Calm the Brain First: The Amino Acid Fix Transcript

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Introduction and guest background

100% of the people that I see are amino acid deficient. Wow. Really? Really. In my practice, I haven't yet to meet a person who came in here who wasn't.

90 days or less, people are feeling at least 50% better, if not more. I'm using that conservatively. When they start eating really good food and their nervous system is calmer and they're getting sunshine and they start sleeping better, we seem to look for something that's bigger.

And a lot of times it's just the basics and amino acids are just basic. What if aging isn't about slowing down but leveling up? I'm Dr. Isaac Jones. This is the Longevity Leaders podcast.

Welcome to the Longevity Leaders podcast. I'm excited to have Lori Hammer on the call with me. She is a functional nutritionist that specializes in amino acid therapy.

We're going to get into a lot of geeky stuff today and really help you understand the science and the whole world of amino acids and functional nutrition and all the other things that I'm sure we're going to talk about today on today's podcast.

But Lori, you've got two kids. You've got two horses. You've got two cats. You got two dogs. You're a busy girl. Yeah. And do you have what, two or three husbands or?

No, thankfully just one. It's enough to handle, right? It is enough to handle. We'll just take one of those. That's awesome. Well, thank you for being on today.

And why don't we just start with just sharing a little bit of how you got to be one of the leaders in functional nutrition and amino acid therapy. It starts a long time ago with my own story.

I was very anxious and depressed. I had an eating disorder for 12 years of my life. Wow. The end of that 12 year period was awful. I had suicidal thoughts.

I was having seizures because I was so depleted, all those kinds of things. I wasn't able to complete nursing school because my life was just such a mess.

But thankfully, I had a nursing professor who kind of took me under her wing and she tried to get me into some eating disorder clinics and those kinds of things.

But honestly, Isaac, I didn't qualify. I wasn't suicidal enough. My weight wasn't low enough. I just didn't meet a lot of the parameters. So I was kind of stuck out in no man's land.

doing all the things, you know, all the therapies, all the whatevers and nothing was really making a turnaround. And then I thought I'd just move away, everything get better.

Well, that made things worse. And then this same friend of mine, she sent me an article out of a random GNC magazine that her husband got in the mail.

And there was an article in there that talked about eating disorders and that you are addicted to what you're allergic to or sensitive to and how amino acid therapy could stop those cravings, rebuild your brain.

and basically give your life back. So I called out to this place in California. They had an outpatient clinic. I told them what was going on. They said, yeah, we can help you.

Come on out. That was my first introduction to basically functional nutrition, which wasn't called that back then, because that was in 1996. And I'm still alive today.

Lori's recovery story and amino acid therapy origins

So it saved my life. That's all I can say. Saved my life, and I haven't looked back since. That is so amazing. Wow. So it's interesting because I take different amino acids just for post-workout, but I'd love to hear the whole idea of actually who developed this science of amino acid therapy and what does it do and why isn't it that popular right now?

Well, it's been around for decades. So, I mean, well, gosh, the amino acids are being used in the psychiatric community in the 70s, 80s, you know, up until Prozac was re-released because nobody wanted it to start with.

So it's been around a long time. You know, some of the pioneers, you know, Dr. Amen, Dr. Greenblatt, Julia Ross, you know, a lot of those people started, you know, using the amino acids, especially Julia Ross with addictions.

And she was my first introduction to amino acid therapy. And so it's been around a long time. I don't know why it never has gotten popularized. I think just pharma, big pharma has taken over.

I mean, we could go into a lot of that, but Prozac came out and psychiatric community stopped using it because, well, tryptophan, for one, was taken off the market because of a bad batch that came over from Japan.

I don't know, kind of the rest is history, I guess, with pharmaceuticals. No, I totally get that. What are some of the symptoms of people that have challenges with amino acids and what are the different things that amino acids can help with?

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Yeah, amino acids can help with so many different things because they're foundational to really everything from head to toe inside and out, whether it's your neurotransmitters or your enzymes, your hormones, hair, skin, nails.

But when we're looking at rebuilding the brain, we're looking at very specific five areas. So serotonin, GABA, your endorphins, catecholamines, and then really glucose regulation.

And there's amino acids that help with that, like L-glutamine. And so a lot of the symptoms people would experience would be if you're serotonin deficient, you're going to have anxiety, depression, OCD.

You're going to be easily irritated. You may be snapping at your family quite a bit, having a hard time getting to sleep, afternoon, evening cravings, a lot of PMS.

That's a lot of low serotonin stuff. Wow. What about dopamine? What do you see there? Oh, so that's where you're not focusing very well. You get the ADD, ADHD kind of symptoms, apathetic depression where you're just like, you don't have that drive.

You don't have that desire, the will, the want to, a low mental energy, low physical energy, maybe have some thyroid issues. And you're just, you know, using stimulants to give you energy all day long.

Wow. Wow. Now I had grown up with this amazing mom. She's still amazing, but she struggled with anxiety. She struggled with depression. I can remember coming home from school, just even like 10, 11, 12, 13, you know, years old and just, she would have migraines that were so severe that she couldn't see the light.

Like she had to be in a dark room. We had blackout curtains for her and I would go in and I'd just massage her temples and she said like my healing hands were like one of the only things that could help her, you know, and, you know, overcome some of the challenges she was dealing with.

And so, you know, Fast forward to today, and she's dealing with all of that. She's not dealing with any of that anymore. But they did put her on Effexor.

They first put her on, well, I forget what it was, but then it was Prozac, then it was Effexor. And she was on such a high dose that it affected her sleep so much.

Oh, sure. That she was then becoming an insomniac, and then she was becoming suicidal, as you were saying, Lori, that you were experiencing. Thank God you're still here helping people.

Yes, yes. But I would love to just hear, why is it that we're seeing such an epidemic of anxiety and depression? And why is it that with all of the things that they're doing, even with my mom taking highest dose of effects or not being able to overcome the anxiety and depression with that, why do you think that is?

Well, I think that it's multitude of reasons where, I mean, our food system is awful. So people are undernourished for sure. So, and people are not sleeping well.

We've got a lot of things that are disrupting our nervous system, whether it's EMFs or, you know, blue light, you know, all those kinds of things. So we're also, we're on things, toxicity in the environment.

Otherwise the toxicity and environment, and then, you know, the medications don't fix the deficiencies. So they're just masking things. And so people are just deficient because of all these things going on.

And our world is just kind of crazy and people respond to it and their nervous system gets overloaded. Yeah, I can see that, especially with social media, right?

Social media is like the best way to get anxiety because it trains your brain to be like a schizophrenic in a way. Like it's, it's like, wow, you're jumping from one thing to another and you're going, you know, it's, it's very, you know, challenging for a lot of people, especially teenagers, right?

There's a book called the social anxiety dilemma, I believe for children.

How amino acids support brain chemistry

It's, it's all about, I think it's. a slightly different title, but it's like, it talked about the epidemic of anxiety in children because of social media and because of, you know, all of these different things.

And I was down in Cabo San Lucas just a couple of days ago and I told my 14 year old cousin, I said, listen, I'm like, you're on TikTok, you're on Instagram.

You can tell she's talking a lot about wrinkles and the way people look. And they're already advertising to her about Botox and fillers and all these things.

And I was like, look, like, I just want to encourage you to get off of social media. You don't think it's affecting you, but it impacts you in different ways.

And I can just see it in the way that you're talking. She's constantly looking at herself in the mirror, you know, things of that nature. And so I'm just like, Like this is a big problem, but you know, I'm assuming that the amino acids can help with that and nutrition can help with it as well, right?

Absolutely, because when your brain is balanced, your nervous system is calmer, then we don't go down those rabbit trails. We're not easily sucked into the things that are giving us those dopamine hits because we're already

sufficient, so we're not seeking anything.

So what are, let's just go back to the basics. What are amino acids? Why are they so critical for the brain, for the body, for the muscles and mood as well?

Yeah. Amino acids are the building blocks of proteins, right? So they build everything in our body. So if you have something that needs to be built or used in your body, there's amino acids there.

Like every cell, everything needs amino acids, including your mitochondria. Like it's all dependent upon those. Yeah, totally. And how is it that different amino acid therapies, how is it different from, say, taking a bunch of vitamins or going to the health food store and jacking up on a bunch of the new products that are out there in the supplement aisle?

Yeah. So when I'm using amino acids for brain therapy, we're doing therapeutic doses of individual amino acids. So we're not doing a whole like big amino acid protein powder or even something like perfect aminos, which that's all fine and good.

And it's not necessarily therapeutic for what most people need to, you know, rebuild their brain. Interesting. So like, let's just say somebody is dealing with anxiety.

Is it different levels of amino acids for each person? Or is it pretty much like, hey, if you have anxiety, go on X amount of this or Y amount of that?

So I make it very individualized. So I'm actually sending an amino acid kit to all my clients that I'm working with. And then we actually test them. So we're opening up the capsules, Isaac, putting the powder under the tongue, and waiting to see how does your body respond?

How does your brain respond to that particular amino acid? So for example, If somebody is deficient in serotonin, they're going to try tryptophan first.

And we'll see, do they respond to 500 milligrams? Maybe they don't respond until they get to 2000 milligrams of tryptophan. Well, that's going to be their starting dose, but maybe you would respond to 500 milligrams.

So that would be your starting dose. So we need to individualize it. So it's really important that we do just that basic testing with people. Do you find that the dose comes from testing or does the dose come from like the client feedback on what's working, what's not or both?

Both actually. So we get that starting dose and then we, you know, for the next three days, we'll do 500 milligrams of tryptophan three to four times a day.

Give me your feedback. Okay. So anxiety went from a 10 to a six, which was great. But let's see if we bump that up to a thousand milligrams of serotonin of that tryptophan.

Does that take it back down to a two or zero? That's what our goal is. Wow. That's really good. So is there any way you can overdose on tryptophan or any of these amino acids?

Like could you? I mean, you can take too much. It's going to give you a headache, make you feel kind of woozy. If you take some vitamin C, it kind of washes that negativity, that negative feeling out.

If you don't have any vitamin C, it lasts, you know, maybe 15 minutes. Oh, wow. That's amazing. Yeah. So it's not like a drug, there's no side effects to it.

You want to work around some medications. So if somebody's on an SSRI, like effects or a Prozac, we take the tryptophan or five HTPs, you know, four to six hours away from that medication.

So there's a few workarounds if you're on meds, but most everything else is, you can just take it with anything. What do you do for people that really want to like boost their clarity and their memory and their performance from a brain based perspective?

Well, a lot of people think, well, we just go to the catecholamines, the dopamine, and then that'll be it. But sometimes it's GABA. You're so tense, and you're so tight, and so burned out.

But when you get GABA, everything can relax really, really well, because GABA's like… And then all of a sudden, things become clear. So when we remove the noise, clarity happens.

And most of the times, it's a combination of amino acids that gives you that sharpness, because people say, oh my gosh, You know, like a bottle of supplements sitting on your desk.

I had one lady there and she's like, that's not blurry. I can actually read it. You know, your, your eyes get sharper. Your, your eyesight can improve.

You see colors more vibrantly. It's just, it's, it's amazing when the nervous system is calm and focused and there's not any more noise.

Why anxiety and depression are rising

The clarity that you have can be something that maybe you've never even experienced before. It can be uncomfortable for some people. That is amazing. And again, it's not one size fits all.

It's like testing. Is it urine testing? Is it like, is it, is it looking at amino acid neurotransmitter metabolites in the urine or? No, we don't even have to do that.

I send you the kit. We do the sublingual testing and that's how we start. Just keep it super easy and simple for people. Cause a lot of times those amino acid profiles, while they're good, doesn't necessarily match their symptoms and their response to the individual amino acids.

That's really awesome. I love that. And is it a test kit that you have to send in or the sublingual is something that you can do at your house? Yeah. No, I sent it directly to you in our initial appointment together.

We do the sublingual testing together. Love it. That's really cool. So, one of the things I was frustrated with and that I love that Joseph Glenn Mullen, you know, wrote a book called The Anti-Depressant Solution.

And he's a Harvard MD that was like, look, you know, Prozac, he also wrote the book Prozac Backlash, but he was like, Prozac effects are, look, they're not the NLB all like we should be.

weaning down off of these things and exercise can help and nutrition can help and so that actually is the person that helped me. I reached out to him and he was the one that helped me get my mom weaned down off of the medication.

Now if you're on medication like effects or Prozac or whatever, any SSRI or anti-anxiety medication, one of the things that you should know is that you don't want to just come off these things Definitely not.

And that's, that's what I told my mom to do. Cause I was like, you need to get off them. They're bad. The doctor said they're bad, you know? So she gets off them and she was like, I literally wanted to kill myself.

Like there are firecrackers going off in my brain and like, it was really, really hard for her and she got to a really dark spot. So I was like, please get back on the medications.

I don't know what happened. And so that's when I like, you know, this was very, when I was very immature, young as a doctor, still in school actually.

But I, you know, I did eventually get her weaned down off of it and she kind of took the effects and all these little microbeads and she would count the little microbeads and wean down over a few months actually.

And eventually she was not dependent on it. She was getting better sleeps, like all of a sudden, like all these things really upgraded for her. But I want to ask you is why is it that you feel like medications don't fix the root cause of anxiety and depression for most people?

Well, because they're just masking the symptom. They're not creating anything new. So if we're going to say Prozac or Effexor, they work with what's already there and they stop your body from recycling.

what you really need to recycle in your brain. So they stop that reuptake, and then they just falsely inflate in between the two synopses of that neurotransmitter.

And then over time, you either have to raise your dose or it just stops working, or it doesn't even work to begin with, you know, for at least 30% of the people.

So when we're doing nutrition, when we're rebuilding the body, we're training the body to make its own serotonin again. So medication doesn't do that.

And people are really misinformed about that. They think, oh, so this is making you know, new serotonin for me. And that's not what is happening. It's blocking the reuptake of it.

And then there's a down regulation in the receptor sites that actually cause you to have to continue to go on more and more of it. It's an addiction then.

I mean, your body is dependent upon it. Like it would be, you know, to like a pain medication or something. So what does it mean from your perspective, calming the brain first in practice?

So my belief is that when that nervous system is more regulated, so everything is calmer, then we can go to the gut, then we can go to the hormones, then the vagal pathway.

All of those things are easier to heal if your brain has enough nourishment, and the amino acids are amazing at doing that. Wow. So, you know, you talk a lot about deficiencies, right?

And I don't know if you've done the research on this. This is a big passion topic of mine, but let's just talk real quick about deficiencies. How many people have deficiencies of amino acids, of antioxidants, of micronutrients, like B vitamins and things of that nature.

But what do you typically see? And I don't know if you do micronutrient testing like I've done over the years, but what do you typically see? I typically see that 100% of the people that I see are amino acid deficient.

Wow. Really? Really. I mean, in my practice, I haven't yet to meet a person who came in here who wasn't. Why is that? Just because of the EMFs? Because of the environmental toxins?

Because of the stress on our bodies?

Testing amino acids and personalized dosing

Yes. I think D all the above, Isaac. OK. So somebody comes to you with, say, restless leg syndrome and muscle twitching. Do you think this could be an amino acid deficiency?

Well, I do. I do think that and we'll address that. I also think, oh gosh, that's probably a mineral deficiency and a fatty acid deficiency. I mean, we could, the list could go on.

Yeah. P vitamin deficiency exactly. Yes. No, that's, that's, that's good. So, you know, the, the, the next question I

have for you is, is, you know, anxiety, you know, and overwhelm, they can be very like, a lot of people think that they're biochemical and there's nothing that they can do about it, but have you seen that when you address some of these deficiencies or challenges that they can improve quickly or is it kind of a slow, is it like a slow process?

Most of the time, it's a fairly quick process. We're talking 90 days or less, people are feeling at least 50% better, if not more. I mean, I'm using that conservatively.

When they start eating really good food and their nervous system is calmer and they're getting sunshine and they start sleeping better, we seem to Look for something that's bigger and a lot of times it's just the basics and amino acids are just basic and you're talking about vitamin B nutrient deficiency and minerals and fatty acids.

Well, let's get you nourished and I bet a lot of what you're dealing with is going to go away and then let's see what's left over and then deal with that.

You know, I think foundationally in any health program, people should be looking for, you know, macro and micronutrient deficiencies. Like, it just should be a foundational.

And it's so crazy to me that when you go into a GP, there's no questions on hydration. There's no question on nutrition. There's no questions on any exposure to environmental toxins or whatever, like all the things that actually cause people to deal with disease.

And they're just focused on, you know, treating symptoms with drugs and surgery and whatnot. So I think that the future of healthcare is. It's really in what we're talking about.

You know, I remember there was this one girl. So the mom went to my seminar and she's like, I want to work with you, but I really want my daughter to work with you because she's like locked up in her room.

She's in her college dormitory. She's flunking out of school. She was this bright girl. She got like, she graduated top in her class and I don't know what's going on, you know, and she'd been to all these doctors.

She's on all these medications. And I started off with a deficiencies test and I looked at the intracellular deficiency and she was like massively deficient of B6.

And so all I did was I just, it was like one micronutrient. All I did was get on B and it was literally like her entire life transformed. went off in a dark room and her mom was crying on the call and she's now like, you know, getting back into school and she's happy and excited again.

And I'm like, wow, like how is it so, how is it this basic? Like I literally put her on one supplement. That's it. It was crazy. Well, then her neurotransmitters can be made and converted and all those things.

I mean, B6 is so important to so many functions in your body and your brain. Totally. Yeah. So why is it that some people, when they're developing or integrating a new protocol or program in their health, that they feel worse sometimes before they feel better?

Well, I think your body's just trying to regulate. It's been stuck in one way for so long. And then when you're trying to shift your nervous system around, or that might trigger some detox, because all of a sudden your body's like, oh, I'm not going to die now, so maybe I can let go of some toxins.

So I think it's not always a bad thing if you feel a little bit worse for a little while. We just address those symptoms and make you feel better. I love it.

Is there a value in getting blood amino acids or do you feel like sublingual is the best? I mean, I've been doing this a long time and is there some value to that?

Sure. Do I think it was really necessary? No, as I don't look at it. I'm just going by the symptom base. Let's do the

sublingual. What do you respond to?

And I guess over the years, that's just what's worked the best for me and my clients. We have a lot of doctors that listen to this podcast. Like what is the sublingual test even do?

Like scientifically, like what is it looking at? Well, we're just looking to see how your body responds. So we're just taking the powder, putting it underneath the tongue, things absorb very fast, you know, in your mouth as everybody knows.

And how does your body respond to that? Are we noticing anything different cognitively, emotionally or physically? What changes are you experiencing? You know, within, you know, at least five minutes, two to five minutes, most people notice something change.

I love it. So it's a sublingual test that is immediate result based on like, so it's like a little amino acid pellet or something that you put in under the tongue.

Yeah. I just have them open up the capsule of L-tryptophan and put the powder under the tongue. Oh, that's really cool. Wow. So that's in a way how you can tell whether they are responsive to it or not.

Yeah. And then the client goes, oh my goodness, this is going to work for me. Right. And so by the end of that appointment, they know that tryptophan and GABA and glutamine are really helping me.

They already feel better. And so then you're like, what else do you have? You build that trust. I feel like through that sublingual testing, because that's the goal we want as every single practitioner.

How can we get our client the fastest results while we're dealing with whatever that root cause underlying issue might be? Mm. Really good. And, and, and, you know, they, they do the sublingual test, they feel the result like real time, which is huge.

Like probably one of the first things that doctors should do is get results for your patients as quickly as you can. You know? So the, the, the question I have is can you do kinesiological testing and is some of these amino acids like hard for these people, the stomach or their side effects, you know, of putting the powder under the tongue?

I mean, some of them don't taste good. So people will be like, I mean, they just, they just taste bitter. So not all amino acids taste amazing. You can, yeah, definitely you can do, you know, the kinesiology testing and those types of things.

Brain clarity, safety, and medication considerations

If I have a client that can't do the sublingual testing, then we'll do it that way. But I love it when the client can actually feel what's going on. I love it.

I love it. And you know, there's the mechanistic stuff, right? That we know works like here, take this, take that. And then there's the holistic vitalistic stuff where you're just like, hey, we know that this amino acid works, but we also want you to exercise.

And we also want you to understand that there's a There's a mind, body, spirit connection that we need to consider and that you're not just a uni-dimensional being like a bag of bones walking around.

What would you say to that? How is it that in healthcare, belief, mindset, faith, spirituality, You know, how does that all intersect in a way? It just does.

You can't separate them. I mean, we're triune beings, right? We're body, soul, and spirit. You can't separate them. So you do have to think about all of those aspects if you really want to be well.

Yeah, for sure. I just know and I love some of the work that Joe Dispenza has done with like you the placebo showing that literally your brain is a pharmacy and you're producing like all these different neurochemicals and peptides like no other and it literally is based on your thinking.

So if you're always in a state of anxiety and depression and frustration, it's almost like a positive feedback loop and your genetics are programmed then that way and all this other stuff.

And then when you actually start to think more positively, you start looking at the good, you get into a state of gratitude, you start praying or meditating or going to, you know, church or a temple or whatever it might be, there's this elevation that ends up impacting, you know, you physiologically and genetically as far as the expression.

And it's all you're doing is changing the pharmacy of your brain, right? Yes. Yes, exactly. Exactly. We have our own pharmacy. I love that. Yeah. So talk to me about the most common deficiencies you see.

Like what, what, what, what do you feel like the most common deficiencies that people have are? Well, the amino acid deficiency. So I would say serotonin is probably the biggest one with dopamine coming in, you know, catecholamines.

And then I, you know, people are deficient in minerals. Their electrolytes are so low all the time. B vitamins like we've been talking about and fatty acids.

I mean, all the basic things. People are just deficient in basics and sunshine and sleep and hydration. Hydration. All those things. If you have an autoimmune condition, you have all those things.

Well, talk to me about, yeah, totally. Talk to me about the difference between men and women that you're seeing. And also give me a percentage of how many people you see deficient.

You said like 100% of people, but like serotonin, dopamine was a follow-up question to your last question. And then get me into, let's get into like men and women's differences.

Yeah, I would say probably 90-95% of the people I see are serotonin deficient. pretty close on dopamine. GABA is probably 80, 85. Rufins, again, you know, 80, 85% of the people.

90, 95% of people have glucose regulation issues. So, if not higher. Yeah, yeah. Yeah. And as far as men and women, I see most of my clients are women.

I mean, they're the ones that are seeking the most healthcare. Women are definitely much more dysregulated than most men. And so, and they have the most hormonal challenges.

So, I see a lot of women who Serotonin is their biggest issue. And a lot of them come to me on an SSRI already because nobody paid attention to anything else that's going on in their body.

So they may be flatlined with estrogen and progesterone and put you on an SSRI. Well, maybe we should address that. Why don't you have any estrogen or progesterone?

And you would probably feel a lot better. The men that come to me, if I'm going to say, you know, I said 100% of people are amino acid deficient. I think everybody needs amino acids.

So maybe people can get away with taking perfect aminos or total amino solutions and don't need the targeted amino acids. And sometimes I'll get some men in here that don't necessarily need that.

But I was saying 99% of the women that come in need at least one or two, if not more of those.

Calming the nervous system and addressing deficiencies

So going back to the story of the little girl, the B6 deficiency, you wouldn't as a doctor keep her on insanely high levels of B6 for the rest of her life, right?

So how do you… How do you address the weaning down and the kind of finding the balance of the right amount and how long these people should be on it?

Like most, I would assume what you're seeing is that most people need to be on these amino acids at therapeutic doses for a long time and or indefinitely if they're like myself, I'm using my brain a lot, right?

Right. And constantly thinking in very high, you know, high state conversations, you know, making deals, signing contracts, dealing with like, you know, different people with like, you know, having over a hundred team members, you know, you're, you're dealing with a lot.

Right. So like. you know, people like me and, or I would assume a teacher probably has the same brain chemistry as me. Cause you know, in what I'm dealing with every day, they're dealing with it with children that look, I run like a kid's thing with my children, which is like an outdoor, you know, training camp.

And it's like the most stressful part of my entire day, like entire week. And I'm like, how did, how do teachers do this? They're herding cats all day, right?

Like I thought my brain chemistry would be challenged because of how much I use it. Like they, I'm like limping out of my training with these kids, you know?

No, I do have some autistic kids and stuff in the group, but like, you know, talk to me about that. I don't even remember you questioning us now because I'm just visualizing you hurting around all these children, Isaac, sorry.

So no worries. It's like, how do you find the balance after the high dose amino acid has been taken and how long does it typically take to create regulation in serotonin and dopamine?

And is there a long-term therapeutic dose that people most likely need to be on? Is it 50% of what they were originally taking or whatever? So three to six months is kind of usually closer to the six month range we're at.

Once we understand within the 90 days, finding you super stable, just give it another 90 days to kind of keep you at that dose. And then after that, most people kind of honestly just forget to take like their morning dose and they're like, gosh, I still feel okay.

Great. And then they're like, can I not take the mid-morning dose? Sure, don't take the mid-morning dose. So they kind of taper themselves off for the most part as their body gets more sufficient.

And then the goal is to teach them when you feel like this, if you feel anxiety creeping back in, if you all of a sudden have the afternoon cravings again or you're snapping, at your kids at three o'clock.

One, we got to look at your diet. Are you eating enough for lunch? Is your glucose staying stable? Or maybe you just need a little tryptophan because it's been a little extra stressful lately.

And so teaching people to use it as needed as opposed to as continuous therapy, right? And a lot of people can just go on like perfect aminos or total amino solutions and feel pretty stable.

And then maybe they have a car accident or if they're getting married or they have a death in the family. And then they'll need maybe even just a little boost of the individual amino acids over time.

Like this morning, I am, you know, hormonal today, we'll just say. And so I'm like, I'm having a hard time focusing. So I use some DL phenylalanine this morning to like sharpen my brain.

I have probably used that in a month, you know, but it just gave me that extra boost that I needed today to do what

I needed to do, you know, because we are, we're all busy.

We have things to do. Yeah. Talk about. The two questions I have actually really burning questions. Number one, assume I'm your patient. Like what would you recommend as a kind of general protocol to start knowing what I just shared?

Number two, the avatar is a woman who's in perimetopause, you know, dealing with that transition, you know, heavier periods, lighter periods, shorter periods, longer periods, kind of feeling like what the heck is going on with my body?

Like what would you, What would you do for both people? Well, so for you, we'd want to make sure your nutrition is stable, right? So we're always doing that.

As far as amino acids go, probably would get you a little bit of tryptophan, a little bit of either tyrosine or DL phenylalanine are the things that I would suspect that you would respond well to, maybe even a little bit of GABA or theanine.

And then making sure you're getting out in the sunshine and getting good sleep, just really covering those basics. For a paramental pause, a menopausal woman like myself, you're probably going to need tryps fan gaba, definitely some DLPA or some tyrosine to keep your brain sharp, right?

Because you're not going to get your cycle very regularly. Like I hadn't had mine in 90 days and all of a sudden it came back and I'm like, I feel a little foggy today.

So we're going to have to give myself a little boost. Um, and then we're really working on diet. We're like, how can we get you to sleep better? Cause most people, most women don't sleep fantastically during that time.

So we've got to really work on that sleep hygiene and really work on the mineral status, you know, getting enough B6 so that your neurotransmitters can be made by the amino acids that you're taking.

So really getting into that nitty gritty of the minutia I think is important. So I love to do foundations, but there is a time and a place for getting into the minutia for a lot of people.

What are some of the best nutritional strategies for sleep? A lot of times tryptophan will take care of it or some GABA to stop the ruminating thoughts and just calm that brain down.

Menopause, sleep support, and practical nutrition tips

So a lot of times that is super helpful. A lot of times I'll use, you know, seraphos, phosphatidylserine. to help lower that cortisol. So we're always going to be testing what your hormones look like, what does your cortisol look like.

Most people already come to me on magnesium, so that's usually part of the protocol as well. And then just maybe just even some salt. Salt and a little bit of like ghee at night with a little water can make a profound difference for people sleeping well.

Salt, a little bit of ghee and what else? Just water. With some water. Yeah. And then I teach my women, this is so easy. So any of you ladies, I keep salt on my desk and all day long, I lick my finger, I dip it in the salt, I put it on my tongue because salt is like spark plugs to the brain.

So if you can keep your minerals up, your electrolytes up and keep yourself hydrated, you don't need as many supplements as you think you do. Now, what are your favorite brands for amino acids?

I love Lidkey, Lidkey brand. Genesa is the one I use for total amino solutions. And the other one is honestly now brand is great and it's easy to find for almost every person.

Wow. And Lidkey, what is, how do you spell that LID? LIDTKE. I use that for L-tryptophan and D-phenylalanine. Just because that brand for those two work better than other brands.

LIDTKE. LIDTKE. Yep. Looks just like this. Let me just see here. Oh yeah. LIDTKE. Interesting. Awesome. Sleep and mood. Amazing. Wow. Laurie, where can they learn more about your certification and, or your courses?

Cause this is something I think a lot of doctors would be interested in learning about. Yeah, just go to lorihammer.com and you'll find everything on there.

There's a place to schedule free call with me. I would love to chat with you. That is awesome. lorihammer.com. L-A-U-R-I-E. E. And then H-A-F-E-R.com.

Yes. That's funny. I was talking to a guy who's building a brand and it was like Hammer Health and his name wasn't like, you know, or anything, but he just wanted like a masculine something for men to come into.

I'm like, that's pretty good name. I actually own that domain. Oh, Hammer Health. That's so funny. Well, he can't use it then. That's literally today we had that conversation.

Oh, funny. That is so funny. Well, Lori, thank you so much. Is there any last, last things? I know like one of the questions I wanted to ask you is if there's like one kind of simple shift that somebody could make this week to support their brain health or their overall health, what would that be as a takeaway?

Yeah, I would take a look at how much protein you're eating, because you're probably not eating enough to nourish your brain. And then look at your hydration and your mineral status.

So get that salt in. What would you say to a vegan that's like, I don't eat any protein? Then you're not feeding your brain. So when vegans come to me, we have to have that hard talk.

And I have, I've only had one turn me away in 20 years that they wouldn't work with me. So we do incorporate some animal protein and what we do start with like the total amino solutions, cause all the amino acids are vegan.

So you can start with the amino acids and then once you feel better, almost every single one will be like, all right, I can have some eggs. And, and, and, and, and they always end up working with you.

Yeah, they do. Yeah. And they get great results. They do. Yeah. Yeah. Laurie, you're the best. Hey, great talking to you today. Thank you so much for your time.

And thanks so much, Isaac. You're amazing. And I appreciate everything you do. Thank you. Okay. We'll talk to you soon. Thanks for listening to the longevity leaders podcast.

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