history of severe endometriosis.

So it's always been in my chart. It's been something that's known and I never been told that. I haven't. And I think it is just because I don't have pain.

Which I am very lucky. Obviously my doctor thinks it because of my lifestyle and focus a lot on my hormones and my metabolic health, which all impacts endometriosis.

You know, it's a very estrogenic disease. And like, you know how many things that we surround ourselves with that are estrogen from like the endocrine synthetic fragrance, endocrine disruptors, the type of water we drink, so.

Yeah, no one ever told me it was crazy. And you know, take it in consideration when we're talking about like the IVF market and those physicians, you look at some of these stats like only 37.5% of US assisted reproductive therapy cycles result into actual live deliveries.

This was in 2022. Yeah. Taking that number in consideration, 37.5%, that's out of 100 people, only 37 actually had a baby going through that process. Now, taking into consideration what you're saying, that there's potentially a lot of other underlining causes, how much money is truly being wasted in a lotta this IVF treatment when other things have to be corrected before you start putting these embryos into, I mean, it's like, I, mean the thing is, is people are willing to spend the money if they can get a baby, right?

I. A life to have your own child is obviously can't put a price on that, you know? And I think that's a big part of. this industry is that they know that.

That's why it's such a high price point. But what's more, I think, negligent to me is, that we're telling women who have things like PCOS, which in IVF is not a treatment for PCOs.

IVS can potentially be one of the most dangerous things that someone with PCO does, because you can overstimulate the ovaries and it can cause ovarian hyperstimulation syndrome, And now it's causing damage.

So it is actually very dangerous. But yet women are being told, oh, you have PCOS. You have to do IVF. When we have so much research to suggest that when we actually focus on metabolic health of the type of syndrome that that's what PCS is, we focus a metabolic.

We focus. On proper diet and tailored nutrition and proper supplements then and we can restore ovulation. She can get pregnant just as much as anyone without PCOS.

It's not an issue there. They don't make money from that. I don' make mone from outsourcing you to a dietician and, you know, watching you for six months and making sure everything's great.

The same thing with male factor. Men make new sperm every 72 days. And yet most men that walk in and they say, Oh, you have male factor issues. You have no sperm.

And now you're stuck doing IVF because they never taught. They never figured out why he has no Sperm. Is it hormonal? Is that is does he have inflammation present?

Did you guys do a GI map to see what's going on? Does he an autoimmune condition? Or is it something structural? I mean, there was another I think they found like 70 percent of men that struggle with infertility end up having something called varicocele, which is inflammation in a lot of the tubes that end bringing the sperm out.

And that alone can cause damage. It can cost low sperm numbers and a simple surgery can restore fertility. Why is this not happening before IVF is even on the table?

You know, like that's that really my question. Like, why aren't we doing these things before? You think about it doesn't make that model money. And it's unfortunate.

You. Know, obviously, I told you before backstage that, you know I've gone through my own processes myself, too. In early on, i did bodybuilding. when I was in my early 20s, and I taking all kinds of supplements, bodybuilding supplements and recreational stuff.

And I messed myself up. Yeah. Even after years of being in the functional medicine space and knowing some of the things that I needed to do, I had to go see a urologist.

The purpose of that was to get myself fertile again. I remember the first urologist I went to, gave him a whole list of all of these different supplements that i was taking for fertility.

They threw it right into the trash. None of this stuff works. And you know, I've already been in the functional medicine space since I was 20 years old.

I'm almost 40 now. So just thinking about it, to myself it's like, okay, this is where I walk out. You know? I did it in a very polite way. But then I found a urologist who actually took a lot of these different steps.

Actually, Dr. Ramasamy at the University of Miami who holds a the actual clinical research in male fertility, and he was just an open-minded individual.

When he found out what we did at our functional medicine clinic, like the IVs and stuff, he actually brought it up to me. He says, oh, I'm actually doing a study to see how this works on male I was like, wow, this guy's talking my language.

But he started doing a lot of those things, like what you mentioned, looking at the structure, right? Looking at these other different components, utilizing other tools when they take a deep dive and looking the male hormones, your FSH, LH, all of these different levels.

And then he put me on a few different supplements, on few medications, ACG, Clomid, in order to get my fertility up. And everything that he did, he was very supportive of the different nutraceuticals that I was taking, and he got me where I needed to be.

But again, I went to that first urologist, And I think there's more of those out there than what there is, the ones that actually want to take that further deep dive and try to figure out what the heck is actually happening.

Yeah, I mean it's only because you again are informed and it"s like yeah sad because we quite literally have to be so Educated and researched to just get the basics down, you know So that second opinion that you got you went

through this procedure, right?

You got the actual surgery done So now once you get to surgery then you found out these different things that we have going on What was the journey at that point?

Yeah, so there's, I've never worked in the NatPro space ever. So restorative reproductive medicine, their whole goal is to do exactly that. How do we restore fertility?

We have to find out why fertility is, you know, not taking precedence in body, right? Because obviously, since the beginning of time, whether you want children or you don't, our bodies quite literally have the organs to reproduce.

And we've been able to reproduce during all different types of famine and war and, you know, way worse scenarios than we'd been in in 2026, so their research is, I mean, they're more Catholic based, which I found out after the fact.

So they have more like ethical issues with IVF. and that's why a lot of the research has gone towards how can we find the root cause so we don't have to resort to IVF.

So it's almost like their religious background has almost benefited them into getting more science-based. So there's they've been able to find that in a lot of cases.

It's endometriosis or it's something like endomitritis, which is just simply like an infection in the uterus that can fail implantation, even with IVF.

And unfortunately, a lots of women who do IVS end up finding after their third, fourth, fifth transfer that they had endomyotritis the entire time. Wow.

And a simple round of antibiotics takes it out. So it's such a.

Surgery Reveals the Root Causes

Simple thing, right? It's not a huge surgery. It' a little biopsy and it' such. A simple thing. And yet we're not even doing it to preserve these embryos.

We're doing. To preserve, you know, I think that's a big issue. That I just like had with the whole industry, but. So now, when you work with NatPro, their goal is to not just do your surgery and be like, bye-bye.

So obviously, I'm working with my doctor. I am very well-informed. And I know the steps I want to take. For us, we take it in three-month increments. Because statistically, it should take around three months.

If you have a 20% chance of getting pregnant every month, now you've over a 50% in 3 months, so that's a pretty high parameter. They usually take every three month.

I work with somebody called a Creighton method, like a practitioner. And essentially it's this big, old school chart. I think they have an app now, but they teach you how to track your cervical mucus, because a lot of people don't know your Cervical Mucus is what literally filters sperm and helps bring the healthy sperm pretty much where it needs to go.

So this is obviously something that's bypassed in the IVF process because they go straight. They take the egg and they take this sperm and. They kind of do what they want to do.

Yeah. So how do you track that mucus? How is that? Yeah, so it's a whole kit or something. It's quite literally you could do it. Well, you can't do but your wife can do like you.

Could pretty much do a like right now. But essentially, it' just like wiping with a toilet paper and then you see

whatever, discharge that you have. And then depending on how watery or clear or stretchy it is, is how fertile you are.

that day okay and it works when you're ovulating i would say it's going to be the most egg white it''s going be very stretchy it going the be most elastic and that's what going not only help filter the sperm but bring it very like slippery it gonna help bring where it needs to go this is something that They found through so much research that the more fertile mucus you have leading up to ovulation, the healthier, more robust fertility that you.

I mean, they have everything down to like a science of like giving number scores. So let me ask you this. Are there women that they're hitting that that time when they are ovulating where they don't have the mucous the way it should be?

So then you probably wouldn't be ovulating. So that's how they're able to track. Usually when you ovulate, hormones go up, estrogen rises, all the things, your cervix will release, or wherever will, release the mucus.

That's going to signal, obviously, you feel a sensation. It's quite literally what is going help bring the sperm towards ovulation. When they see that that isn't present, most of the time, you're not actually ovulating.

So this is why it's so crucial. And it is 100 percent free to chart. What are they typically doing at that point? Are they like focused on hormones at the point to try to regulate them?

Yeah, optimizing. They're 100% use technology. they use medication. I mean, for a lot of people, if you are not ovulating, they're going to see, do you have PCOS?

And that's why you aren't ovulated. Do you ovulate sooner? Do ovulation actually later? After surgery, before surgery actually my cycles were I guess because of the stress of like going into surgery because I've never gone into one before.

My cycles are all over the place. Some months I was even ovulating like really late so it wasn't like day 14 like how people mostly think. So I'm like, just with that, I could be off, you know, if we try on day 14, but I have no, mucous present, then it's useless for me.

Right. I don't have to stress about it. Where now after my surgery, i've been way more regular and they're able to see. And that's actually through my charting.

They were they were just from that no hormones at all. they Were able To see that my progesterone wasn't high enough that it needed to be in my luteal phase.

They have, like, their own formulas and stuff. They all have their formulas. So, you know, when we start comparing, um, an ovulation test, a urine ovulating test.

How does that charting of the mucus compare to an actual urine test? So a lot of these, like if I have like a mirror and a neato, those are pretty accurate because you're getting your actual hormones that day and you can kind of see in real time when you use something like an aura ring or like your temperature, Those are going to be predictive through, you know, kind in general, when you would be getting your period.

So when I was just using my basal temperature, it wasn't as accurate as I. Was when. I Was using. My mirror or my needle and like actually seeing my hormones.

If you don't want to use any of that, like my cervical mucus charting is like the most accurate that you're going to get. And it's pretty much a one to one because that day that.

You were ovulating your body is releasing hormone. It is. Releasing cervical. Mucus. it wants you to. Get pregnant that Day. So it's going to give you all of the signs that it needs.

So when you see that mucus and you that's starting to get more stretchy, more slippery, and more watery even, then you know, okay, it is ready to start trying.

You know my body is quite literally telling me, you don't have to use all these devices. And after a few months you kind of really get to know what that is.

Because you cannot get pregnant if there is no cervical mucous present because there's nothing to Help the sperm talk about really being able to understand your body.

That gives you the ability. And I learned this at like 32 years old, which is like, what are we doing in sex ed in like sixth grade? Like what? Are we learning, you know?

That's um, that's amazing that there's all of these different things that You can really focus on that are not being taught. They're not not even in the traditional medical system You know you had to go to like a whole different Alternative type of treatment to even figure this out.

Yeah, and it's really unfortunate cuz I was like wondering why this isn't more popular and obviously because I You know, IVF isn't on the table for them.

It already turns people off to like feeling like, you know I've never felt like their beliefs on anything were pushing me against it. Like if I want to go and do IV tomorrow, like nobody's going to, put a gun to my head and be like you can't, it's like we do what we got to do and whatever.

But for me, I'm really dedicated to wanting to find out like why and what I need to. what's going to help and, you know, do that extra testing like I'm willing to do.

That like that's part of my informed consent. And I know that it's it going. To take longer for me and that I am OK with that, like, I've prepared for that.

It takes longer, to figure out your health issues. Um, so, but I think for a lot of people, they don't even know this world exists. And obviously, there's a lots of like lobbying and silencing that happens in the industry.

I mean, IVF and RM, There isn't an all of comparison studies out there because I they just don' want it out ther. You know, like it's just like Big Pharma has its, you know weird conspiracies and, um, They try to hide things.

I mean, it's the same thing in the fertility space. IVF dominates the Fertility Space. There's no other. What else is out there? And it is growing and growing every year.

Year after year, It's growing substantially. In 2024, we exceeded the most IVS babies ever, which was 100,000 IVs babies in a single year and that was 2024. And I can imagine now in 2026, way more than that.

Yeah. So okay, so now you've gone through the charting. And where are you at now? What's the next step? Yeah, for us now, it's really about making sure that sperm stays really strong.

So we're always doing like routine sperm analysis to make sure Because again, every 72 days sperm is changing. So we want to make sure it stays strong.

They give you really just amazing supplements. I mean, we take one or my husband takes one called swim club. And if you've heard of it, they're amazing.

It comes in like a multi pack. Not sponsored. We love them. It's like a multi-pack, so it has like the omegas. It has all these incredible amino acids.

And I remember running it by my doctors like, this is amazing. Like I might actually recommend this to my clients. Then we use, and it's interesting actually, because the amount of sperm analysis that we've done, they've been so

different almost every single time.

more stress, less stress. You know, my husband this past year, because, you know, infertility takes so much from you. We both ended up gaining so. Much weight.

And then now this year we're like, OK, we' re not going to let it destroy us. we are going. To start getting back into shape. So we've both like my. Husband's lost maybe like twenty five pounds and he's six, four big dude.

so the fact that he even had like 25, 30 pounds to lose, I'm like where because he is like tall basketball player. and same thing with me like but we have seen his Sperm analysis changed so much and get better some some months worse.

So it's just like keeping that consistency and understanding that, you know, fertility isn't always this linear thing. I mean, if your husband's going through stress or he's drinking a little bit more, a couple a, couple months because it summertime or you guys went on a vacation.

All of those things are going to impact sperm. So my clinic really pays attention to that. We're also very aware of doing, you know, autoimmune panels, antiphospholipid panels reoccurring miscarriage panels.

I mean, there's so many rules in the IVF and fertility space. It's like a lot of it involves failing first. or when you have three miscarriages, then we'll do testing.

It's like this is so much of like that, which is going on. I remember when I went to my OBGYN the first time, she goes, oh, until you. Have three. Miscarriages like we can't help you like.

Why not? Why is that a rule? You know, why would a woman and then we tell women like, you know stress is why you're not getting pregnant. It's like you are making me go through three miscarriages.

Like obviously I'm stressed. So there's just like a lot of rules in the traditional model where I feel like with my clinic, we're really just thinking about what makes the most sense logically for where we are, right?

Although I don't have a history of miscarriage because I've never been pregnant before, it's still worth like if I do get pregnant, I want to make sure I cross those boxes that it wouldn't be this or it would be that.

So we're we were way more proactive. And again, like keeping up with the sperm analysis and even progesterone suppositories, because i've always been told just take it orally.

But we found out that my body actually responds better to the suppositor version, which I was only ever given oraly. So there's just like little things that I'm learning about myself and about my fertility and why things maybe weren't working before.

I mean having a blocked tube and assist blocking my cervix will do it, but yeah. The block tube, the tubal factors account for about 10% of the reproductive therapy cycles.

So when it comes to that, what would you say is that you feel like that's a big gap in the fertility space? Yeah, so something that I learned, I actually learned this after I came out of surgery.

So one of my tubes was 95% blocked, which is severe. It increases your risks of ectopic. You could lose your tube. Also something called hydrosulfanes, Which means that that tube can get infected and then leak into your uterus and essentially cause infection and failed implantation.

When I got out surgery and I was kind of telling people, Yeah, he unblocked my tube. It was 95% blocked. They're like, how did you get him to un-block your tube?

I'm like. What do you mean? How did I get here? Hey, I don't know. I didn't even know I had a blocked tube like he

went in there. He opened it. And now I have two fully functioning tubes.

and this idea of like getting him. To open my two was really interesting to me because I like what do. You mean and I and. This is where I kind of learned there's a lot of.

Well, let's backtrack. With IVF, you don't need fallopian tubes. You bypass the fallopient tubes and NatPros are considered the plastic surgeons of the uterus.

Tracking Ovulation and Cervical Mucus

So their technology and research is very minimally invasive and they are able to go in because again, we're restoring fertility. It would be counterproductive to remove the Fallopian tube because obviously they're essential for fertility So they have advanced technology to go in there.

I mean, he used like a very thin copper wire and very gently remove the debris from my fallopian tube, preserving my Fallopian Tube and now they're functioning.

Most OBGYNs that are doing the surgery or even endometriosis specialists that Are doing this surgery, or if you go to an IVF clinic and they outsource you to somebody that they know, A lot of the time, they'll just remove the tube, especially because if you already know you're going to do IVF, that too becomes useless to them.

To them, right? I mean, I'm not a fan of removing organs, specially if they can be saved. But unfortunately, a lot women aren't told or they're not given the informed consent that that doctor just maybe doesn't have the tools to open up the fallopian tube.

So they are just going remove it. And a lot of women go into the surgery, not knowing that their tube is blocked and then waking up and their two is gone.

So that is only leaving you with one option. And that's not an informed decision. Is somebody who is trained in this and being like, hey, if this is a situation, If you go in and you find that my tube is blocked, I'd rather you leave it there if it's not an emergency, right?

Like an ectopic pregnancy would be an Emergency, obviously. But if It's just blocked like how mine was, it might be useful to pause. You know, get sewn up back up again and go to a surgeon that can actually restore your fertility and open up that tube, you know.

Especially if it's not, causing extreme damage. I mean, they're even trained in the hydrosulfing, which is the infected tubal repair. You. Know, so it.

Is just a different level that we're just not. It's. Not talked about enough in. The IVF space, because again, not that. We have this written on paper, but there is a little bit of an incentivization to just remove the tube if.

it is not necessarily quote unquote needed. Right, right. You know, one of the things that I want to talk about, you mentioned it earlier about stress, someone who goes through so many different procedures, gets the news that you got.

It's a level of stress that doesn't make things easier. And that's not just for you, but that also for your husband. So how did you guys manage throughout the process, and you're still going through the processes, how do you manage that stress level?

You know, so there's no way to deal with infertility grief, it's just such a unique type of grief. I mean, I think it has been compared to like a cancer diagnosis with how severe infertility can be.

You can't plan your future because you don't know what it looks like. And then for a lot of people, when you do get married, you have this idea of what your family is going to look like, and now you're being told that might not even

happen at all, right?

So it is really difficult. I'm very grateful that we both have our things that. We do like our health habits, and that keeps us very grounded. But I think mentally, we've always committed to just never getting desperate, like as much as we want to start a family and or like, you know, grow our family because we already are a.

Family, as long as you want. To grow. Our family, I. Think we always remind ourselves that when we get desperate. we don't make good decisions. And that's for anything in life.

truly like a career, getting wanting to get married, you know, it's never a good plan. And we don't want to make that compromise, especially when it comes to building our family.

So I think for us, its really blocking out the noise and understanding that we are already complete as us. Like when I made that commitment to my husband, It was like, Its you and I, this is what it is.

and we always remind ourselves that if we dont have this outcome that, we dreamed of or we planned for, Like, we're still enough and we are still OK. And we were totally fine being like the rich auntie and uncle.

You know, that's fine with us. Amen. So I think also when you when when become desperate, I never want to be like, this was my only choice and feel like there was resentment with that or, you know.

No one's putting a gun to my head and saying you have to. do this, but of course, you know, us as humans, we have our desires and the things that we want.

And although I want this I wanna do it in a way that feels aligned with my values and what I truly believe and if it takes a little bit more time, I'm okay with that.

Like I don't know the timeline, But I think that's really helped us kind of be able to just breathe out and be like, okay, if this also doesn't work out, We'll be fine.

It's not the end of the world. Like I know so many people who don't have children and they're not like these miserable little ogres running around, you know, they are completely happy, healthy, purposeful people.

And I think that's what, I'm not going to be like, oh, we sit and meditate, like infertility grief is tough, but I it's the mindset shift that you have to have because when you get desperate, anyone can dangle that carrot in front of your face and you're just going take it.

I'm very faith driven. So I always tell myself it's God's plan. Yeah, you know, i'm gonna put in the work and no one wants to hear that that is god's but we really don't know you don' know and you Know what?

What I would say is like we're not going to neglect that you Have don"t have to put into work like you do have To put it in work. You have do the research you have figure out what other type of um, You know modalities or treatments are out there like You, know when I say it's God's plan.

And this is what I tell people is like, God put a lot of these different technologies and these experts that you've come across here on this earth for a reason.

We have to do our part and figure it out. You know? Yeah. But at the same time, you don't want to rush it to a certain point where it creates this higher level of stress, where now it becomes more difficult to just even live your day to day life.

Yeah, and I also think just people being honest with themselves. I mean, I see so many people like I, you know, someone DMed me the other day about how their husband has no sperm.

And yet they're confused by they are not getting pregnant in their IVF clinic. You know they they aren't getting any

embryos from their I. V. F. clinic and their clinic didn't mention anything about the sperm. I'm like, You don't have unexplained infertility.

Like you don' have an explained infertilty. you have clear male factor issues like why aren' t they addressing that? And. It's just interesting that people don't make that connection They're waiting for their doctor to say and it's the same thing with like obesity I mean, there's so many couples I see that have obvious obesity problems and they're like I don' understand why we're not getting pregnant because their doctors not saying anything about it We also have to be honest with ourselves like Obesity does impact fertility.

We know that a BMI over 30 lowers your odds of getting pregnancy naturally and through IVF We we understand this, you know being under muscled is huge for, you know, metabolic health that impacts all of these different things that impact fertility.

It's another symptom. So we're not looking at fertility as a symptom of, underlying issues at all. For some reason, we are completely disconnected. And I think again, it's like going back to one of the initial things we spoke about of like allopathic medicine is so segmented that people think fertility is just the uterus.

when in reality your stress impacts fertility, your environment, obviously your fallopian tubes and structural things, but also your metabolic health, you're liver health.

Your minerals deficiencies, all of that impacts it. And we don't think about that. So I think also people just having to be honest with themselves. If you know you are drinking every weekend, even though it doesn't feel like a lot, And you know, maybe you don't exercise as much as you should, or you're not really concerned about ingredients and you saw your body every day with perfumes and synthetic things and wash your laundry with toxic ingredients, and your not getting pregnant and struggling with infertility.

Maybe we need to go back to the drawing board and not wait for the doctor to just be like, yeah, it's unexplained. You need IVF. Like maybe we do need.

To consider that the things that we maybe push to decide is unimportant are actually important. Lifestyle adjustments. Yeah, which they're not addressing, you know, like they are not.

I don't know. Doctors are. Not addressing that. And in all reality, if you really want to make this work, You got to give it 110 percent. Mm hmm. Can't think anything is not important, right?

It's all it all matters. Agree. Absolutely. And those lifestyle. I mean, just for your overall health, right? That like your lifestyle habits. What the effect that it has on how your genes express themselves.

Yeah. You know, we already know in the functional medicine space that the root cause of disease formation is from environmental toxins. That's what it is.

Right. So yeah, I agree with you. It's people have to put in their work. They have do take it serious. That's a problem also with our population too. There's people that just want that magic pill Yeah, you know they do want to skip and just bypass everything and they want To continue to live the current lifestyle that they live and it's unfortunate.

I've met people I met family members like that. You know, I got family member set Are suffering from you? Know hypertension. Yeah and instead of making lifestyle changes this is well I'd rather just take the pill and keep on living and eating whatever I want and then for me it Yeah, and we can't think that this isn't happening in the fertility space, even more so, like, as much as people want to be skinny and all the things.

And that's why we have like GLP ones and things like you don't. Think people don' have that same type of desperation when it comes to wanting a baby. I mean, of course, people.

Don't want. To change their lifestyle for everything. You know, they want I. Mean, I get comments all. The time of

people being like I don. Have time to like worry about my blood sugar or, you know.

But I just want a. Baby. It's like, OK, well, all that impacts your child's gene expression. It impacts. Your pregnancy and your pregnancy outcomes like I don't want to just get pregnant.

I want. To have the healthiest pregnancy. And the. Healthiest offspring, too. You know, it's not just about like the means to the, you know. The means of the ends.

Like I. Want everything to be healthy about it as much as I can control, right? Obviously, there's always something you can't, but. Yeah. How far would you go to actually have a baby?

Would you also if needed, do the secrecy part of it? No, I think we're just like, if this is it like for us, then it's like that's it. I mean, maybe I just it hasn't been something that.

I mean, I'm 32, so it's like I've not like at that point yet where I like, OK, we got to throw in the towel. Yeah, like. I still feel fairly young. And I just had one of my close friends give birth naturally or have a baby naturally at 40. So I don't like There's a lot of talks about that right now.

I know there was a sort of a magazine article, like it was almost like 10 different celebrities that did it all natural. And they're like in the mid 40s and they say the the 40's now is more of like almost what it.

Was like the 20s. Yeah, I mean, we are just like we have so much more technology. We're so. Much healthier. People are living longer. people are. Living longer, way more supplements than we've ever had before.

Yeah. I mean, I'm not shocked. And like, again, all my friends that are having babies after 35 are so healthy, like they're just very healthy people. So, yeah, for us, everyone has their, you know, their cutoff.

For some people, it's as low as mine, which feels like we're not doing IVF and we don't feel comfortable with it. But for some, people it is like that they are going to stop at an egg donor, they don t want to do an eggs donor.

Some people are like I am going stop with surrogacy. For some people, even after surrogacy, they're like, I don't want to do adoption, right?

Managing Stress and Staying Grounded

Like everyone's going to have you have to make like your line in the sand for some. People will go. They'll take it all the way where I feel like adoption is like the last because then it's like not your DNA.

It's something you're adopting somebody. That's kind of how I. Feel like for me, it. I'm not saying that I want that, but I I what my DNA? Yeah, yeah, and that's like why, you know, IVF exists and surrogacy exists.

And we have like those options. But yeah. I mean, for us, it's just like this is our line. Our bar feels a little bit lower than most. but I just you get to a point where you're like, I don't feel like I even qualify for this type of.

Procedure or treatment because I feel like it's reserved for particular type of person with like a particular set of issues that they have, you know, like if I didn't have tubes, this would be a different conversation.

You know. Right. So for me and where we're at and that really bothers people for some reason, I'm like, it' literally me. It's my family and it has no bearing on your soul.

Like the sun will rise again tomorrow. So it's always confusing to me that it bothers people so much. But I think the main reason it bother people is because people do feel like they don't have options.

They want something so, so so badly, which I understand. It doesn't mean I want it less than somebody else. Is just we all have a different line in the sand.

You know, like some people are OK with murder. Others aren't, you know. Like, who am I? So, it just, we have different moral standings. We all different ways that we want to take it.

Yeah, I just feel like it's has no bearing on anybody else's soul. But for me, my message isn't to like to take this access away from people like I don't want to Take IVF away From people or any of it.

My goal is to help people think about, sure, maybe I design VF work. Sure, in a lot of cases, but is it needed in all of these cases that we currently have?

Highly doubt it, highly doubt. I mean, we see all the metabolic issues. There was like, I think it said like 30 percent of people go into IVF with metabolic conditions.

So imagine we were actually addressing those. Right. Would we even need it? I don't know. You can pass on a lot of it. Yeah, so there's a lot. I think we can take that number down a law and we.

Can really reserve this type of miraculous treatment for those who truly like I have friends who have genetic issues where if they have a specific gender, they.

Have a higher chance of dying in childhood. So IVF is like the perfect solution for somebody like that. And I'm grateful that we have that technology.

You know, So yeah, I. Think we just need more regulation around it, more informed consent. We need. More options for people, you know. You know, you're a fertility story.

It's still being written. Yeah. Now, where are you at right now? I mean, we're just kind of figuring it out. I've already learned so much the past. month, really.

And I I've just learned again, like a lot about when I actually ovulate and what his sperm is actually doing and if it's going in the right trajectory or if.

It's not. I think this moment in time has been so crucial for finally understanding my body after, you know, 15 plus years. Um, I. Think it took me like three months to even process that I had endometriosis at all, because again like no pain.

So yeah, just like working with my doctor and it's just such a collaborative effort, which I feel like a lot of the time is rare in, you know, the medical space in general, but I truly feel I'm in the hands of somebody who cannot wait to watch me succeed.

Which is just incredible because I've never been able to feel that way about any doctor or any medical practice. And yeah, I just feel really good. So we're kind of just like open ended and seeing how everything unfolds and we have so much good information right now.

My doctor still feels really confident, which is great. But yeah. That's kind. Of where we are. Regardless how this ends the story as of right. Now, what has this journey forced you to become?

Oh, gosh. I mean, I have to be so secure with myself who I am. My purpose is like as a woman, and I had to redefine what I thought that would be, you know, because I think so many women now in society are being pressured to think that, like, your only purpose as the woman is to procreate.

And that's like all we're good for and like screw your career, you're never going to be more valuable as you are if you were a mother and I just think women can be fertile in so many different ways in their life and women have so.

Many different types of purposes in there life outside of motherhood I mean even in my friend group I'm considered like mean it's a joke but it like I like the meme all.

of the group, you know, so it's like I'm always, very nurturing to the people around me. And I've been able to just be a mother in so many different ways in my life.

I think women really need to explore that more, whether they want to have children or they don't or their struggling to write. There's just so. Many different avenues to.

Explore your fertility and not just in the like narrow sense of. The term of fertile. So I think for me, it's really expanded who I am as a person, what my purpose is.

And, you know, a lot of my friends have just said to me like, obviously, I hate you going through infertility, but also you are like the perfect person to just be so outspoken about it, because I know you and I were talking a little bit about I'm like this is the Perfect Time for Me to talk about going Through Infertility because i know so many women that only talk About it once they're holding their babies.

And I can't imagine if I was sitting here being like, oh, I would never do IVF and I have, you know, my three children in front of me. People would be like.

Yeah, of course not, because you have your children. It's easy to say. But I'm here making hard decisions in the moment in The Messy Middle, being very secure in myself, not knowing the outcome, Not knowing how my story will end.

And. I just want to give women the confidence to just not give away their bodily autonomy if it doesn't feel right for them, right? Like if that feels good for you and you feel like you have all the information and this feels right, that's great.

But for me, I'm never gonna say this was my only option. I mean, who knows? One day, like I might be told like, yeah, IVF is your only options, but I still have a choice.

And that what's important. That's really what I want women to understand is that we don't need to sacrifice ourselves or we need fight harder or be seen as this warrior and that we want it so bad that I would do anything like you don't need to, you know, do all of this to prove that you want to be a mom or that You're more deserving to Be a mother, You know?

And I, I get comments like that all the time. Like, guess you Don't want It bad enough. I'm like, what do I need To do? Like sprawl out in the middle of the street or like tie myself to a tree like, you know, like how am I supposed to show that?

Like, of course, it's something that I want, but I also have a moral high ground that. I this is these are my values. This is what's important to me. And I.

Also don't want to lose myself in. The process, I mean, IVF is extremely difficult and to say that women don' end up sometimes worse off. and even when they get that baby, they have so much resentment with the process and they're like I wish I didn't have to do this.

But I'm so happy I have my baby and then they struggle and you know, like there's so much that comes out of it. You know it infertility doesn't just get cured.

The idea of process is rough on women. It's horrible. I mean the hormone. Yeah. Here to find the women? Yeah, the hormones, waiting, poking and prod. there's so much that you're like, I'm taking into consideration.

But yeah, for me, it's I am actually very grateful for my journey. I m glad that I've been able to learn as much as I have about it. m grateful that i can help other women.

i get DMs every day of women finally having the confidence to explore their fertility more and even saying no to their clinic. Actually, m going to wait.

That is so powerful to say like Hey, I'm willing to take a step back to like really figure this out, you know, and I want the next transfer to work. So I am going to do this, this and this.

And take it a little bit more time instead of going from transfer. To transfer like that's informed consent. That's powerful. Right. I. Want women to have that opportunity and it's this is as vulnerable as it is for me to talk about it now, not knowing my outcome.

It's the most important time for. Me to. Talk about. Absolutely. You know. So right now there's a big movement that's happening the maha movement make america healthy again.

I want to hear your thoughts about the movement Yeah, I mean, i think it was a good start for sure I, mean there is just you know, like we opened up a pandora's box And there are just so many elements that need to be addressed.

Oh, yeah And it feels almost like a tsunami wave of like, wow, there's actually so much that we need to do. And, you know, getting rid of dyes was just barely scratching the surface and you're just like oh my God, There's so many places that need more regulation and.

We need to really open this up and that up. And I was telling you, I just had a roundtable with Attorney General Paxton in Texas, and there was maybe like 15 of us.

It was just crazy because we all had something completely different that we wanted to address. And it sometimes just feels so overwhelming. I mean, there's just a lot of people don't realize, like with politics, they're just so many things at play and so.

Many lobbyists and money and things in other directions like it can feel very defeating, I think sometimes we want things to be done and you realize actually how difficult it is to do and that it would take probably years of presidents who are all.

mentally aligned and like dedicated to this movement to actually make a change. Right. Like it's not going to take like one term, you know, with like RFK involved.

It's going take multiple terms of multiple presidents with building multiple teams that are committed to the story and what we want to do. I agree. it is not gonna happen right now.

And we're already seeing like how long I mean, it takes long to just implement policy and do like you can just like sign off on things. And of course, there's just like so much lobbying involved, like you want one thing and then there is someone arguing like, no, we actually need it for this and blah, blah.

So. Yeah, I mean, like the sentiment, and I think it's great. I just think there's so much that needs to be done. And I'm waiting to see what the next, you know, 10 years kind of looks like.

and hopefully it keeps going in a positive trajectory. But, obviously, it continues with us speaking out and, continuing to just keep our foot on their throats, essentially.

It allows us to kind be facing in the right direction right now.

MAHA Movement and Closing Reflections

Yeah. Well, now we have to actually like travel in that direction. Yeah, we have to make sure that this becomes a truly bipartisan issue, that whether we a Democrat in office or Republican in the office, they still care about the health of Americans, right?

That's really what it comes down to, because I think everyone's finding out, which was bad, but I also think good, it shows that it doesn't matter if there's a Republican or Democrat, these lobbying organizations Like they're coming for anybody that's against them.

It doesn't matter who you are. Yeah. So I think that what people are learning now about just like politics in general is that it looks like it's, you know, it almost like a two-way mirror.

Like it, looks it only one side, but in reality they are like, everyone can catch these hands. I'm going to keep what I want to. No, that is true. All right, we're going to have a little fun here.

We've got our conversation cards by Stephen Barlett, the diary of a CEO. Oh, nice. So you'll grab that. Take that sleeve off and you grab two random cards out of there.

OK. Let's do this one. They're for you. I got to be for. You OK? Do this and then you'll just read it out loud and answer it. OK, fun. It's like, who is your crush?

What are you missing most in your life? Oh, my God. I don't know. Honestly, lately. I know, I feel like my cup's actually pretty filled right now, which is rare.

I think mostly because I have a trip planned. We usually wouldn't have our trip. Oh, where are you going? I'm going to Albania, like literally next week.

So I usually don't even have trip plans. All is well in the world. Like I felt good about life. Um, have really good friendships. No, if I missing really anything, honestly, feel very like good right know where I am at.

Maybe if my trip was a little longer than me. Only going like nine days, it's like ugh. Nine days in Europe is like nothing. And then what is the unobvious thing that you struggle with?

Oh, that's really good, un-ob-vious. That's hard, because I feel like I'm such an open book. So like my struggles are very obvious most of the time, especially I think when you go through infertility, its like duh.

One thing I struggle is that it is un obvious. I didn't expect that to be so hard. Let's see. Sometimes I think I don't I really get like imposter syndrome, but sometimes like I forget how far I've come And I always have to remind myself my husband is really good at this but I I Downplay my struggles a lot.

I downplay how much I know I? down play how impactful I have been I mean I get I And I'm sure you do too. Like I just get DMs every single day. I mean, sometimes people send me their pregnancy announcements and they're like, thank you.

And i'm like I don't even know you like this is crazy. You know, that's very rewarding by the way. No, it's like the reason I do what I. Do and not that I am saying like i am, you know some baby whisper or anything, but it.

People what that tells me is that people are taking what i. Am saying and. They're applying it and their seeing results. Which is exactly how I applied so many things in my own life.

You know, just taking things and applying it. But I think I really downplay what being an influencer is. I mean, now influencers almost become like a derogatory term, like people like, oh, you're just an influence or like oh whatever.

So cute. Like whatever But to be able to influence people in a positive way is the most impactful thing that you can do. And yeah, I think I struggle with that more than I would like to admit that I just don't think.

I'm making an impact or I don' think, you know, really getting the message across or, like, I don't know if I like sometimes you were like, you're my favorite creator.

I'm like how is that possible? There's like a million, it's just really crazy. So I wouldn't really call it imposter syndrome because I know I am smart and I really great at making things sound very easy for people to comprehend.

But I think sometimes not realizing like I have 250,000 followers, like what that actually means and what looks like

and how I'm helping people in their day to day.

I mean, it's very hard for me to understand. Sometimes I am like, how am I even on a podcast like this podcast right now? You know, I don't really feel Like my message has worth because it feels so simple.

Like we kind of were talking about, like everyone kind so many people struggle with infertility. So it's not that my story is more special, but I forget sometimes I'm I have the balls to actually talk about it, you know, and I want to be able to give people that confidence.

But sometimes, I don't always have that. And I definitely struggle at that sometimes. I'm happy that you brought that up because someone out there might kind of feel the same way and You've done a heck of a job to really get your story out There and it's not just putting your sorry out.

There, but the way you put your store out right you have a creative touch to Getting that message out to the people where they can actually absorb it.

They can recognize it and they feel it right is that feeling it like You know, when you watch a movie, right, there's a lot that goes behind it for people to be able to feel that movie.

Regardless if it's, say, you know sad story or story, whatever it is, they put a. Lot of work into it. So you're doing a heck of a job doing that. Thank you.

If there is one person that you could give a shout out to, that's not a family member. It could be someone in the industry who would be that one. Person.

We had my doctor, Dr. Gavin put off. He's. I mean, he's changed my life. He's the first doctor that's ever listened to me. That's been able to kind of have like figure out a root cause of our infertility, which it seems like, right?

He is the person to diagnose me with a disease that I've been having for 15 years. I Absolutely incredible. I wish I could clone him. Like, truly, I was every doctor was like this because he genuinely cares.

His team is incredible and he's just a wealth of knowledge. He's so like straight to the point, honest about these are your chances. You know, this is the stats for this.

These are, you know the percentage of this and that's I'm a very like I need stats. For things like, I needed to know what my chances are. I mean, he told me, You have a 95 percent chance of having endometriosis.

So I'll do the surgery, and he was right. It was 100 percent. chance that I had endometriosis. So very data-driven, always keeping up with the newest research, also very open-minded, which you don't really get with doctors.

I'll introduce him to something, whether it's a new supplement or anything. And he's like, yeah, actually, let me look into this. Let me research this, I can't even tell you how many doctors I've been to, or I'd be taking a supplement, like oh, where'd you get this TikTok?

So dismissive and it's like I want a doctor that is keeping up with the data and open minded, not just like, Oh, don't listen to these tick talkers or influencers.

Like he's so he just so open-minded and honestly amazing and truly has changed my life and so many women's lives. I get DMs every day of women who've also gone to him and like now they have their babies.

And again, he never promises you an outcome, but he is like if we can at least find an issue, that's more than what a lot of. Women can say that they've.

gotten up until this point when they go to see him. So, yeah, he's just like amazing. Awesome. I love that. Dr. Gav. so as we wrap up here, if there's someone listening to you in the podcast that really resonates with today's

message, what is that last thing you can leave them off with?

Yeah, I mean, for me, it's always going to be mental. I say this so many times because I think it is so important because people really try to understand my thought process and why I feel…

I don't feel okay that I'm not doing IVF. It's a huge decision to make because it feels almost like you're saying no to a child. People don' t realize that and that's because we don t have fertility care in the United States.

That's truly why people feel that way. And my goal is to really help people understand that the things that we gloss over as unimportant to fertility are really important.

We can't look at the unhealthiest people in society that have children and go, well, they can have kids and they drink and the smoke and blah, blah blah.

That is not who I am comparing to. Because they got pregnant regardless of their issues does not make an ideal situation, right? So if you are doing those things and struggling with infertility, then those are impacting your infertilty.

You know, so it's like it really you have to kind of train your brain because again, when we look at society, I mean, you can go to Disneyland, You see, hundreds of thousands of people who are morbidly obese and they have all their children running around, But I think that's what kind of skews our ability to have a little bit of common sense and like reasoning that just because that is happening doesn't make it ideal and that there are sometimes little minute things that we might gloss over, your doctors might glass over is like, oh, that isn't important.

But they are important for you. I mean, for me, I think your your fertility is more robust if it's willing to see a trigger and say, hey, actually, we shouldn't procreate right now.

Right. Like we should probably pause on procreation because. You know, there's a lot of inflammation coming in, right? Whereas somebody who is getting pregnant, regardless of their inflammation, that's not robust.

Like to me, That's robust fertility. That is not the type of fertility I want, where I'm going to get pregnant even if I am doing drugs or if i'm eating McDonald's every day or like, I don't want fertility like that, because what kind of gene expression is that going have for your children and their children, etc.

So I think for people, if you're watching this to really think, you know, not to micromanage your habits, but really be honest with yourself. Look at yourself in the mirror.

Be like, am I doing everything that I possibly can? Do I really feel like we've turned over every stone? You know? And this is a question even for your doctor.

Like, why do I have to fail before I succeed? Right. Why do have the fail? Before we look deeper. These are questions to ask and I feel like if you're feeling resentment or you are feeling anxious towards a decision, that's your body giving you an awesome signal to just take a step back, do a little bit more research, find like-minded people and just really assess and come back stronger and make healthy and informed decisions.

I love that. And if people want to find you, where can they find? You can find me on Instagram at Healthily, TikTok at healthily. Pretty easy to Amazing.

This was a very informative. I think, you know, this is something that many people have to hear, especially with infertility being at one of its top skyrocket right now.

And it's continuing to go up. So I appreciate you coming here and sharing this message on a healthy point of view. Thank you so much. Good luck with everything moving forward.

You heard her. She said it. Can't give up. You gotta make lifestyle changes. And guys, always remember, current

science is made to be questioned. Don't just take whatever anyone else throws at you.

Question it. Take a deeper dive. Follow her journey. She's updating it very frequently. If you, one of your family members, someone that you know personally is dealing or struggling with something like this, make sure you share this podcast.

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