Everything You Were Told About Weight Loss Is Wrong Transcript

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Introduction to Root-Cause Wellness

One of the biggest questions that conventional medicine doesn't ask is what are the habits and behaviors and inputs that are driving us to this point, right?

I'm fascinated at how many people are either told they're normal and don't feel good or ultimately are diagnosed with hypothyroid, whatever it is, and we're never asking.

Hey, what time do you go to bed every night? What does it look like before you fall asleep? what does your nutrition look Like? And I think that's really that behavioral piece alongside the information that the GI map gives us is great.

But I really comes down to that behavior piece. If you're overwhelmed with chronic health symptoms and still don't have answers, you are not alone. I'm Dr.

Javan and on redefining wellness with Dr Javin, we'll be exploring root causes like Lyme disease, mold, and parasites. And I'll guide you with simple and practical steps towards real healing.

Hello and welcome back to another episode of redefined wellness podcast. I am your host Dr, Javon Moore. Today I have with Gillian Harberchuck and I want to tell you a story today about a patient.

We're going to talk through a little bit of this. You've been to 11 doctors. hurt that story so many times, four years, ran the blood work with the main doctors, mainstream doctors and the next doctor and next the doctor.

She's told, maybe you need a depression or anxiety medication, Maybe it's just getting older. Maybe is gaining weight. Who knows what is that's going on?

But that she's kept getting bounced from person to person. And today, Jillian is going to talk to you a little bit about what tests were ran versus what test should have been ran because the reality is we've all been through the physical and every other test and been told at some point if you've got chronic conditions, Things look normal.

I'm not finding anything. So you've been there, you felt that. Jillian, talk to us about what happened in this situation. Yeah, thank you so much for having me.

I'm always really excited to open up more dialogue around this conversation. And obviously this topic is very near and dear to my heart with my own personal story.

Jillianu2019s Hashimotou2019s Diagnosis Journey

But essentially I was one of those women who had been Googling hypothyroid symptoms over the years because I feel like I have all of these, but my doctor always says I am fine when I go in, get my annual checkup, and get blood drawn.

It kind of all came to a head really when I started building my business and stress piled up, you know, just allostatic load on my body had, had exceeded its capacity.

And I went to the doctor and I was like, I actually can't, like I can live like this anymore. I'm not okay. And they ran labs and they were like, listen, this is just like kind of how it goes.

Like you are a mom, you're busy, now you say you own a business, like life is stressful. People are tired and people can't lose weight and that's just the way that it is.

And I had just kind to reach my breaking point. I remember leaving that appointment really frustrated and sitting in my car afterwards and being like is this it?

Like is actually the standard that I have to live with for the rest of my life. And going down these rabbit holes and discovering functional medicine, I was like, OK, this is like my Hail Mary.

If I do this and they say everything is normal, like I will close the book, i will accept my fate, and this Is just what I Have to learn how to tolerate.

And it was incredibly eye-opening to start to learn the difference between normal conventional ranges and optimal ranges, and correlating that with symptoms and all of these things.

And when I've got those labs with a functional provider, just some random person I found on the internet, I brought it back to my doctor. I'm like, hey, is there any weight to this information that I am presenting?

And he was like actually, yeah. You know, your free T3 is incredibly low. Your antibodies are high. It's probably time to like get an ultrasound on your thyroid.

And then from there, they were like, gosh, you've got some nodules. We really should do a biopsy and thank God that biopsie was normal. But it was really eye opening to see, Hey, I had to jump through a lot of hoops to get these answers.

Why did I just have to go pay thousands of dollars when you told me everything was normal and that I was fine? And then all of a sudden, you know, this cascade of being referred to endocrinology and finally being diagnosed with Hashimoto's.

And of course, nobody wants a diagnosis, but we want answers to validate that we don't feel good and our quality of life is suffering. You know, all of this is, again, super important to me.

And really, it's not anything against doctors. Doctors aren't doing anything wrong within the way that they practice medicine. I think that's really what's broken in the healthcare system is that we are just waiting around for people to be diagnosed and cross a disease threshold while they're suffering in their day-to-day and their quality of life is suffering.

I really just want to arm people with the information of like, hey, if you don't feel good, something probably is off and here's how to advocate for yourself and really get answers.

Yeah. I mean, I tell people every single day I go, the Western medical model in general, as a whole, If you go through DO school, MD school NP school RN school you learn an incredible amount of information about crisis, emergency medicine, saving a life, you learn a tremendous amount about that.

You spend an hour or two on nutrition. I mean, how many medical doctors out there right now are going into social media and being like, I don't know, there's just some trend I saw it was like a quiz.

You know, how many hours did you spend on nutrition through your entire medical degree? One, is what the guy said, medical doctor. How many of hours would you spent on basically anything that's quality of life management?

That's not crisis management. You now, a total of like 20 hours and 8, 10, 12 years. These doctors go to school forever. And I think that the misnomer that people don't really understand, and it's also not the way that insurances operate.

Insurance are, again, built around a model that is completely emergency medicine derived. So, therefore, if you go to a doctor and you're not going to die soon, even if, you feel like it, nobody's there to save you.

And you have to go and research and find out and figure out, take care of yourself. Honestly, unfortunately, You

probably are going have pay for it yourself, too, because insurance and medicine are both designed around emergency medicines.

I'm going say they're phenomenal at that. I'm not so sure how good or trained because I have several medical providers on my team and they've had to do extensive training post medical school, post residency to even talk, get the information that you've already talked about with pushing for Hashimoto's and functional lab ranges.

So, all right. I started off with saying that, you ran some labs differently, found different ranges, nine different ones that helped you to identify where you're going.

What were they? So these are super controversial in conventional medicine.

Why Conventional Medicine Misses Chronic Symptoms

And it's interesting, even in the work that I do with my clients, the presentation of something like a Dutch test or a GI map, which are two of the nine.

They tend to get shut down immediately. Like there's, you know, they don't like the research around it or they, don t find it to be valid information.

But at the end of day, I'm like, Hey, if this is the picture we're looking at, You don't disagree with the protocol that we're implementing for these, these women, right?

And it's very centered around nutrition and stress management and finding more joy in your life and moving your body and building muscle. So it. It's interesting that there's so much controversy and arguments around how to get from point A to point B, but at the end of the day, We really all want the same thing for our clients, for patients in terms of health and quality of life.

So the GI Mop stool test was, this is like my favorite test hands down. And I think that through my personal experience and now through work, learning how impactful the gut is and how effective it can be to start there when you are addressing symptoms that people struggle with all day, every day beyond just bloating, right?

The fatigue, the brain fog, low libido, all of those things. I'm always like, okay, let's look at the gut first. So that stool test is incredible. The Dutch hormone test I think is amazing for looking a little bit deeper at sex hormones and just how effectively your body is using that and more than just that snapshot of cortisol in the morning when you get your blood panel, we want to see like, how is your body tolerating this day-to-day life?

And it can be super eye-opening when we correlate, especially for a female, your cycle and the fluctuation of your hormones or lack thereof. And when it comes to thyroid specifically, free T3, which is the active thyroid hormone, was really the most eye opening thing for me to learn.

Okay, most doctors only test TSH, maybe TSh and T4, but that doesn't tell us like, what does our body have to use? So that, and then the thyroid antibodies, TPO and tGA were also neglected in all of my appointments and.

I did a lab review on a client recently who had, by conventional standards, normal TSH and T4, but her free T3 was incredibly low and her antibodies were in the 500s.

But she had not been diagnosed with Hashimoto's yet because they had only looked at her TSh. So it's just interesting to see. I'm glad there's more, obviously, conversation around this through our work and all of the other people who are doing this.

Fasting insulin, ferritin, homocysteine, sex hormone binding, globulin. I think that's my nine. Those were really kind of the key difference makers for me when it came to my gut, my cortisol, and just my stress and lack of regulation in my life.

Just really putting those puzzle pieces together to see, okay. I know stress is my biggest driver, but like what is the cascade that I've experienced so that i can kind of reverse engineer and really get to the root of what I'm navigating so, that, I can of course have symptom relief versus symptom management like conventional medicine tends to lean towards.

And also make sure that I am managing my health long term, not just getting this brief moment in time of relief and then falling back into my old ways and patterns and keeping that cycle going.

So I think that functional labs or just deeper labs in general are not the answer to everyone's problems because they're just more information. But I think the validation and the psychological component that comes with that is really, really powerful when it comes to helping people get healthy and feel good.

Well, let's get into a couple of these labs because I thing it's fun to chat through what they really are and help people to understand why there's value there.

So let us just jump into the thyroid for a moment. I run nine thyroid tests when I ran a thyroid. That's just kind of the standard start point for me.

And some of them I'll say maybe they are not always required, so my next lab run may be a little bit less. But the standard is, the gold standard's TSH.

You mentioned that T SH is not technically a thyroid test. So first of all, if you're listening, The thyroid tests that you run on your physical is Not technically testing something coming from your thyroid.

It's testing from Your pituitary gland, which then tells your Thyroid to work. For me, that's step one. Let's just call it what it is. It's educate people because education, knowledge becomes power.

And that is what people want to know. So then if you're testing the pituitary gland that telling the thyroid to work and it's high or low or off or not off, there can be a dysfunctional signal between the two of those that leads to what you said, TSH not telling thyroid produce T4s and T3s correctly.

Then we see this situation with T 3 and 4 where You have a normal TSH and then a low, I see it all the time every day, T3 or T4 because, oh, maybe you have gut problem and you need your gut to work for those to be converted properly, to used properly.

You also need you liver so the body's not just by itself. So when you go to your endocrinologist and they go, well, your thyroid's great. Well, what about.

Your digestive tract in your liver and your muscles that all play a role in this thing. So if you run a T four and. Your numbers are not, there's T for total and free.

If your numbers or not. Oh, let's say above eight and above one point. I'm not usually happy. You run at three and a tee three total, and you're numbers aren't above.

three and a hundred for the two different ones, I'm still not happy. And that's what is called the functional range.

The Nine Functional Labs That Reveal More

There's a difference because at 76, your T3 is technically medical range, but you also may not want to get out of bed and have thin hair and nails breaking and dry skin and constipation and probably some sort of depression.

This is where functional meets Western medical. I'll also say this, as somebody who works with complex chronic illness, I do agree sometimes with the emergency medical numbers in a way of that's probably not causing your 10 out of 10 problem.

It might be causing you four out 10 problems. So then what else is there? And that is where you said also a GI map, which I'll just say this, I don't run a ton of them.

Partially because I run organic acid that I already test for GI bacteria. Pick your test that you like for that information. But getting a root cause?

or something to grasp that's causing something is like a must for me. So when you look at all these labs, you have thyroid that you need to make sure you know what's going on there.

Yes, we have autoimmune conditions. Yeah. You can have decreased thyroid. How do you see thyroid movement happen when your working with getting the gut corrected?

So if you correct a GI map, does the thyroid get better? Yeah. So I think that, you know, when it comes to the gut, it's more than just like what's actually going on in the guy.

I. Think that one of the biggest questions that conventional medicine doesn't ask is what are the habits and behaviors and inputs that are driving us to this point, right?

Because the GI map is cool. Sure. We find imbalances, maybe we find inflammatory markers, we found exactly why you're bloated every day at 9 PM and you don't know why, but at the end of I'm fascinated at how many people are either told they're normal and don't feel good or ultimately are diagnosed with hypothyroid, whatever it is, and we're never asking, hey, what time do you go to bed every night?

What does it look like before you fall asleep? What does your nutrition look like? And I think that's really that behavioral piece alongside the information that the GI map gives us is great.

But I really think it comes down to that behavior piece. And obviously, as you know, you are a doctor, I don't diagnose anybody. I get that information and I say, okay, but how are you living your day-to-day life?

What are the drivers that led you to this point? you do have intestinal permeability, you have immune activation when it comes to Hashimoto's and the progression of that.

So I think one of the biggest things when something like Hashimoto specifically in the gut is you know, that gut lining or that intestinal permeability that happens.

And I think that's what can contribute so heavily to a lot of that like brain fog and fatigue and waking up exhausted and just feeling stuck when it comes to that.

what's actually happening in the liver and in that gut when it comes to the conversion of hormones and the packing and detoxing and getting rid of things out of the body.

I think that's really where a lot of that breakdown happens. But when we have this intestinal permeability and when are in an inflamed state and bloated and have food sensitivities out the wazoo because you've had this progression over time, Then there's this cascade.

Again, there is what's actually going on in the gut, but I think also when there are things going in our gut and there're imbalances and somebody is sensitive to all of these foods, well naturally they don't want to feel that way.

So what do they do? They eat less and it might not even be intentional. Now we're eating 1200 calories. We've got all these food sensitivities and this inflammation happening.

And now we have this down regulation of the metabolism because we are only eating 12 hundred calories because speaking from personal experience, I wanted just one day once in a while where I wasn't bloated.

And at a certain point, the only answer to that was not eating. So I think there's a lot of, again, actual things going

on inside of the body, but also habitual in your inputs and the psychological component that connects those dots as well.

Yeah. I mean, you mentioned stress at the very, very beginning. Stress, adding a role, sleep, another role. Dietary intake of good things, GI map. all of that playing a role that leads down the path to the autoimmune condition that so many people get diagnosed with.

I mean, women are three times to four times more likely to get an auto immune condition. And then you're also looking at thyroid, which is not diagnosed well 80% of the time, at least.

The statistics I've seen are something the effect of 80 percent of people on thyroid medication don't actually feel good. They don t feel like the symptoms that they came in for were a relief, they just have another pill to take.

Well, yeah, and if you have this gut imbalance and you're not absorbing nutrients and have low stomach acid and now our body is not getting the raw materials it needs to do its job effectively, it's really just this tornado of problems, all overlapping at the end of the day.

But yeah, it's sad to hear people are like, okay, this is very plug and play, like okay you have this symptom, you got this diagnosis, here's this medication, and maybe there's a side effect to that and that's depleting your nutrients further, but we don't have the answer to.

Or we're just not solving the actual problem. We're not answering the right questions. And again, I don t think that s any fault of the doctors and and I was very angry at my doctor those all those years ago before I Was diagnosed but then I realized he's not the problem He is doing exactly what he is here to do for me in his position and in His role and i do think that we could be more open in these conversations I mean i've been stitched recently by doctors on instagram that don't like my take on things but i'm like hey We all want the same thing.

We just want people to be healthy and feel good.

How Gut Health Affects Thyroid and Hormones

And I think we can have a much more open dialogue and a more collaborative environment to get everyone to that point. Well, not on Instagram. You got to controversial to go get it to anywhere, right?

You gotta go out there and just be crazy to to it go anywhere it seems like. I'm not so good at that, I don't think. Because I agree with you. The collaboration is key for getting someone well.

the education, the openness to look. But when I look at medicine, Here's how you create a gold standard. You create one problem with one solution that becomes written in a book that will last 30 years.

That's why you get a goal standard, that's, how care is designed. you need to have a cause and effect relationship that is pretty simple to be able to create.

A standard of care. And if you don't have that, it gets messy because doctors either aren't doing things because they're not thinking of it, or they are not They're not going to consistently have their same outcome, so therefore insurance can't bill properly.

So what do you do? Because everyone I work with, and it sounds like everyone you work, with standard of care failed 10 times over. And when it fails 10 over and you break out of it, I tell people every day, like, look, don't have any idea what I'm going do for you on your next appointment.

It may not be quite that I may have some clue what I think could be the next piece, but I go to be honest, whatever you tell me next time, plus the information that we get back before then, whether it's a lab or how you responded to a protocol or the outcome of an old test in your house, that determines the step that were going to take.

It's not do this six months later, I'll see you then. And I can't give you three, four, five protocols in between often because then I'm not going to give the best results.

It's not to say it's impossible, but if I want the highest standard of outcome, If I actually want to be the last person that you ever have to work with for the condition, it's got to custom fit.

So I know you have some stories of working with people, such as like a real person you've worked with, someone that had normal labs, ended up finding H.

pylori and leaky gut as a giant missing piece of them. What happened there? Yeah. I think there's a couple of parts to it. It's similar to my experience of going to the doctor, I don't feel good, and it's kind of dismissed for getting older.

Perimenopause is a great crutch, for lack of a better word, on the conventional side of like, hey, this is the name of the game. One of things that I really talk to clients about is that I never want to invalidate what they feel.

If you have symptoms and you don't feel good and your not happy with the quality of your life, then something needs to be changed. It doesn't mean that that's your doctor's job to change it, right?

There might not be anything for them to do. So I think it's giving them their power back, quite frankly, and saying, hey, you are in the driver's seat.

You can change your behaviors that ultimately led us down this path. really stripping things back and keeping it so simple. And again, a lot of the women that I work with are somewhere in the like 30s, 40s 50s range where they've been exposed to a lotta diets and crazy trends and fads over the years.

Now there's GLPs so prevalent and in a mix that, I find step one is eating more food, like you're not eating enough. But if they're inflamed and bloated and uncomfortable, then obviously that's starting there.

I think that's really what I try to give them back in my time with my clients. Of course, they want the labs, the information, and the protocols, but more than anything, I just want them to understand that this is you.

This is your body, your one vessel in this life. If you aren't feeling good or you are getting the answers that you're looking for, keep going, right?

Because you don't feel good and you have to accept that. So yeah, I think it's very behavioral and psychological in the work that I do with my clients.

because I think it's important and I'm like, hey, these are the things you're always in control over no matter who listens to you or doesn't listen to, or what doctor you see or don't see.

These are things that are going to make you feel better. And as we all know, sleeping and stress management and getting sunshine and giving your body lots of whole foods and moving your, that's really what I always want to bring everyone back to as much as I can.

So I feel like, you know, the conversation has gone there twice now, so I kind of want to pull from it. You've, talked about the sunshine and rest and stress reduction and sleep and diet piece.

And you're saying you were working with a lot of, honestly, women that are in that fertile stage of their life, twenties, thirties, forties that you are working.

So you have your nine most common labs that doctors never run. What would you say are the five most common things that, let's call it fertile women, must do to feel well?

Gosh, I mean, if I could just like say one thing and never speak again for these women, it would certainly be to stop living in a calorie deficit. I think there's this narrative for women around eating less food.

And if, If I can just get in every woman's brain at that age and say, Hey, eat more food, fuel your body, give it the energy it needs to thrive, build muscle, lift weights again, so much obviously happening physiologically, but psychologically lifting weights and being consistent and showing up for yourself and feeling good is going to have a wonderful cascade on your health and the quality of your life.

So I think eating more food and not living in a calorie deficit, I thinks shifting the narrative away from weight loss to getting strong and adding muscle is so important.

I that life is stressful. We all have to work 40, 50 hours. We have kids, we have things to do, have commitments. You can't neglect health. There is no later.

Like now is the only time to to that. And it's really important that I help people kind of open their eyes to being more proactive with their health versus reactive and waiting for something to go wrong.

I think movement is so important. So managing your stress, moving, eating more food, shifting the nerve to building muscle. And rest is still productive.

It is wildly underrated. I Think rest and recovery are looked at as, you know, slowing down progress in some way, shape or form. That could be for career goals, relationships, weight loss, whatever it is.

Rest is important to balance that scale. So if that was my 30 seconds on stage, that would be what I would want everyone to take away from these types of conversations.

Behavior, Stress, and Under-Eating as Drivers

I can agree with a whole lot of what you said there, because when I start working with women, especially, I get a lot women in that can't get pregnant, want to get pregnancy, been pregnant and now their bodies have crashed.

So like in the age range, similar to what your saying, and I mean the non-negotiable is you are not Energizer bunny that can do all for everyone all the time and also still have hormones Sorry Like we all want to be superheroes and honestly some of the moms I work with I think are superheroes real-life ones, but There is a cap And everything you just said there is eat enough, build yourself up, rest enough.

Right? Like you have to recharge your battery and if you're not, it will die. You are not any different than the power wheels your kid's driving around.

If there's a battery, when it runs out, you stop. That stop may look different for humans than a car that just goes, meh. But the phase right before that, where it slows down, you can hear it kind of really struggling to go.

I got a three-year-old. Yeah. Really struggling. There you are. That's all the women I work with. It's like, I can just hear the gears trying to turn, trying pull themselves along just a little bit more.

And the harder you pull, the faster you're getting to just done. Yeah, so that's it. That's the image that I'm getting in my mind. I mean, I could make a reel out of that right now on Instagram of like my kids thing just come.

But it's so true and women experience that and then they're so inclined to like double down and like, paddle to the metal and it' like you, your body is telling you something and you're not listening.

And that was my greatest life lesson through this crash that I had, right? You know, you mentioned fertility. I didn't really touch on that part of my story, but leading up to that, that was my goal, was fertility and trying to conceive, and it was miscarriage after mis carriage.

And I'm sitting in the doctor's office after another one, I am like, hey, what's going on? Like, why is this happening when I, at the time, still in my 20s?

And she was like well, after the next one it will probably be worth investigating further. What do you mean the the one? I can't psychologically go through this again.

So that was really like the tipping point for me. And, you know, seeing the same thing, women who are navigating fertility, why are we not asking questions about their nutrition, about calorie intake, and about stress?

Because those are the questions that are going to give us the answers that we're looking for. So, yeah, it's really interesting. But again, I just want women to understand this and like, hey, there's so much in your control that you don't need outside support for, Here's the controversial take to answer your question.

Why are we not looking for these things for pregnancy? Because there's a lot more money in IVF. Right. And that's terrifying to think about, right? And I think that is why I was like, okay, it was really my mission to power myself with as much knowledge as I could for my own health and quality of life because I can't rely on this.

It makes you jaded and I don't think thats right either because again, emergency medicine is necessary. We need that for so many things, and they do a really good job at that.

But the other part, that gray area between healthy and thriving and that disease threshold is unfortunately the powers in our hands, right? And that's why I think education, I mean, lack thereof in the industry right now, but I that education piece is so important for people to to navigate and to learn more about.

And, you know, it's sad that we're getting so many answers from freaking TikTok and wherever else versus our freaking doctors. But like, hey, I don't care where they get the information from, as long as they feel good and their quality of life is good, and they have the answers they need, like I guess more power to you in 2026. That's just the way that things are going.

Yeah, I think it's terrifying to think about the money and the insurance and I know that's kind of the chokehold that doctors are navigating and i think there are some doctors that maybe don't even want to they're not ready to admit that or have that conversation yet because it is terrifying.

To think, about when you pull back the curtain and you start to see those things you kind, of can't unsee it you know. I mean, the industry is interesting because medically speaking the licensures and everything show where and who can do what, what insurance is paying for.

Unfortunately, advent of AI at this point. I means, everybody's running their labs through AI before they get to me, coming in with information, pushing on me.

And all you got to do is say, give the frame of reference of whatever TikTok influencer you want or Instagram or podcasts or wherever. It's going to pull that data in.

The fun part is. We really truly check pretty much anything I post. And there is data to back up everything that we're talking about here today. So it's not as if it is not there.

Right. But you can't say all that's just crap. Just because it isn't the gold standard doesn't mean it not true. It just means that the gold standard hasn't caught up to the evidence.

And with the advent of AI, I mean, aggregating data is so different and so fast. You can throw in there everybody's symptoms and where they're at and what they are doing, and you can just be like, here we go, give me an answer.

It does. I'm not going to say that I trust AI because it's still pulling from data that's on the internet from whoever said whatever. So don't use AI as your doctor.

Yeah, please. But it's interesting to help you to ask questions, for sure. Well, and to your point, you know, I'm experiencing that as well, where people are like, well I got labs, got a GI map, ran it through ChatGBT.

Fertility, Recovery, and Advocating for Answers

And while I think you can probably get some answers from that, people need to understand that AI is only as good as the person inputting the data and the information and feeding it.

you don't know what data to feed it right as a person who's sick and doesn't feel good and Doesn't Know that under eating is the problem doesn' know you know, what's going on or what your drivers are what you're habits, right?

It's gonna be very biased to that person that doesn t feel Good. So yeah, to your point, it is it's terrifying to think about, I think I try to be open-minded around AI and its role and it's growth and, it is here to stay.

Obviously, its not going anywhere, but it it scary to think about, especially as more people are getting older and trying to arm themselves with more information.

But yeah, at the end of the day, I think labs are just so incredibly valuable. Even if somebody never gets labs, you can still make really, really healthy changes in your life.

I think that the most important thing is that we are connecting the dots a little bit more thoroughly on the conventional side. And again, arming people with the information so that they can advocate for themselves outside of chat GPT.

There's a business right there. How to talk to your doctor, what questions to ask. And here's the research to go with it. I'm not going to create an AI like that.

That's. The, that's, the, uh, worst nightmare for some docs out there, not really good docs. So I don't want to make it sound like they're all bad. Some really great ones that are truly deeply caring and they are open to conversation.

They support, I was just on a call with a client here a few days ago that came in, but she's not local. She's like, oh, I got a doc back home. It happened to be someone that is very open.

I was like hey, if you want to pull them in on your appointment and they want. To support you and we can work as a team as we go forward. Let's do that.

As like I've got my medical team in my office. Don't really care how we get you well as long as. We get there and that's the biggest key. For success and I'm just excited about the future with all the information is coming out.

Just hoping that eventually we three second real life or TikTok life, but with the attention span shortening out lengthening, I don't think we're going anywhere that way fast.

Yeah. This dopamine driven world, it is terrifying because anytime I'm creating content, like, okay, want this to be valuable, But also I need more than three people to listen to it.

If I am going to get this message out further into the world. And yeah, what a, we talked about this earlier, about what an interesting balance you have to navigate in in this arena of getting your voice out there and being a little bit louder and standing your ground and sharing your opinion while giving people effective, as effective information as you can.

Like you said, in a 30 second reel that they're probably only going to watch seven seconds of anyway, because they are going be bored unless I'm doing a cartwheel or like something dramatic is happening behind me, you know.

But that's what we have to do. And I think my goal in my content is to make sure that people feel seen and connected and Yeah, redirecting them to resources like this with podcasts where they can listen a little bit more and hear these types of conversations because I think that's where a lot of the value and gold lives for people who are looking for answers and can't find it right now.

Well, I really appreciate you jumping on here, Jillian. I thank your experience is what drives so many people to functional medicine, to looking to answers because they're tired of not getting them.

So then you got to be your own advocate. That's what almost every person I see is. I saw a lot of coaches and doctors and nurses because they've gone everywhere else.

They've seen and looked for everything else and I think that's where you are now too is just like, hey, let's help you advocate for yourself, get you the resources that you need.

So signing off here today, is there any last piece of advice you can give everyone? Gosh, yeah, I think that knowing that normal conventional ranges don't mean that things are optimal or that you've got a comprehensive enough look at what you're experiencing.

And if you don' feel good, then it's okay to want more answers and to look deeper. You aren't a prisoner of this lack of information. Like you can make really healthy changes in your life on your own.

AI, Collaboration, and Final Takeaways

And there are great functional providers out in the world that can help you dig deeper, can, help, you get answers, Can help advocate for yourselves in those situations.

But I really would like to. change that narrative, shift it away from looking for a medication or even honestly looking, for labs as an answer. Like labs, I love them.

They're so cool. I loved the data. Love the information, but that's just step one. That's giving us the snapshot of what's going on now. You have to take action and do something with that information.

And that is what I think is most important for people to understand is like, hey, something dug you down in this hole and we're going to help you crawl out.

You have to be the main driver of the change in your life when it comes to health and how you feel. And yeah, I think functional medicine is really starting to, be louder and take over and people are starting, to kind of scratch their heads and ask questions of like, wait, why are things this way and conventional when there are these other options?

So who knows how impactful on the whole giant system and beast these conversations can be, but I, think anything helps. Well, thank you so much for joining us today and for everybody else until the next episode of redefining wellness podcast.

We'll see you there. Thank you for tuning into redefine wellness with Dr. Javin. If this episode spoke to you, please follow and share this podcast with someone who is ready to take control of their chronic health symptoms.

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