Empower Pelvic Health During Menopause Transcript

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Welcome and Introductions

Hello, ladies. Welcome back to Mastering the Menopause Transition 3.0 and your host, Dr. Sharon Stills. You know, I love being here because it's our third summit.

And and I'm already scheduled for a fourth one. So I'm just going to continue giving you amazing information that you need to know. Every year we just go deeper and deeper and get more juicy and more juicy.

And today I have one of my favorite humans here. It's girlfriend time. So grab a tea, get cozy, kick everyone out because I've got Jana Danielson in the house and we are going to talk about all things pelvic floor from the physical issues to incontinence to pain to the emotions to the energetics.

So this can be a nice, juicy conversation that we all need to have, you know, the pelvic floor. We don't always it's not an open conversation. You don't go to the bank and ask someone, you know, how's your pelvic floor doing?

You know, so, so this good that we said so. Welcome, Jana. Tell us why we should, Your turn. Thank you so much. And I just, you know, when you said this is girl time, it truly is girl time.

Because outside of this summit world, Dr. Sharon and I have a really fun relationship. And I actually thought this call today was just a catch up. So I had this been half an hour ago, you would have thought a very different version.

So I texted her, I'm like, I got to go get fancy so that I can at least look presentable for this, for this conversation. And so, you know, really, I, I, I love to share information about the pelvic floor because the 21 year old version of me was dealing with pelvic floor pain that was born out of my digestive pain.

So it didn't start as pelvic floor pain started as digestive pain, undiagnosed on 11 different medications.

Jana's Pelvic Floor Journey

Lots of headaches, and then all of a sudden as, like I said, a 21 year old in university having pelvic floor pain and not understanding what was going on in my body because I just thought pelvic floor stuff was only something that new moms talked about and that women in menopause talked about.

And I was neither of those at that point. And it made no sense to me why I had all this pain and discomfort and through my own healing, I discovered Pilates and movement that it really helped me understand how simple lifestyle choices like how we breathe and how we sit and how we stand and what we eat and what we drink.

And this tissue called fascia and this nerve called the vagus nerve, and how all these things come into play and when I started my own business and started educating women through Pilates and realizing that they also weren't having the conversation, and it made me start asking questions like, why?

Why aren't we talking about this? And so I'm excited to jump into this with you today, Dr. Sharon, and really help you know, your community, understand that it's time to hit the unmute button first of all and start the conversation, which is what we're having, you know, having happened here today.

And then, you know, be inspired to take small little bite sized like classical sampler, actions to learn and live about, you know, really embrace what pelvic floor health is all about.

Costco's getting a lot of air time. There's some that I just told women in the last interview I just recorded, I was like, go to Costco and buy organic sardines.

You're getting a pelvic floor sampler. Yeah. And I have to mention that as you were talking and I love listening to you, but I'm like, your shirt and your background are just like, divine.

You look very, very perfectly matched. But I noticed that as well. And I would normally have this open and to see the palm trees in my backyard, but the sun is still shining.

So I did also notice, like I better keep my posture on point because if I'm a little bit out of alignment, everyone's going to see it. On this interview.

I was just looking how cute you look. So so let's just start like at the basics, because I think just defining what exactly is the pelvic floor, because I don't think, you know, a lot of women probably have never had that defined to them. No.

So your pelvic floor is a group of 14 muscles. They live in your body. And I'm a I didn't bring my pelvic my pelvis model. But essentially if you can I'm just going to move my camera like they are up inside your body.

So here's your pelvis, this beautiful cauldron. Right? If I put my hands on my hips, that is that's essentially my pelvis. The pelvic floor muscles create this hammock type structure and they have some pretty important jobs to do.

So the pelvic floor is involved in urination. It's involved in pooping. It's involved in walking and running and jumping and sex and delivering babies.

This muscle group is really important, not just. From, I cough and sneeze and pee my pants a little bit, which is usually when the pelvic floor starts getting a little attention, like, oh my gosh, I got to start my cargos, which let's talk about that as a not a solution for everyone.

We'll talk about that later. But that's essentially where it lives. And like the body, we are not like Mrs. Potato Head dolls that have parts like, you know, arms that plug into our body.

We are systems. We are systems of systems. And so the pelvic floor essentially is the floor of our core. And when you hear the word core or you hear phrases like, I have to strengthen my core or I need to work my core, most women will think I need to lay down on a mat, do some sit ups, or maybe do some planks and that's working.

My core. But it's that's a very one dimensional perspective on what the core is. When you eat an apple, what's left is the core. It's a cylindrical, three dimensional shape.

And that's exactly what our core is in our body. The pelvic floor is the bottom, the diaphragm, which is the main muscle of respiration, is the top. And the 360 degree cylinder are the four different abdominal muscles that support the spine and our organs.

What the Pelvic Floor Does

So when we do something as simple as sneeze or cough, the pressure in our core changes like think about coughing. There's downward pressure down on the floor of the core.

So if we don't have a strong pelvic floor when we cough or sneeze, or maybe jump with your grandkids on the trampoline or go for a walk, it's in those moments that we tend to be, oh my gosh, I have you know, I had a little a little leak, I had a little accident and.

The $21 billion incontinence product industry proves that most women are misinformed on what a true solution for pelvic floor incontinence is, because there is research that shows us.

So we have confidence that in nine out of ten pelvic floor dysfunction situations in a woman's body, nine women can actually heal their pelvic floor dysfunction with improved breathing, optimize posture and their level of pelvic

floor fitness.

So this group of muscles interacts with breathing, side bending, twisting. You know, watching a birds fly overhead, tying our shoes. The pelvic floor is involved in all of that.

I'm still like, did she say $21 billion? So that that's like mind boggling. So I'm going to I'm going to take my mind boggle out. So I just want to go back.

So we know that incontinence is an issue of the pelvic floor. But what other ways does pelvic floor dysfunction show up. So women listening can go, oh, check. That's me.

I didn't even realize that is a pelvic floor. Okay, so let's actually start with incontinence because I think a lot of women don't understand sometimes what that term is.

And there's different there's different ways incontinence can show itself. So when you are on purposefully leaking, meaning you're having a glass of wine with your girlfriends, you're laughing your butt off and you leak a little bit.

Or like I said, you cough or sneeze. All right. So that is called stress urinary incontinence. There is that downward pressure. The pelvic floor is either too tight or lacking strength.

One of those two situations is going on. And so you leak. All right. There's also a form of incontinence called urge incontinence meaning I don't have to pee right now having this conversation with you.

But as I finish the sentence, I run to the bathroom and I'm undoing my pants as I go because for some reason, I've gone from 0 to 60 and I'm going to have an accident if I don't take action now.

All right. Some women live with both stress and urge. Some have one or the other, and both of those situations is actually different than another pelvic floor, situation that involves an overactive bladder.

So attractive bladder means you're going to the bathroom a lot in the day. And what I hate using the word normal or I dislike using the word normal, but 7 to 9 times, urinating 7 to 9 times is what the American Urology Society says is normal.

All right. any more than that, you might be dealing with something called, an overactive bladder. So have you ever had someone or maybe. I'm sure you've had patients.

Doctor Sharon say, I've got a bladder the size of a walnut. Have you ever heard that? Yeah. More time or this, you know, fill in the blank, whatever. Not.

And it's not that anybody has a bigger or smaller bladder. It actually is how we've trained that organ to, you know, to, to pass urine. Well, let me give you an example.

A lot of women that I work with, they will actually decrease their hydration because they think that if they drink less water, they'll have less pelvic floor, you know, issues.

They won't have to run to the bathroom as often. That actually the outcome is the opposite.

Types of Incontinence and Related Symptoms

Because what happens then is the urine. Our urine becomes highly concentrated, highly acidic, and so the bladder is holding this liquid that is irritating the inside of the lining of the bladder.

Because it doesn't have it's not flushed, it doesn't have, you know, it's just so, so concentrated. So the bladder actually is like, I don't want to hold this, I want to get this out of me.

And it it actually exacerbates the problem. So you have stress incontinence. You have urge incontinence. You have overactive bladder. And they can happen in combinations and permutations.

But then you can be experiencing pain during intercourse. Generalized pelvic floor pain like for, you know, a lot of women even getting out of a vehicle and swinging their leg out of the vehicle, it can almost feel like a sword, like going up the vagina.

Sometimes that that happens and that's that's a pelvic floor issue. But then there's a layer of symptoms that you may not even connect to. Pelvic floor like, bloating, constipation, chronically tight hips, whole tingly feet, low grade back pain.

Those can all be connected into the root cause of pelvic floor dysfunction. I'm certain that down because that's really interesting. Because, oh, we I, you know, just even for me to expand like, what is, you know, cold, tingly feet.

So talk about that like, you know, cold tingly feet be a pelvic floor issue. So when, if you if you think of that I like I sometimes call it the cauldron when I'm talking about the energetics of the pelvic floor.

The pelvis literally is like a cauldron. And there's magic that goes on inside of it. Because we are such a sedentary society these days, right when we have been sitting for longer than 60 minutes, 50% of the blood flow to our legs has decreased.

All right. So again, if we've been sitting for longer than 60 minutes, which which most of us will sit during the day for longer than 60 minutes, multiple times a day, then we'll get up and kind of be like, you know, the Tin Man from The Wizard of Oz after a heavy rain like we, you know, we get.

We get going, and then it. Gets easier to get going. So when we have a lack of blood flow, it's going to it's going to impact. I mean, blood flow is life.

Blood flow is vitality. When we have a lack of blood flow, you know, if you've been sitting cross legged and you kind of have those pins and needles in your feet for a while, that that's blood flow, right?

So when our circulation becomes impacted, that's get that cold, tingly feet and usually that sedentary, strategy will not be with optimal posture with a nice tall, long spine with our shoulders, you know, rolled back and our collarbones open.

That seated posture will be, you know, extremely bent over, you know, kind of like that ape like posture. And so it truly becomes a blood flow issue at that point.

So when we can have a pelvic floor that is, you know, dynamically healthy, you'll start to notice, like I said, range of motion through your hips will start to change.

It's amazing. when my husband actually uses the pelvic floor fitness tool that I've created consistently, he will. He swears that he can get 20 yards further off the tee in his golf game because of his hip rotation, being improved by that.

So so that's where that's where that whole piece comes into play. Interesting. So speaking of let's talk because you said Eagles are you know because that's what every woman thinks.

Oh I'll do my Eagles right I'm doing a good job. I'm at the red light. I'm doing my Kegel. So speak about key goals in football okay. Can you goals and coach ball I love it.

So first of all I talked or I referenced early. We can have a pelvic floor that's too tight called hypertonic. All right. we give our grandkid too much sugar.

They get hyper, there's too much movement. There's too much activity. In the case of a hypertonic pelvic floor,

there's too much tone. All right. And we often don't think of too much tone as.

As a bit of a compromise. You know situation with the pelvis. All we think about is I don't have enough tone. My pelvic floor isn't strong enough. And so that's where the Kegel can be beneficial.

The reality is about 70% of pelvic floor dysfunction in a woman's body is because of her being hypertonic. So there's already too much tension. And then what do we know about a Kegel?

Most Kegels are taught stop loss. Stop the flow of urine. Start the flow of urine. Right. Like that. Squeeze and release. So all we're actually doing is creating more tension because we would never train any other muscle in the body like we would never think to.

If I was sitting here now having this conversation and I might think to myself, I'm going to strengthen my glutes, I would never squeeze my butt and release my butt and squeeze my butt and release.

I would never do that. I would do squats. I would walk up and down stairs. I would do some lunges. I would work through a range of motion. Yet the the one way that most women know to train their pelvic floor is to clench and release, which most of us already from an emotional perspective, we are holding tension.

We are guarded. We are protecting. We may have had a slip and fall as a child. We may have had a sports injury. We may have had I mean, childbirth, whether it was challenging or they, you know, that baby just slipped right out.

There is still a lot that goes on with pelvic floor. You know, there's there is sexual trauma. There is postural trauma. And a lot of us are actually holding tension in through that magic cauldron.

And we don't even realize that one. Am I really good friends started using her cooch ball, which I'll talk about in a second, and she said to me, you know what?

I didn't realize, Jana, I didn't realize that you were supposed to or your you could sit on the toilet and the flow of urine could start within five seconds, she said.

I had for years I have not had that experience, she said. I would sit on the toilet and it would sometimes be 30 or 45 seconds before the flow of urine would actually start.

Kegels, Hypertonicity, and the Cooch Ball

So in her case, you don't know what you don't know. We call it unconscious incompetence. You don't even realize that your body is not working for you.

And when she started using her cooch ball, which is my pelvic floor fitness tool, which is think of like if you've ever used a little fascia ball to release your shoulders, or a tennis ball, or you've used a foam roller, the cooch ball is essentially like in a really simple term, the foam roller for the pelvic floor.

When the weight of the body, when you're sitting on your couch ball, the weight of your body is creating this beautiful experience on the ball to release any tension through holding fascia through muscle that's too tight.

And when that happens, we actually have a lack of blood flow. Blood flow is life for our muscle fibers, for our facial tissue, for our nerves. And so that is what my goal was in creating this product so that it could work on its own or in conjunction with pelvic floor physical therapy or any other form of of pelvic floor therapy, so that women could start to realize like, oh, like I feel that warm, tingly sensation, or they get off their ball and I'll get these DMs being like, I feel like I'm sitting in the floor like in a chicken in a little chicken nest, because that's what you that's what you'll feel like when you start to release that muscle.

And so it, it is such a there's complexity around it, but it doesn't have to be complicated. It truly is learning how to properly breathe, learning how to properly sit and stand, doing some release work and just, you know, being

humbled by your body versus being disappointed because there is two very different energies around being humbled versus being disappointed.

so I want to go to the energy, but before I just want to squeeze a few more practical things in. So you were saying about proper breathing and proper posture, could you just take us through that so the women have them have a role model?

Yeah. So the diaphragm, like I said, is the main muscle of respiration. It sits in the rib cage like an open umbrella or a mushroom cap. And it's actually like the upstairs neighbor to the pelvic floor.

So the two of them are like BFFs. They literally live one on top of the other. And when the diaphragm is not functioning, when the pelvic floor doesn't sense movement in the diaphragm, the pelvic floor is going to be just as you know, status quo as the diaphragm.

It here's the thing we will live. We will breathe without using the diaphragm. Our body is so brilliant, right, that, you know, our maker gave us the ability to breathe without using our main muscle of respiration because we have these secondary breathing muscles in our neck.

So, ladies, for those of you that live with chronic neck tension, you know, TMJ, any kind of jaw tension, low grade headaches at the hairline or at the brow line where you feel like your eyes are sinking into the back of your head?

Yes, maybe you need to up your hydration. Yes. Maybe, you know, some myofascial work would be important. But what we don't realize is I believe it's like over 21 or 22,000 times a day.

We breathe. Imagine doing something 20 plus thousand times a day, but doing it just a little bit incorrectly. At first it's not going to matter much, but over a year and a decade and two decades and three decades, it's going to matter a lot.

All right. So when we have transferred the work of breath from the diaphragm, okay, that main muscle of respiration here into our neck, we basically have started the process of pelvic floor dysfunction.

It's not if there will be pelvic floor dysfunction, but it's when. So the absence of diaphragm breathing is the precursor to pelvic floor dysfunction.

Exactly the same as the the presence of inflammation will become disease at some point. We don't know what disease we don't know when. But that is the precursor.

So what we need to understand is that breathing die for matically is it's like a birth, right? Watch you watch a newborn baby breathe. They are the best version of diaphragmatic breathers.

Those little bellies rise and fall with every breath with so much joy. Like they are just living, right? They are taking in oxygen and especially as women, as as teenagers and as young adults.

We start to lose that because I believe societal norms play a big role in us trying to be, you know, wearing clothing that is restrictive, being, you know, as skinny as we can, as narrow as we can.

And unbeknownst to us, we're just shifting our breath from the diaphragm to the neck. So breathing diaphragm using your own hands is a great way. So one hand on your belly button, one hand on this flat bone called your sternum.

And if you take a big breath in through your nose like you're smelling a fresh baked apple pie, if your top hand moves more than your bottom, you truly are a little.

I call you my goldfish. You're like my little goldfish and you're breathing with your gills. All right. If your bottom hand moves more than your top hand, you are a die from attic breather.

And that's what we want. If you are a little fishy, don't worry. We can retrain the body. We are very smart and so let's just try three of these breaths, okay?

Just so you can hear because there's a sound to it. So we inhale through our nose. As we do that we attempt to take our body and fill the waistband of our pants with our body. So inhale.

And now on the exhale think of narrowing the waistband. The belly button melts. It's like an h a sound like you're fogging up a mirror. Or like my kids, when they were little, would say you're being a friendly dragon.

All right, inhale through your nose, fill your waistband with your body.

Breathing and Posture for Pelvic Floor Health

And now as you exhale out of your mouth, making that h a, you're narrowing your waistband. And one more time inhale through your nose. And as you're inhaling through your nose, your pelvic floor is truly at rest.

And as you're exhaling out of your mouth, you think of the pelvic floor rising like an elevator in a lobby, or picking up a grape with your vagina lifting.

And then the inhale, the grape goes back down to the lobby. All right. So in its simplest form, that is diaphragmatic breathing and that alone, ladies, if you take one little nugget out of this conversation, if you can do that, breathing 8 to 10 times, 3 to 4 times a day, your pelvic floor function will start to improve simply with with improved breath.

True true true. Yes I always I always bring it back to like the breath is our best our best healer. It's the best medicine. It's free. It's always with you.

You just gotta tap into it. So I love what you just said. Yeah. And then, you know, from a posture perspective, from a standing posture perspective. the quick way to feel optimize posture 60% of your weight in your feet should be in your heel bone.

That big bone, called the calcaneus, 40% of your body weight across the widest part of your foot, called your metatarsals. So not under the toe pads. If this was my toes, it would be where the toes connect into the main part of my foot, right?

So the 6040 split is optimal for pelvic floor health. Most people are actually 2080 versus 6040. All right. We have about 80% of our weight forward into our toes.

The toes clench during the day. It turns on our quads. Our hip flexors are on all day. We start to get a little bit of a sway in our back. We start to get back pain, our butt and our hamstrings turn off.

So we get these pancake looking, you know, we we call the mom. But no, the mom butt should be this juicy peach, right? We don't want a pancake butt. So simply shifting your weight back is going to turn on the muscles in the back of your leg in a different way.

Now, I want to say that there might be like fatigue in those muscles, which, if you didn't know any better, you might think to yourself, oh, you know, this hurts the back of my knees or this hurts my low back.

Be mindful if it's sharpened. Shooting. Yeah, you can use the word hurt, but fatiguing muscles are burning. They get tired. Celebrate that. That means you are waking them up and you are reminding them what their job is.

You don't have to teach them their job. They know. You just have to remind them what their job and they will be happy as clams to do their job, because that's what they were made to do.

So 60% in the in the, in the heel, 40 across the widest part of the foot. When you are seated, imagine those bony sit bones in your butt like your feet.

All right. You want to be up nice and tall on those sit bones. You want the spine to be lengthened. You want your organs to have space so that blood can continue to flow around them.

It really is like what I say is when you're in your slump posture, it's like getting into an elevator in a hotel and there's already 20 people in the elevator.

There's not much space. All right, create the space. Create the space. Like there's three people in the elevator, and you will see how simple digestion elimination, like you're you're bloating tummy.

All of those things will start to improve because you're actually giving your body systems a chance to work in their most beautiful, optimized state. So those are the breathing, the standing, and the seated posture rules of thumb.

I love that I'm like personally take I'm like, I've got the breathing down. I'm like, I can as soon as we're done, I'm going to go stand up because I think I might be a little bit of a toe clenching.

Yeah, yeah. And like I said, most people are, and especially the footwear we wear, even running shoes have a bit of an incline to them. So we just want to be mindful of that and and be like, be.

It'll feel weird. You'll feel like more back than you should, but over time it'll start to correct itself with your alignment. Love it, love it. So we've got a few minutes left, so saving perhaps the best for last, you know, let's just talk about the energetic.

Because all these physical things are super important because we're these physical bodies. But there is an energetic perspective to the pelvic floor to being a female.

And I would love to you for you speak to that. Yeah. You know, the beautiful, the beautiful piece of this whole conversation is that. We're starting to talk about this part of our body.

And so the two things that I want to bring up during this little energetic part of the conversation, first of all, is if you are one of those women, like I was and like so many, you know, not just in my community or your community, Doctor Sharon, but I'm sure across the planet that feels just uncomfortable talking about this part of our body.

Let me help you understand the why behind that. The main nerve in our body that runs from our brain to our genitals, and including the pelvic floor in a man's body, in a woman's body, is called the Pugh dental nerve.

All right. It's got a big job. It is a motor nerve, which means it's an information highway. So it sends messages. you know, when to relax, when to work.

Oh, you know, I have to poop. I have to pee. We have to jump. And then the Pugh Dental nerve is also a sensory nerve. So the gamut of sensations from pleasure all the way to pain are experience through that nerve.

Now, the Latin root of that word, if you were to go and Google Latin root of Pugh Dental, Pugh Dental means an area of shame. All right. And I locate your little face.

Okay. That was exactly what my face did. And I learned that I was like, I've said. Oh, and then I kind of got a little pissed off. I was like, what? The main nerve that runs from the brain to the pelvic floor.

The Latin root of that word, the definition of that word is an area of shame. We are born with an area of shame, like so. I want everyone on this call that's watching this conversation to understand that we are part of an evolution or a revolution of the divine feminine that says yes and yes.

That area, the Latin root is an area of shame. And here is here is the beauty of that.

Energetics, Shame, and the Sacral Chakra

We can shift the narrative, we can shift the conversation and the sacral chakra, which is that, you know, that energetic vortex that literally lives where the pelvic floor resides in our body.

The sacral chakra is all about creativity and sensuality. And so, you know, in those moments where maybe you need to be creative for your for your work, maybe you have to, you know, right?

You know, write something or make something and you just have like this, I just can't get into my creative space. Taking a few breaths and focusing on that sacral chakra and connecting, it's it's orange in color, right.

And so connecting with that orange, maybe you decide your snack is going to be some cut up carrots and, you know, and a and a sliced up orange just to play into some of the energy around the color.

It is something so beautiful that when you understand that there is this energetic vortex that can become stale or can actually start, you know, spinning in the opposite way, there's no surprise that we start feeling outside of our body like, you know, the sensual version of me.

I mean, I just turned 50, so Lord knows I never want to have that feeling where I think, well, Sexy Janna is, you know, she's left the building. She doesn't, she doesn't.

She's not in this body anymore. Right. Like I want that sensual ness to be a part of of who I am. And it's taken me a long time to become comfortable with that.

So this is an aspect of pelvic floor women's health. It might be new to you. Just sit with it. You don't have to take action on it. But just learning about the energy, the pew, dental nerve, what it means, how we can shift that energy, how as a collective, you know, we can, you know, rise up from that.

I just think that's what's so beautiful about the energetics of this part of our body. I love that. I'm looking at my. I have all the different colored glasses.

And so even just putting on I, my granddaughters are obsessed with them. So we put them on and we talk about orange and it gives us joy and it makes us creative and we dance.

And you could wear orange underwear, orange shorts, or there's so many ways to get the the colors in your life and to get that area moving. So I'm super happy you you talked about that to kind of wrap this all up.

And I love what you said. You know, the cauldron, the magic. This is a real area of magic. And I always talk about how in menopause we can no longer birth, you know, human children, but we can birth so much.

Whether it be, you know, art or a new business or a book or a new cooking. So there's so many different ways to be creative. It doesn't have to just be that you're making a new pottery.

It can be the way you think. It can be the way you walk. It can be so many different things. So I just I tell you what, you're going to have a good girlfriend conversation, and there's just so many juicy nuggets in here that you can, you know, from breathing to the energy to how to stand and what it means and what to look for.

So I so appreciate you. Thank you so much. This is such a beautiful addition to the summit. So thank you for being here and for for being my girl friend and for all that you do and for the ladies who have fallen in love with you by now, just like I have.

Where can they find out more about you? You know, you can head over to Janadanielson.com. That's probably the best place to find me. you know, on all the, all the different platforms, Instagram as well.

And, you know, I like that the invitation is open. Like, please direct message me because I know that posting on social media sometimes isn't overly comfortable.

but I am happy to receive messages and, you know, respond and create some clarity where maybe there needs to be some clarity. So I just appreciate everything that you're doing here.

Dr. Sharon, like 3.0 that, for those of you who are, you know, watching summits in the backside of summits, if you've ever been, host of a summit, not many people make it to their 3.0 so beautiful host of yours is, really charting new territory.

Closing Thoughts and Where to Find Jana

And it just speaks to really doctors there. And it speaks to who you are as a person and how you show up and the people that you draw in that, that this is in its third and then its fourth iteration.

And thank you for thank you for helping and being a part of such an amazing phase of our lives. Menopause, how we how how we're told we should dread this phase.

And it is it's it's it's just a a beautiful, existence of womanhood when you have the right support and knowledge and are inspired to be an active participant of it versus letting it happen to you.

So thank you for that. beautiful words and thank you. I take that in because I, I feel like I've been, you know, asked to to guide and be the keeper of menopause and help women because there's so much misinformation out there and it does take a lot of time and energy.

And especially we have a brand new clinic opening up. But I said, no, I'm going to do the fourth one too. So I just committed to that because the feedback I get, I know that those listening, even like you said, one little tidbit if you now stand on your heels, it's like, then it was worth it for me because I've helped to positive effect.

And you hear these conversations and I want you to get where where we are. I don't want you to just be like, no, that's not for me. I want you to really own.

Like, yes, this is a sacred second act in my life, and it just keeps getting better and better because it actually does. So thank you for saying that.

Thank you for being here. Thank you, everyone for being here. What a great talk. I just want to give you all a hug. So I'll be back with another conversation.

but I'm going to listen to this one on replay, so I hope you do too. And thank you, thank you, thank you. You're welcome. Bye bye.