Introduction to Dr. Gersh and Integrative Womenu2019s Health

Hello. Welcome back. It's Dr. Jen. We are going to talk about why estrogen matters for optimal thyroid health with Dr. Felice Gersh. She is an MD and has degrees from Princeton University and University of Southern California School of Medicine and is fellowship trained in integrative medicine from the University of Arizona School of Medicine.

That's where I trained in integrative medicine. Also, she is a multi award winning physician with dual board certifications in ob gyn and Integrative Medicine, and she's the founder and director of the Integrative Medical Group of Irvine.

So I am so excited to have her on. Not only is she an expert in her field, she is a lovely person inside and out. So welcome, Dr. Gersh. Tell us a little bit about your practice and what you've been up to and your books and everything.

Well, I have what I consider a comprehensive health care center for women, incorporating both the evidence based, efficacious therapies that are conventional medicine, whether it's surgery or pharmaceuticals.

But also I have what I call my expanded therapeutic toolbox that I incorporate Herbals and Mind-Body Medicine, different types of things, essential oils.

And we do a lot of lifestyle medicine, so we have a little gym in my office, we do fitness assessments, a lot of nutritional consulting sessions and so on.

So we do run the gamut of therapies available to help every woman at every stage of life to optimize her health, and therefore her happiness. I love that.

And it is it's everything. You can't just go to one doctor that focuses on one thing. They have to incorporate all the things, including thyroid, right.

So y yeah. So, you know, your ob gyn should be talking to you about thyroid because you know, thyroid and estrogen do play a little dance together. So let's talk about estrogen, which is the female hormone.

What Estrogen Is and Why Estradiol Matters

So what is estrogen and where does it come from in women's bodies? Well, many people don't understand estrogen and it's misused so much. And that term that is thrown around, estrogen dominance, which makes people fear and dislike estrogen.

So very basically, estrogen is not a specific hormone. It's a family of hormones. Like everyone understands. There is a family of B vitamins. It is B1 all the way up to B 12.

And there are different estrogens and there are numbered E 1 to 3. And now there is a four out there and E two which is 17 beta estradiol, which we usually shortened to estradiol is e two and then e three.

Estriol is the dominant estrogen produced by the placenta during pregnancy and E one estrogen lives in a balance with E two in reproductive age women, but in postmenopausal women and in women who have a lot of adipose tissue obesity, they will often have an excessive production to fat tissue of E1 estrogen, which creates a significant imbalance and then there are many endocrine disruptors out there in the world called Xeno Estrogens that can bind to estrogen receptors and affect production.

All kinds of different ways that they can impair hormone function, and particularly estrogen, particularly estradiol. And these are often mixed up with estrogen.

In fact, chemicals that are pharmaceuticals, like ethanol estradiol, which is the typical so-called estrogen found in oral contraceptives is technically and you can go to toxicology.gov part of the National Institutes of Health website and it's listed officially as an endocrine disruptors.

So there's so much confusion about estrogens and basically the estrogen E2 estradiol that's made by the ovaries is the estrogen that I now call the life hormone.

It's always been called a sex hormone, but I call it a life hormone because it's involved in every aspect of health, every single organ system, including the thyroid.

And it's essential for optimizing health in women. And it's so under, you know, understood, underappreciated. So I'm like the cheerleader for estradiol for all women to understand that having the right amount in the right timing because it's a rhythmic hormone that having it right in the body is essential for health of women.

It's that simple. I love that. How you're, you know, hyping up estrogen and estradiol. And it's so true because it does have a negative connotation and a lot out there.

And in I like to tell women it makes us special. It makes us be able to multitask. Like I always give the example, like, you know how your spouse cannot multitask.

Like it's not his fault he doesn't have mustard. I'll give him one thing out of the time. So I think when we understand our hormones a little bit better than we appreciate them and we can embrace them so as to dial does have a relationship with the thyroid function.

So could you tell us a little bit of how they interact? Oh, absolutely. So there's a multitude of ways and many women who have had low thyroid know this when they get pregnant, they need to be monitored very closely because they often will need to have changes in their thyroid supplementation.

You know, whether they're on a a T for product like a synthroid or so for levothyroxine because estrogen affects the binding hormones that bind thyroid as well.

How Estrogen Supports Thyroid Function

Estradiol affects the function of the thyroid receptors. So if you don't have enough estrogen present and I'll use the word estrogen, but just know you already were taught that estrogen is a family and we're talking less, we're talking pregnancy, we're talking estradiol e two.

So when you have adequate amounts of this estrogen, you will have functionality of thyroid receptors. So think of it. I always use analogies, so think of it as you have a lot of mash ups for a baby, baby food and the baby has learned to hate the smell and hate the taste of mashed peas.

But you really want to give your baby match peas. So you have made this big bowl of mash peas and you try to get it in, but the baby goes, Nope, I'm not going to let that get into my mouth.

You know how babies can be and they'll push it out with their tongue. So if you think of the baby's mouth of the receptor, it doesn't matter if you have bowls of mash peas, right?

If the receptor isn't receiving today, it isn't going to have any effect on that little baby. So if you have thyroid receptor orders that are essentially like closed up and they're not allowing the thyroid to get in and do the job, you can have normal levels of thyroid when you do a blood test, but functionally you are low thyroid, you're hypothyroid because the thyroid isn't working.

We know this very well when people talk about insulin resistance, so you can have plenty of insulin, but it doesn't work well. So guess what? Your blood sugar goes up because insulin, which has a multitude of functions, one of which is helping to transport glucose into cells which need it, but it doesn't work properly.

So the receptors are not like up and running well. So you get an, you know, unacceptable high levels of glucose in your blood. So you that's why it's so tricky for women when they are like menopausal, they'll go to their doctor and they've gone on doctor Google and they have every symptom.

See, I have every symptom of low thyroid, clinically manifested, low thyroid symptomatology. And the doctor measures the thyroid and says you're within the reference range, which is another whole story, right.

About reference rose is optimal, but they don't get it. They think reference is equal to normal and they say your thyroid levels are fine. So here's some Prozac.

You're obviously a psychiatric case and they really are functionally hypo thyroid because they don't have any more estradiol being produced or very low levels as they're transitioning of thyroid, not malfunctioning in the receptors because of low production of estradiol from their ovaries.

And the doctors aren't getting this. Even the endocrinologists aren't. And they don't see that when you lose your ovarian production of estradiol or it could be like your body is filled with endocrine disruptors that are altering the way that estrogen is, working with the receptors that they can have, effectively a low thyroid state, even though their thyroid hormone levels are normal.

So it's so important for women to optimize at every stage of life their ovarian health. And, you know, we talk about as long as you can prolong your ovarian function, you're better off.

The sooner your ovaries stop functioning and making those vital life hormones, the earlier you start progressing into the aging cascade. You know, because they've always talked about aging as how many years you've lived a chronological thing.

I don't see it that way. I see it as deficiencies, primary deficiency of estrogen, and that leads to deficiencies of functionality of thyroid and also the gut.

So the GI tract, I'm sure you've talked about that the center of the universe of the body is really the GI tract. Well, estradiol modulates or regulates the microbial population.

We call the microbiome the collective of all the different microbial life forms in the gut, where there are trillions of microbes living in there and they are very active, they're producing neurotransmitters and vitamins and short chain fatty acids.

These metabolites of fermentation and estradiol maintains a certain healthy, optimal microbiome, which maintains the integrity of the gut lining, which helps to keep things right.

And when you have the wrong gut microbiome, you end up in a state of inflammation and altered immune function. And that's what can be the trigger, because you have microbes in the gut leaking into the body, activating the immune system to produce antibodies against these specific microbes.

Well, it turns out we all life forms every life form on the planet has very similar nucleotides like our DNA or RNA. They're all similar. And that's why every infection, every vaccine has some degree of risk of creating an auto immune response.

But if it's a very short lived, you get on with it, you know, recover. But what if you have ongoing leaky gut and you have these microbes which are essentially like a chronic infection, getting into the body?

Well, that can trigger Hashimoto's. Women are much more prone to developing autoimmune disease, including

Hashimoto's thyroid itis, and it's not recognized that it's linked by many doctors and people in general, linked to the health of the gut, the microbiome of the gut, the integrity of the gut.

And when you don't have right estrogen in your body and unfortunately just apply it to everybody. As I mentioned, ethanol stridor, which is in birth control pills, is not a human estrogen.

It's an endocrine disruptor. And we do have some data.

Estrogen, Gut Health, and Autoimmune Thyroid Disease

No one wants to do too many studies on this. Nobody wants to know, I guess. But when you were on birth control pills, you have an altered gut microbiome and that can also predispose to certain autoimmune conditions.

Crohn's disease has had the most research, but also autoimmune thyroid and women with PCOS, the most common endocrine disorder of reproductive age. Women have low production of estradiol altered gut microbiome.

This has now been reproduced in many research studies and they also have significantly higher rates of Hashimoto's. So you can see, I mean having the right balance of estrogen throughout the entire life of a woman is essential for normal functioning of of thyroid and preventing autoimmune thyroid. Yes.

And I think what you said that people need to realize that birth control is not estrogen, it's not estradiol in the sense it's an endocrine disruptor.

And it's it's going to hurt the gut health, which then will hurt her ear autoimmunity chance in you know, propel you into something like Crohn's or Hashimoto's.

So when we look at putting a Band-Aid on these medical problems, such as, you know, oh, here's Prozac or here's birth control, no, we should look at balancing these hormones and really embrace our estrogen.

So what are some ways that that we could do that if someone's out there and they're like, this sounds like me. Oh, this is like overwhelmingly you? I mean, unfortunately, it's so prevalent now and it is so important that women sort of embrace their hormones.

And so for women who are in the reproductive years understand that when you have systemic inflammation which underlies like pretty much every bad thing that happens in the body, when you have inflammation, it's going to be involving your ovaries, too.

In fact, they did some studies with women with PCOS who generally speaking are very inflamed, you know, and they're just have high levels of systemic inflammation and low estrogen will result in systemic, total body wide inflammation because this is also not well-recognized estrogen.

Estradiol is a modulator of the immune system. Every immune cell in the body, whether it's the innate immune cells that's like the mast cells and neutrophils and macrophages and so on.

The monocytes, they all have receptors for estrogen and the adaptive immune cells. They're the ones that make antibodies, the B lymphocytes. They also have estrogen receptors.

And estrogen in the form of estradiol is like the operator of the switch. So inflammation when appropriate, like you have an infection or you have trauma, an injury, and you need to activate your inflammatory response.

It's estrogen that triggers the on switch to create inflammation, which is lifesaving. Like that's why, you know, you don't. Women, by the way, tend to survive infections better during the reproductive years than do men unless they're pregnant.

That's another whole story, because the hormones are very modified in pregnancy to allow the body not to attack

and kill the foreign entity, the fetus.

So that's a compromise that the immune system makes not to kill off the fetus, but then to have a little lesser ability to fight off infections. That's why pregnant women are more prone to worse outcomes with COVID and flu and chicken pox and so on.

But if we take pregnancy out of the equation, women fight off infections better than men. We know that with COVID, women had higher survival rates and less hospitalizations and so on.

So the on switch to create inflammation is controlled by estrogen, but then also the off switch, because you don't want uncontrolled inflammation. So if you don't have enough estrogen, you won't trigger the proper response to injuries to infections, and then you don't turn it off.

So you end up in this clot like state of inflammation. And what happens when you have chronic inflammation? Well, it's part of the body's survival mechanism.

So you want to not go into shock. So your arteries will constrict and your heartbeat will go up. Your GI tract will stop working because if you're in a state of like running for your life, you know, digestion of food is not like your priority.

So you're going to end up with a whole array of sort of symptoms that are related to chronic inflammation. And when you have this chronic inflammation, it will also affect every organ, including your ovaries.

So if you have chronic inflammation, by the way, chronic stress where you have high levels of cortisol all the time, will also trigger this same type of a problem.

So you and they did a study with women with PCOS, which who have chronic inflammation, low estrogen and gut dysbiosis and leaky gut and all that. And what did they find?

They found that when they pulled fluid from around the eggs, what they called the follicular fluid, it was full of inflammatory cells, immune cells like the ovaries were actually inflamed.

Chronic inflammation is an elevation, an accelerator of aging, including of the ovaries. So you get worse quality eggs and you get degeneration of eggs.

So you'll have fewer eggs. And eggs you have will be less functional. They're not going to be good for making babies either. That's why obese inflamed women, PCOS women have a lot of infertility problems and they even when they do IVF, they often they have the highest failure rate.

So what can you do? Everything you can to keep inflammation down. So there's an anti-inflammatory lifestyle. I'm sure many of your viewers have heard about this.

It's eating a plant based diet, which our plants are like magical. So they have all these like call it the special sauce, these polyphenols that are like special things and there's like quercetin and resveratrol and luteal ends and Lutyens and still beans.

And there's like a whole like so many of these different polyphenols, many of which, by the way, are phytoestrogens. They're not estrogen, but they get they actually combine to estrogen receptors very, very weakly and create tremendous health benefits.

And of course, they have fiber which feeds and nourishes your gut microbiome to maintain that healthy gut you need. And they have lots of antioxidants and of course, all the nutrients because you can't run the cell machinery of every cell if you don't have the nutrients, all the vitamins and minerals and so on.

And a little bit of animal, but not too much. A little bit of saturated fat, but not too much. And then it's not we know. It's just what you eat. It's when you eat as well as how much you eat.

So you want to get into a timed regimen. We eat most of your food during the day, not at night. You know, don't snack all the time and try to push more of your food into the first part of the day, if possible, because that's when our digestive system works the best and we're more insulin sensitive.

Lifestyle Strategies to Reduce Inflammation and Support Hormones

So we won't have such a big rise in blood sugar or insulin because we don't want that. We want to keep things level. We don't want high blood sugar. High blood sugar is a very pro-inflammatory type of a system because we know that causes Glycation.

Glycation is like what? Like rusting of our proteins in our body. We do not want to do that, so we want to eat the right food and fitness. We have such a sedentary society now and fitness is a vital sign.

We do fitness assessments on all of our patients body compositions. We now know that just doing a BMI is not sufficient because we don't really know just from a BMI how much fat you have versus muscle and so on.

So we definitely want to measure these things that we can monitor. So we want to add fitness in. And then I mentioned stress. So we do a lot of mind body medicine.

Chronic stress is in, you know, an age. They always look at the presidents, you know, here they are. They look pretty decent now to eight years later, they look 25 years older.

And so we know stress will accelerate aging, and that includes aging of your vital ovaries. So we want to have fitness. We want to sleep properly. I can't emphasize the importance of sleep when everything in the body is kind of rejuvenating.

So and then avoidance as much as humanly possible of chemicals, toxins, you know, toxicants that are, you know, in plastics and flame retardants and pesticides and herbicides and heavy metals.

And so everyone should have water purifier and an air purifier and as much as humanly possible to buy organic food and not use plastic storage containers, not heat in the microwave and plastics and and so on.

Beware of takeout containers. They're, like, coated with, you know, poison, unfortunately. And the heat of the food causes it to leach these chemicals into your food.

So we have to do all these things. It's that easy. No, but these will actually help extend the life span and functionality of your ovaries. It's not just about fertility.

For some, it is because a lot of women don't get to trying to have kids until they're around 40. But, you know. But so that will help. But also just for overall health status and then in menopause, continue all of the above.

But then my take on it is, yes, menopause is natural. So what? So is gray hair. So some people die their hair because they don't like gray hair. There's many things in the world that are natural, but they're not beneficial.

So menopause was not an issue. I just had a recent trip to Egypt and I looked at all the interesting pictures, the beautiful pictures from 3 to 5000 years ago.

And in the Tombs and in the temples. And everyone was young. It's like, how come everybody was young in ancient Egypt? Because almost nobody lived beyond about 35.

I actually looked at up so the average lifespan if you survive childhood was for a woman in ancient Egypt 35. And between the 12th and the 19th century in the world, you had a 5050 chance of getting to 55.

And so, you know, like menopause was not like the biggest concern because very few people actually got there. It's sort of a new thing, healthy longevity.

We don't realize this. This was not an issue because people didn't live long. But now women can live half of their lives in menopause, but they don't live well.

Women make up 80% of osteoporotic fractures. They have more joint replacements. They have more autoimmune diseases. They have two and a half to three times the incidence of Alzheimer's disease.

Once they hit 65, they have more strokes and more high blood pressure, ruptured aneurysms than men. I mean, so we got to get over this, you know, like living long is a goal, but only if you live well.

And that means having optimal estrogen for all the different issues, including thyroid. I mean, you can't be a healthy person if you don't have thyroid.

Thyroid just like estrogen has receptors everywhere and you can't have healthy metabolic function, brain function. I mean, you're going to have mood problems if you don't have proper thyroid.

So sometimes it's hard to discern like what is due to what because they often things go down the tubes together, right? You get menopause and then you have this whole array of symptoms.

Is it due to low thyroid or thyroid malfunction because of the receptors not having estrogen to make them work? Right, or estrogen having other effects with the endocannabinoid system and direct effects.

It's you know what? It's the whole kit and caboodle, you know. So we got to do it all because everything is like, you know, a spiderweb. Everything is interrelated.

So you can't just pull apart things. And that's what our conventional medical world has tried to do. Like there's an expert on this one thing, like you said, this one thing that know we're a cohesive whole and we've got to look at the female body through every stage as the cohesive whole it is and how all these hormones interconnect and you can't just work on one.

You've got to work on all of them. And I quote like the hierarchy. So but some people are working on peptides and I'm not against peptides, but I think that's micromanaging the body and I don't think we're quite there yet, you know, except maybe specific medical conditions.

But like for healthy longevity, healthy quality of life and overall health, I don't think we could micromanage every little thing. So I have like what I call like the big picture, the the umbrella view and you've got to have optimal estradiol progesterone, thyroid, okay, cortisol, you've got to get those like I'll call them the foundational hormones of health.

You got to work with them. And then don't worry so much about all the little peptides and other types of signaling agents because these are the masters of taking care of those things.

Those will all fall in line if we get these foundational hormones at the proper amounts, in the proper timing. And so, you know, that's the way I see it.

You know, that I'm not smart enough to micromanage everything. But if we work on the fundamentals and do all the lifestyle medicine, we can be really healthy for really long.

Yes, I love all that. And I agree. You have to look at the forest and not just one tree. And you broke it down really well with going through all the different things in the environment and toxins.

And I know it's super overwhelming for people to hear, but you have to realize that our world today is so much more toxic than the world was 20 years ago.

So and I am seeing younger and younger women come in and they're not always overweight. A lot of the times they are thin with insulin resistance. So heading towards PCOS.

So it's everyone has to be careful. And you know, one of the things is, is that sugar is hidden in everything. We've really kind of gotten away from eating fats and proteins and vegetables and fruit.

And now everything's a large ground, a Starbucks frozen drink. Right. I mean, which is like the worst thing you can have your hormones. So I think it's a different world, too.

So are there specific female conditions that make women more susceptible for a low thyroid? I think you kind of touched on some of them. Well, basically, the most common the most like I mentioned, most common endocrine disorder of women is polycystic ovary syndrome.

The prevalence is nobody knows for sure because no one's really keeping data. But it's estimated that it could be now creeping up to as high as a quarter of all women of reproductive age have.

It's a spectrum, you know, so somewhere on the spectrum of PCOS. So that's horrific to imagine. Like a quarter of all women now have this this problem.

I also personally believe that women who on oral contraceptives for many years that they are predisposing themselves. This is like 90% of women is so this is like crazy or predisposing themselves to having malfunctioning thyroid because they don't have human hormones.

They don't have the rhythms of a woman. This is not insignificant. I am not for women having babies when they don't want them. That is for sure. 100% for women's reproductive rights here as an ob gyn.

Birth Control, PCOS, and Hormonal Disruption

But if we don't acknowledge that we're putting in endocrine disruptors into women's bodies to basically destroy their natural hormone production, to destroy their natural rhythms, and create infertility and infertility, even the ancient societies like Egypt, they got this right away, that fertility is a vital sign of health.

Fertility is not separate from being healthy for reproductive aged women. And these hormones that are called sex hormones are really life hormones. They have a function throughout the whole body.

So I favor, you know, responsibility and using a barrier method, whether it's a gel, you know, condoms. And if you're regular, you add in every every tool in the the box, you know, rhythm and that old fashioned method, which I still fit patients in my office.

Most people don't even know about it anymore, which are diaphragms. And you can use two methods at the same time to barrier methods. And the only reason that these get a bad rap isn't because they're not effective.

It's because there is such a thing as use effectiveness and theoretical effectiveness. Theoretical effectiveness means that you use it correctly every time, and theoretical effectiveness for condoms is like 98%.

For diaphragms, it's like 95%. And you can use them together even now. What use effectiveness that's well, what do people really do? Okay. So if you say condoms is my birth control, but it's not being used because they're less you know, they're in the drawer somewhere.

Okay. So they're not used that actually goes into use effectiveness, but it wasn't even used. So that's where taking responsibility and understanding that these are chemical endocrine disruptors.

And by the way, that includes the levonorgestrel embedded IUDs, which is a systemic dose of this endocrine disruptor for progesterone, which also is an endocrine disruptor as well for testosterone and aldosterone.

It's not just affecting one hormone. It has a multitude of hormone effects and it's absorbed systemically. This has been proven, especially the first year or two, because it does decrease over time.

But the first year or two, there's really significant, really high levels that are absorbed in throughout the whole body and people just need to know that.

So I call it informed consent, at least know what you're doing and then decide how long you're going to do this because you're affecting in women using that type of IUD, over half of them stop ovulating.

That means they're not having rhythm, so not having the right amount of estrogen produced from their ovaries. So these are not just a local effect. So people need to know that they're putting endocrine officially.

This is not like my theory. This is official. Okay, that putting endocrine disruptors designed to make their bodies not function normally and that and these women are really increasing the risk for autoimmune disease among other issues, like not having optimal bone and and not having, who knows with their brain.

And also there's actually data published that women who start on birth control pills in their teens. I think it's after they just so many women are on it.

It's hard to get a control group out of the group, you know, because but women who start on birth control pills in their teens have a higher lifetime risk for having cardiovascular events like heart attacks and strokes.

And we know all these conditions are interconnected. That's why it's always not shocking to me, but seems to be to other people that they say, oh, women who have more bone fractures due to osteoporosis tend to have higher rates of dementia.

It's like because it's all about inflammation, whether it's in the brain, in the arteries, in the heart, in the in the bone, wherever. Okay. So inflammation increases when you're on these oral contraceptives.

That's why they increase blood clots. Everybody knows, oh, it's not an isolated thing. Blood increased blood clotting is part of the inflammatory response, you know, so that you don't bleed to death or you walled off.

Part of clotting is walling off abscesses and so on. It's part of the inflammatory response. But you're going into a proinflammatory state all the time when you're on these chemical endocrine disruptors.

So I know I went into that a lot, but you asked me, like, this group is like 90% of women in the reproductive age range. So they are all increasing their risk of autoimmune diseases along with a whole multitude of other things.

And it's not being talked about enough and they're predisposed to PCOS because when they go off of it, nothing is working right. It was like their their ability to make estrogen in their ovaries has been sort of like rusty.

And they don't some women don't do it well. And the precursor to making estrogen in the ovaries, testosterone. So but testosterone is a different making.

That is a different skill set than making estrogen. So they make a lot of testosterone, but they don't convert it efficiently into estrogen. So they go off birth control pills and suddenly they have PCOS, you know, because they have all this testosterone and they have acne and all the terrible symptoms that go along with it, which dramatically alters the gut microbiome, even worse because it's already altered from the birth control pills.

So we're creating health problems in women, and we need to be honest about it and think about, you know, what the options are for you, what you're willing to do to not put these chemicals into your body.

Or if you do, can you do it for a shorter possible time as you can get away with? And you know, PCOS is a combination of genetics and a lot of lifestyle.

So there's now been evidence that women with PCOS tend to have higher levels and earlier exposure like in utero of BPA. This phenol, which is found in all hard plastics and in canned liners, it used to be it may still be in like, you know, the dental sealants do not get cavities for kids.

You know, they're putting in BPA in their mouths. And the bottom line used to be in baby bottles. They took that out, but then they replaced BPA would beeps and BPF, which are equally, if not more toxic.

You know, these like replacements are not good. There's no such thing as safe plastic, just don't think if you buy anything that's plastic and it says BPA free, it's okay.

It's not it's just a substitute chemical that's bad for you, too. So it's really important to have these chemicals in your body because they predisposed to conditions like like PCOS, which is why it's like whoop exploding as an epidemic.

And these are affecting our thyroid. I mean, so that's why I mean, thyroid disease is an epidemic now Hashimoto's is an epidemic. I test thyroid antibodies in all my women patients and I find lots of antibodies.

Sometimes it's preclinical, their thyroid is still producing enough thyroid, but it's who knows where it's going, but they ask autoimmunity involving their thyroid, but the conventional medical doctors are not even testing, so they don't even know that all these women have thyroid autoimmunity.

So if you know that would be another important thing, make sure you get tested to see if you have thyroid globulin antibodies and anti anti TPO. So we got to know, you know, not having knowledge is not going to make things better.

I like I love measuring. So we can monitor and know, you know, we want to know what's your inflammation status, what's your thyroid status and don't just get it to sage.

I'm sure you've talked about, you know, you want to get a free T3 of free T4 and you want to get the thyroid antibodies and look at the whole array of hormones and work on lifestyle and menopause is universal.

So I have no escape for that. We just want to try to put it off as long as possible by maintaining non inflamed, healthy ovaries and that's, you know, and then when menopause comes on the big advocate for bioidentical hormones because I don't care that it's not natural, the alternatives are very negative.

So, you know, we do lots of things that aren't natural, like artificial joints, like cataract lens replacement, like pharmaceuticals, like stents in arteries, like what do doctors do that's natural.

Menopause, Healthy Aging, and Bioidentical Hormones

So by going on bioidentical hormones and getting physiologic sort of more like a something of a rhythmic kind of a dosing, we can prevent all that bad stuff, you know, so you don't your joints replaced, you don't have fractures, you don't have dementia, you don't have cataracts or glaucoma or macular degeneration or heart attacks and strokes.

What if we could prevent all of that by being on hormones and doing what? The lifestyle stuff. And you know what? I really believe we can and I'm doing it in my practice all the time.

And of course, in the younger age groups for women who want to be pregnant were really, you know, upping their chances and improving their fertility by improving the health of their ovaries, which in turn keeps their thyroid humming along.

Yes. Like home run with everything you said and I think we do have to realize that aging and inflammation, you know, inflammation is going to accelerate aging.

And we really have to slow that down and really pay attention. When you go to your doctor's office about informed consent, bring in labs that you want, be an advocate for yourself, and you're very knowledgeable if you're listening to this summit, you're going to have lots of knowledge to take with you.

So keeping your an advocate for yourself, especially when it comes to women's hormones, I feel like there is not a

lot of informed consent, especially like you were saying with the IUDs.

They are systemically absorbed. You're putting something in your body. So I think you said putting out this health summit and and educating, you know, this white group of women because it really is critical that we all take responsibility and become our own best advocates.

Absolutely. Thank you so much, Dr. Gersh, for being and sharing your wealth of information and all your expertize and experience with our listeners. So how can our listeners find you, your practice and you lecture a lot, go to conferences, tell us all about.

Where we go.

Where to Find Dr. Gersh and Closing Remarks

I am in different places, but most of the time I'm here where I am right now in my office in Irvine, that's Southern California, Orange County, and it's called Integrative Medical Group of Irvine.

And I also do an Instagram live and I'd love for you to follow me and sometimes like me and, you know, let me know what you'd like me to talk about. And I have three books out and I have plans for more and I can do telemedicine to a large degree.

But, you know, sometimes I have to do in-person. I have to follow the laws of the land. But we can see lots of patients all in California. We can do all telemedicine if needed.

And in other states, you just need to see me once or twice a year. But they can combine it like people do vacation in Southern California. And so I love I'm a brick and mortar practicing doctor.

I see patients, I do exams, I do everything hands on, but also telemedicine. Like I said, I combine it, I blend in. And so here for you, in any form or fashion I can, whether it's Instagram live book or in-person.

Awesome. Great. Thank you so much.