Introduction and Dr. Matthew's Hormone Journey

Hey, everybody. Dr. Diane, your libido doc here. Welcome to another interview on our sexual dysfunction summit. I am thrilled to have with me today amazing sexual health expert and friend Dr. Deb Matthew.

Thank you so much for joining me today. Hey, it's so great to see you. Same here. Same here. So I know you've done a lot of these. I'm sure some of our audience has seen you before, but I'm sure there's plenty of people who haven't.

So let's start with just talking a little bit about if you just want to give us kind of a brief rundown of why this topic is so exciting to you, how you got to be an expert in the field.

Can you just go down that road for us for a moment? Sure. So in my personal life, I was exhausted all the time and I was struggling with belly fat. That I just couldn't make it go away no matter what.

I tried and I was so irritable. I mean, I was just flying off the handle at my kids way too often. And then I felt like the worst mom ever. I mean, I had so much mom guilt because that's not the kind of mom that I wanted to be.

And I didn't understand what was happening to me. Like nothing in my medical training would explain this. I knew that it wasn't normal. And what really changed everything for me is my husband found a book written by Suzanne Summers and it was called The Sexy Years.

And now if it had been called the book about women's hormones, you know, he wouldn't touch that thing with a ten foot pole. But he saw the book and on the back, you know, it's got all those bullet points about, you know, no longer having fun and the things you used to enjoy.

So he just he saw me. And so he thought that it was something that I probably should read. And honestly, I had a really bad attitude, like what Doctor wants to get their medical information from a celebrity.

But I knew that I had to do something. And so I read the book and it changed my whole life because when I read the stories about the women in the book who are just like me and how much better they felt when they got their hormones back in balance, it really helped me expand my mind, and suddenly I understood what was happening to me because I was hypothyroid and I already knew this, and I'd already been on the standard thyroid medicine for ten years, but I didn't feel any different because the medicine was making my labs look normal.

But it wasn't making me feel normal. And I was in my late thirties at the time and my female hormones were starting to shift. But when you're in your thirties, you're not starting to think about menopause.

But because my progesterone level was starting to go down, I was irritable, I wasn't sleeping. I was waking up in the middle of the night with panic attacks for no reason.

So once I understood the problems, then I was able to get the help that I needed. I was able to find places where doctors can go and get trained. And I completely changed everything about medical practice because once I got my hormones balanced, I got my energy back, my kids got their mom back, my husband got his wife back, and I got my life back.

But I just couldn't go back to the old way of writing prescriptions all day long because that just didn't make any sense anymore. I'm thinking about there's a joke about country songs backwards.

When you play a country song back where you get your life back, your wife back, your home back and all that, right? So that's what that's what balancing the hormones really, really are as they provide all of that for us.

And so let's go into that now because I know you do a lot of bioidentical hormones in your practice. And in this particular interview, we are going to spend a lot of time talking about alternative types of therapies that people can do for sexual dysfunction.

But before we get into some of those nuances, can you kind of lay the land besides what you just shared with us in your own experience of like, when do people need to really consider hormone replacement therapy?

Why is this so important? And why is this important to do and to consider before jumping down some of these other types of therapies? We're going to talk about.

You know, hormones play such an important role in how we feel on the inside, how we relate to the world around us, how we react to other people. And when our hormones are off, we just don't feel right.

When to Consider Hormone Replacement Therapy

And you're not exactly sick, but you know that like this isn't right. So the most common thing that I hear women say when they come in to see me is like, I just don't feel like myself.

I just want to get back to feeling like myself again. One one patient said, I just want Lori back. So when our hormones are out of kilter, we don't feel right.

We may not sleep right. It affects our energy, our mood, our memory, our libido, you know, our desire for intimacy, but also our ability to become aroused in the vaginal lubrication and the sensitivity.

So, so, so many things change and hormones impact so many things that if we're trying to use vitamins or different procedures and things like that, there's only so far that we can get.

So when somebody should think about their hormones, I guess I would say if you're not feeling your best and you've already, you know, trying to eat a healthy diet and, you know, get enough sleep and do kind of the standard things that you can do in order to try to improve your overall health.

Then getting your hormones checked might be a good idea, especially women over the age of 35, because our hormones do start to shift during that phase of our life.

And there are many hormones that affect libido in particular in sexual health. So if your thyroid is not doing a great job, one of the really common things that we see is a low libido and that's not one of the things that's just not on our list of things that medical doctors are thinking about.

We know low thyroid can cause constipation and you can gain weight and you can be cold, but low libido is a really, really common one. Testosterone is really important for women.

We actually have ten times more testosterone than we have estrogen. It's just that men have ten times more testosterone than women do. But testosterone is so important for desire, but it's also really important for lubrication.

So without testosterone, you can have dry eyes, you can have a dry vagina, you can have dry skin, dry hair. It just puts some lubrication there and it makes a really big difference in libido, but it's not the only one.

So sometimes what I see is women go to the doctor thinking, Oh, I just need some testosterone, and they get a prescription for some testosterone replacement.

But it's just one of many things, and it's not the magic bullet. Another really important one is cortisol, because that's our stress hormone. And if you're under stress and cortisol goes up, that just shuts libido right down.

In fact, it's a common cause for fertility issues because it's so intertwined. Your body, in its wisdom, knows that there's a lot of stress going on. It's not the right time to procreate.

Kind of shuts things down. Estrogen is really important to keep moisture in our body. So without estrogen, we get vaginal dryness and the tissues in the vaginal area get thin and dry and they're no longer juicy and elastic.

And what a lot of women say is, I don't feel feminine. I don't feel like a woman. I feel like an it like I just it changes. So estrogen is really important for our sexuality, too.

So there are a lot of different hormones that are at play when women don't feel good. A lot of times we are treated with things like sleeping pills and antidepressants and birth control pills, which especially the birth control pills and certain antidepressants can really take away libido.

So sometimes it's a side effect of the medicine that they were treating the first problem with. But some of these treatments that we're going to talk about, some of these procedures, we the healthier the body that we can do the treatments on, the better the results are going to be.

So if you have a dry vagina that has no elasticity, there's no lubrication, there's no moisture there, these treatments can help. But if you had healthy vaginal tissues, we would just get so much more of the treatments.

Yeah. And one of the things I really appreciate that you're saying to that I just want to pinpoint is I think one of the things I see sometimes when we're talking about libido and sexual dysfunction is this very it's very abstract, right?

It's like, oh, how do I even know if this is a problem? But when we're talking about hormone imbalances, right. It's really there's so many things from how the brain works to how you interrelate, to how you sleep.

So I just want to make sure to really hone in on that for people like even if you're kind of in this question of like, do I have a libido, do I not? Which we do talk about in some of these other interviews.

Think about all the other things that Dr. Matthew saying here is like, you know, we have a lot, lot more there's so many more different symptoms that really are influenced by these hormones and just our sex drive.

So really appreciate that. Now, let's say that somebody is in this situation and they check cortisol and they check their thyroid and they check all their sex hormones and they get on any replacement therapy they need and maybe they get some shifts, right? Maybe they get some shift and they probably do if they're being balanced correctly.

They almost certainly do. But let's say their sex drive is still low. What are some of the alternative types of therapies that people might not know that they could do?

And I know some of these things are going to be different for females and males. So let's maybe start with females first and get through some of those female treatments and then we'll switch over to the guys.

Okay. Well, there are some newer procedures that make a really big difference, but I think I want to be really specific to say that when we talk about libido, I think we're mainly talking about desire and especially for women that tends to start here.

And what these procedures that we're talking about are really helping more down there. So this is maybe not so much that it boosts desire as much as it can improve sensitivity, pleasure, lubrication, etc., so that it becomes a good experience.

Because if it's painful, like who's going to desire that? So, but, but there are a number of things that we can do that really can kind of turn back the clock.

These are regenerative medicine, which is really exciting because we're really treating the cause. We're improving the health of the pelvic floor and the different tissues so that things just work better.

The way that they were supposed to in the past.

Female Regenerative Treatments for Libido and Pelvic Health

One of the treatments that we really are excited about is called an O-Shot. And what this does is it uses platelet rich plasma or PRP, and we draw blood just like you're getting a regular blood test.

We separate out your own growth factors and then there's just little teeny weeny injections into the roof of the vagina, into the clitoral area. And we got numbing cream.

I mean, it's really not uncomfortable, but what we're doing is we're taking your own growth factors and we're just putting them in the area so that they can activate the stem cells that live in your body.

And the stem cells are the the cells that trigger growth and rejuvenation. And you get more blood vessels and you get more collagen fibers and you get more nerve endings.

And so that can translate into more sensitivity, better orgasms, more vaginal lubrication, if there's it can help a lot if there's pain. So it helps a lot with painful intercourse and then a natural side effect of this treatment or a happy side effect is it helps a lot with stress incontinence.

So if you sneeze or cough and you kind of have to like clench because you're going to lose some urine or if you have to really make sure that you empty your bladder before you go to your, you know, CrossFit class or whatever, this can actually do a really nice job to help prevent that.

So I love that you're bringing all that up so much because one of the things I've seen is that loss of elasticity, right, with the pelvic floor muscles.

So they start losing their elasticity to me. And that's like beyond even pregnancy. And those side of these like this is like some of this normal process that happens intra vaginally, pelvic floor muscles with aging, right?

So a lot of what we're doing really is even turning back the aging clock of the pelvic floor muscles of the vaginal tissue, all of that. Right. Right.

So I don't know if you've heard people talking about pelvic floor physical therapy, but you can actually have physical therapy for the pelvic floor to make things stronger.

But with the PRP treatment, with this O-Shot, we are regenerating rejuvenating. We are taking your pelvic floor tissues and making them as though they are younger.

So if you were going to do pelvic floor physical therapy, you will just get even better results. So that's one of the things that's available and typically that's just a one time procedure.

Some people need to come back more than one time, but that's a really great option. Another thing that can be done is laser vaginal rejuvenation and there are different types of lasers.

But basically what they do is they treat the inside of the vagina and they also improve lubrication, but they can tone and tighten. So they kind of they you know, if you've had babies, when there's gravity, things just get stretched out and kind of like the elastic band of your underwear that's, you know, been in the dryer too many times. It doesn't really spring back again.

So this can really make a big difference. And it's it changes the sensitivity. It changes the feelings for the woman, and it can really make things more pleasant.

So it tones and tightens, it improves sensitivity, it improves lubrication, and it helps to prevent stress incontinence. So once again, it helps prevent urinary leakage, which is the happy side effect of this.

So sometimes women do these treatments because they're looking for help with sexual function. Sometimes

people use these treatments because they're really looking for help with urinary leakage.

But it's awesome that we can get both two for one. And so then when would somebody say Try something like a laser versus something like an O-Shot? Is there a time you might recommend one versus the other?

That is such a great idea. I mean, it's such a great question and I don't have an exact answer. We often combine these treatments for the best results because they work the even though they're doing the same result, they work in a completely different way.

So, so often we would combine it the, the laser treatments are often done in a series of three treatments about a month apart, whereas the O-Shot is often just a one time treatment.

So partly it depends on, you know, convenience and how close people live to the office and things like that. But it's I don't have a really great scenario to say this person needs that one, this person needs that one.

Yeah, yeah. It's like a lot of things in medicine. Like we combine things, we try things, we see what gives people the best results. And that's where we get our decision making process.

So what about anything else for finally the other therapies we want to talk about? Yeah. So there's another treatment that uses acoustic wave therapy.

So in some practices it's called semi wave and sometimes it gets different names. But acoustic wave therapy was actually used first in Men to help with erectile dysfunction, which we can talk about that, too.

But what it does is it uses sound waves and the sound waves go into the tissues and almost cause like a little bit of micro damage. But I don't know. It's not that uncomfortable.

It feels like you're getting, like, flicked, you know, with an elastic band or something like that. We have numbing cream that we can use. So again, it's not an uncomfortable treatment, but it creates a little micro damage on the inside.

And as it's healing up, that creates more blood flow and it pulls stem cells into the area for rejuvenation. And the reason that this is helpful is because for men who are having trouble with erections, most of the time it's a blood flow issue and a lot of things that go wrong for men.

There's a lot of analogous things that go wrong for women. So as we get older, we don't have such great blood flow go into our pelvic area the way we used to do when we were young.

And so when we can do this sound wave therapy, it can help to improve blood flow to the area, which just helps again increase all of those things. It helps improve, improves sensitivity and lubrication and helps to minimize stress incontinence.

So again, now, who would be this one versus another one? Well, this is something that is typically done once a week for a series of six or more treatments.

So you kind of have to live close to where the provider is in order to do this one. But again, it can be combined with some of the other treatments in order to get even better results.

I love it. I love it. Well, let's move on to the men now. So, you know, when we're talking about sexual dysfunction for men, like obviously the number one thing people are concerned about, it tends to be erectile dysfunction.

But of course, there's not that's not the only problem that can lead to sexual dysfunction. So can you, you know, kind of talk a little bit around like, okay, what are we thinking about when we're thinking about sexual dysfunction for men beyond E. D., since that's the one that most people know about, we start there and then we'll move into therapies.

Sure. Okay. So for men, men can have a decrease in desire, just like women can have a decrease in desire. And the same things that affect women can affect men.

So stress like cortisol going up shuts down desire. So stress is a really big one. Depression is another really big one that shuts down desire. Antidepressant medications shut down desire.

So that's a really common thing that we see is men don't feel great because of whatever, you know, going on and they get put on an antidepressant and then the next thing they know, they've lost their sex drive.

And how depressing is that? Right. Blood pressure medicines are another thing that can get in the way of desire.

Male Sexual Dysfunction and Hormone Factors

So for men we want to think about, are they on a medication that could be getting in the way? We think about that for women to we think about stress and cortisol.

And then we also need to think about testosterone. Testosterone is one of the most important hormones for men. It declines over time. And with women are hormone changes are kind of in our face like either we got a period or we don't.

We got hot flashes like we were kind of aware at least something's up. But 4 minutes, gradual decline. And so unless somebody is asking the right questions and maybe testing for testosterone, you don't really have a way of knowing that things are changing because it's such a gradual change.

And we're seeing low testosterone at younger and younger and younger ages and men, partly because of stress, partly because of lifestyle habits that aren't so awesome, partly because a lot of the chemicals that we're exposed to in the environment.

So there's a lot of reasons. And the younger a man is when he has his low testosterone, the more important it is to dig for the underlying reasons and not just knee jerk to a testosterone replacement prescription.

So we see men like as young as 20 years old who have low testosterone, but there's a cause that we need to be looking for in that case. But any case, low testosterone is a really common reason and low thyroid is another common reason.

But when it comes so and all of those things affect the desire which is happening in their brain. When we do talk about E. D., low testosterone can be one of the things that contributes to erectile function not being so great.

But even if somebody is low in testosterone and does whatever they need to do to get their testosterone levels up, and maybe that's a testosterone replacement prescription and doesn't always fix all of the problems with the.

Yeah, okay. So let's go from there. So we get hormones, let's say somebody does that their hormones are regulated. Same thing we said for the women. They've done the basics.

And when even when we're talking about some of the other root causes you mentioned, let's just say as far as they've cleaned up the chemicals or diets.

Good. Like we know it's none of that. Okay. We've got a lot of the root causes. What's next? So for men, one of the treatments that we really, really like is called gains weight.

And this is a one that's using that sound wave therapy. So it can be called sound wave, acoustic wave, shock wave. That all means the same thing. But what it's doing is it's putting sound waves right into the penis.

And the sound waves are breaking up a little micro plaque in the blood vessels of the penis in order to get better blood flow. Because for most men, the erectile problem is not enough blood flow getting in in order to get a strong

erection.

Or maybe they're able to get a strong erection initially, but then they're not able to sustain the erection and they lose it too soon. So opening up more blood flow can give a stronger, more sustained erection.

And the treatment is very effective. And and this is true for women to the sooner you get the treatment, the better results. So if you have a small problem, we can get great results for you.

And if you've kind of got like a medium problem, we can really, you know, do a good job. If you've waited and you haven't had an erection in ten years and, you know, you got a whole bunch of medical problems, you're on a whole bunch of medications.

That's harder for us to fix. So this is the kind of thing the same thing is true for women with stress incontinence in the urinary leakage. Don't wait till it's a big problem.

If it's just a small problem, it's so much easier for us to fix it. If it's a medium problem, we can still get you good results. But if it's become like a big old deal, it's just so much harder.

So for erectile function, this is a treatment that can optimize erections, you know, kind of for anyone. So there's no need to wait until because because this is an important thing to say.

The words erectile dysfunction, people generally kind of sometimes take that to mean like you're not able to have an erection, but please don't wait until you're not able to have an erection if you're noticing that it's just not as strong as it used to be, this is a good time to come in and get treated.

Yeah, thank you for that. I really think that's an important distinction. I know there's other treatments we want to talk about for the men, but before we do, I think the probably most obvious thing to bring up that a lot of people are thinking as they're listening is, well, why not just why not take Viagra?

Why would they go, I take Viagra. So can we talk about like pros and cons of that and especially in sure up the gains wave. Okay, so Viagra or Cialis right there's all these different medications and what they do is they open up the blood vessels so that you get better blood flow.

If you take a pill. And it works super awesome for you, right? For some people, they get side effects. So it's not it's opening blood vessels everywhere in your body, not just in one place.

And so for some people, they can get headaches or other side effects and they just really don't feel good and they don't really tolerate it. And for some people, you know, you have to time it for four different pills.

If you take it with food, it doesn't work as well. Some of the different ones wear off sooner or some of them last longer. So, you know, sometimes like you might not be quite ready in the right moment.

So, you know, that's not perfect. And for some men, it just kind of stops working like it doesn't work as well as it used to. So if you're somebody where when you take the pill, it works great.

Men's Regenerative ED Treatments and Alternatives

You are a super awesome candidate for having gateway treatments because we can probably make it so that you can have the strong erections without needing the pills.

They're not cheap. Like, you know, you don't have to worry about it anymore. If you're somebody where the pills just aren't quite doing it anymore and it just, you know, even with the pills, things aren't so awesome.

When we do the treatments, we can make it so that you can get nice, strong erections with the medication and maybe you won't need the medication. So it's not that the medicines are a terrible thing, but, you know, there's

there's pros and cons to everything.

And wouldn't it be nice not to have to take a pill? Yeah. Yeah, I really appreciate that. And I think the other thing to just tie it back that to something you said earlier is like now the pills are working, but there's still these micro plaques that are underlying causing the problem.

Then we could probably say that the roots not being treated and if it regresses far enough, then something like the gains wave is not going to work as well right now.

I think that's such an important thing to say, whether we're talking about like vaginal dryness in women or stress incontinence or erectile dysfunction, these things aren't getting better.

Like these things only go in one direction. So if you have a small problem now, it's not like two years from now it's going to be gone and it's going to be better.

So while you're having a small problem is the time to get treatment and the problem is in the past, the only thing like for women who had sexual dysfunction, the doctors have nothing for you.

Like you can go tell your gynecologist or family doctor, but they're just going to feel uncomfortable. Most likely, you know, they don't really have a solution.

Or if you have stress incontinence, kind of the only solution that they had was surgery. And, you know, for the men, all they really had was the Viagra.

But because we have so many other things now, go before it's, you know, getting to be a big problem and fix the problem while it's, you know, relatively easier to fix.

Yeah, such a good point. Okay, so let's move on from gains weight and let's talk about some of the other options that men have. If we need a situation where some of the basics that we talked about are not working.

Yeah. Okay. So another thing that we can do for men is called a PE shot. And so for women we have the O-Shot, for men we have a shot. So this is PRP, platelet rich plasma and the same thing.

We're drawing blood and we separate out the growth factors and then we do little teeny injections into the penis and it's like we have numbing cream. It sounds horrifying.

I know nobody wants a needle in their penis, but it's a teeniest little thing that you ever saw. It's really not a big deal and it's just a one time thing.

So there are treatments out there where you have to give yourself an injection every time you want to have an erection. But that's not what I'm talking about.

This is like a one time thing. Sometimes people come back for a second treatment to get optimal results, but we're putting your own growth factors into the area.

They activate the stem cells and the stem cells get to work with regenerating and rejuvenating the tissues. So more blood vessels, nerve ending collagen fibers and it works great if we do the gains wave with the patient because the gains wave opens up the blood vessels, pulls in more stem cells, then we hit it with the pressure to activate the stem cells and we can get some really good results.

Yeah, I like that. That combo you're talking about there, that's really great. And then I know something you had mentioned off line a little bit was a little bit more on like Exosomes and that that whole thing.

Do you want to talk about that? So Exosomes are for for the sake of what we're talking about here, they're kind of like stem cells. It's not exactly the same thing.

There are some place it's not something that I do in my practice. But there are some places who use exosome injections, kind of like how we would use a pea shot.

And so instead of PRP, these exosomes are used, they are not FDA approved. This is like the new thing. So this is where medicine is going. This is real regenerative medicine and they can have really, really good results.

Another thing that's new is actually using Botox for erectile dysfunction. And there are some doctors who are starting to use Botox because what it does, Botox relaxes the muscles in your face that cause movement like the cause, the wrinkling and what the Botox does in the penis is it relaxes.

There are little muscles around your blood vessels and it relaxes them in order to open up and cause more blood flow. So it's another thing that can be done.

I know it's another injection, but this is something that only gets done once every six months or so, has long lasting results actually seems to last longer for that than it does in our face?

Yeah, it's a really, really fun, fun alternative therapy. And I appreciate you bringing up the fact that this sounds intense, but it's really weightless.

It's not so I mean, it's not FDA approved. It's brand new. But there are some doctors out there that are doing it and it seems to be working. Yeah, well, thank you for keeping us abreast.

So many of the alternative therapies out there. Is there anything that we did not talk about in this realm that you think we need to make sure to mention?

Yeah, sure. So one of the like if we kind of do something that's not as sort of high tech, another thing that's really great for both men and women is nitric oxide, because nitric oxide opens up the blood vessels naturally in order to have more blood flow, which is important for men and for women.

So it's kind of almost like nature's version of Viagra. And you can there are there are lots of different nitric oxide boosting supplements out there.

Beets are a food that is naturally a great source of nitric oxide, but it's always best if we can do all the natural things first, because whatever, if you're going to invest in getting some one of these treatments done, you want to do the treatment on the healthiest body that you can so that we get the best results that we can.

Yeah, thank you for saying that. I think it's a really good take home point around. I think it's so it's so exciting to like find the new treatment and be like, oh, I want to do this thing.

And you know, if you have so many chemicals in your body from all these endocrine disruptors and you do, this is probably there's probably just not going to work as well.

So give your body, you know, first what it needs. So let's talk about so most of these treatments you do in your practice in North Carolina, right? Yeah.

So so you guys that live out on the East Coast, you can look at Dr. Matthew, you can look at her speaker bio and have all of her contact information there.

But want to make sure that we are leaving with just any concluding comments you want to leave as well as how people get a hold of you. And I know that you have an e-book to give away to everybody as well.

So you want to talk to us about all that. Sure. Okay.

Resources, Books, and Closing Remarks

So the book is called This Is Not Normal: A Busy Woman's Guide to Symptoms of Hormone Imbalance. And I wrote the book because, as we were saying in the beginning, like, how do you know if you have a hormone imbalance?

Like when should you get checked? So this is to try to help answer that. It has a bunch of checklists that you can kind of go through to see like symptoms of low testosterone or high cortisol to kind of understand if you could have a hormone imbalance.

And then what are some of the simple things that you can do at home? And then how can you find a practitioner who can help you? So there's some different resources for where like websites you can go to to look for somebody near you.

And so that's a free download I have a book for men too. It's called Why Can't I Keep Up Anymore? And it has lots of information for men about all things sexual health and optimize performance.

The practices in Charlotte, North Carolina, and obviously a lot of these procedures that we talked about are in-office procedures. So, you know, these would be things for people locally.

Yeah. And just so everybody knows that you also do bioidentical hormones as well as a lot of different things around restoring health and supporting people with getting to the root causes of their health imbalances.

So I want to thank you so much for your time. This is a wealth of information. I think a lot of people are going to have their eyes opened about a ton of new ways to treat libido, to treat any sort of pelvic floor dysfunction and leakage and all these different things you talked about.

So really appreciate your time, everybody, or time time today and everybody else is listening. Make sure you check out Dr. Deb Matthew, her bio, where you can find information on how to get a hold of her as well as all of her offerings.

So thank you, everybody.