Introduction and Cynthia's Background

I'm here today with the one and only Cynthia Thurlow, who is a nurse practitioner, the host of the Everyday Wellness Podcast, of which I've had the honor of speaking on.

She is an author, international speaker with over 15 million views. For her second TEDx talk on intermittent fasting with over 25 years of experience in health and wellness.

Cynthia is a globally recognized expert in perimenopause, menopause and intermittent fasting. She's been featured on ABC, Fox five, KTLA, CW medium, entrepreneur, and The Megan Kelly Show.

Her mission is to help empower women to live their most optimal life in perimenopause and beyond. So welcome Cynthia. I am so excited to be chatting with you today.

You are a wealth of wisdom, knowledge, and just a force for the women in the world and our health in terms of hormones, metabolism, all the things. So thank you so much for sitting in with us today and sharing your time and knowledge.

Thank you. Now I've been looking forward to this discussion. Always good to connect with you, McCall. For sure. Talk with me a little bit about what led you here, what led you to be passionate and, you know, interested in metabolic health and fasting, especially in the in the sector of women?

Tell me. Yeah. So I think it was a natural trajectory for me to leave medicine when I became an NP and go into cardiology, because I love everything to do with the heart.

And, you know, ten years into working in clinical cardiology, both inpatient and outpatient patient management, I started to realize that there was a lot about lifestyle medicine that we were not addressing.

We did not have time to address most of my colleagues did not feel like it was important. And so I started taking a greater interest in sleep, stress management, exercise, the food we ate to the point where at one point I thought I was actually going to do a PhD, and I took one class and realized that was not what I wanted to do, but would.

Indeed, what I ended up doing was I did a functional nutrition program, which then kind of opened up this whole other world of really looking much more deeply at the quality of the food we ate and our macros and things that you just don't learn, either as a nurse or an MP.

And so, probably around the time that I was in my early 40s and I was starting to struggle a bit with weight loss resistance, which is something I'd never dealt with before.

And all the information I was telling my patients really didn't work for me. And I kept thinking, if it doesn't work for me, how can I expect it to be effective for my patients?

And so that the power of the end of one and I came to metabolic health? Obviously, I've been doing that for 16 years because there were so much metabolic health issues we deal with in cardiology.

But as it pertains to middle aged women, and yes, in your early 40s, who are there? A lot of women get very defensive. They're like, no, no, I'm not middle age.

I'm like, oh yes, you are. And that's okay. So helping them understand. Season of life, by the. Way. Exactly. You find your voice and you know you're in your power and it feels fantastic.

But in my early 40s, when I was struggling with weight loss resistance, I stumbled upon a book written by Doctor Jason Fung, who I hold in tremendous high regard.

And that actually gave me the courage, really, to investigate is intermittent fasting a good strategy for me as a middle aged woman? And so I came to fasting at with a desire to lose weight.

I stayed for all the other benefits, which, you know, to me were, you know, life shifting. Given the advice I've been giving patients for years eat snacks, many meals, you know, don't eat enough protein, overdo it on carbohydrates, etc..

And so I read that book. I started fasting, and that was truly life changing, not just personally, but also professionally. And I think once you see, you can't unsee.

Discovering Metabolic Health and Fasting

And for me, I found it was getting increasingly more challenging to work in a traditional allopathic model. My practice was really good to me. I want to be clear about that.

They were willing to give me an insane schedule. I used to work 8 to 2 two days a week, like that's how much they wanted to keep me. They just kept making the schedule work for me.

And I just said, I'm no longer growing, and I'm much more interested in talking about all the lifestyle medicine. So I took a leap of faith almost nine years ago.

Nine years as of April 1st, and kind of fell into the perimenopause menopause space because I saw so many women struggling. Yeah, obviously intermittent fasting is a large part of that, helping people understand meal frequency and how that can impact, overall health and hormonal balance.

And no, that's not a buzzword. That's an actual thing. And so that is kind of what led me to where I am today. A couple, you know, serendipitous decisions that I made that, you know, kind of in many ways changed the trajectory of my career, validated that this was not a hobby.

And so now I sit in a position where I get to advocate for middle aged women every day, and I feel tremendously fortunate. And I feel like there's really a need for women having a voice and not just feel like they're in an echo chamber because, as you know, especially as someone that, you know, laser focus is on thyroid health, which impacts every cell on the body, it's really helping people become their own best advocates.

And the best version of themselves, you know, which I think is is just missing in medicine still, especially for women. And we're so lucky to have people like you there to educate and support us and advocate for us and teach us how to advocate for ourselves.

I know and if you all haven't checked out Cynthia's TEDx talk, you absolutely should, because it is incredible discussing the benefits of intermittent fasting.

But any time I bring up the concept of intermittent fasting to the thyroid community, I get a barrage of literally probably a thousand comments that say I thought we weren't supposed to intermittent fast with Hashimoto's or thyroid problems.

I eat like everyone's told me, the entire opposite. So you and I know both of our lives have been directly touched by intermittent fasting. I literally tell people I would nap every day if I didn't intermittent fast.

Like my life would look so different. And I've obviously use this as a tool with my patients for 6 or 7 years now. But tell me your thoughts on fasting when you have a thyroid problem, be it hypothyroidism or Hashimoto's.

Tell me what you think. Yeah, well, I mean, let's be frank and honest. At like most middle aged women, I have an

underactive thyroid. And for several years we were working off of the it's not Hashimoto's because your antibodies are negative, which I'm sure you could probably and have unpacked many times.

So let me be clear. I am someone that has Hashimoto's. I am someone who has an underactive thyroid. I'm on medication, I am optimized. The differentiator for me is when I'm speaking to either men or women that have an over underactive thyroid.

It's like, listen, if you are stable on medication, if your labs look good, if you feel good, then adding a bit of medic stress, meaning a bit of intermittent fasting is not a bad idea because we know that intermittent fasting can help with mitochondrial function.

I mean, those are the powerhouse cells, cellular organisms in our cells. And so we know the bulk of, not just metabolic disease or the bulk of chronic disease states in here in the United States, at least, are related to poor mitochondrial function.

So north of 40, you're going to have some dysfunctional mitochondria. And fasting can be effective. However, on the flip side, if you are newly diagnosed and you feel very fatigued and you don't feel good and your thyroid numbers are not optimized and your medication is changing every 2 to 3 weeks or every month, that is not the time to add in intermittent fasting.

However, here's my caveat you can still do 12 hours of digestive rest, and that is something that I think even my teenagers embrace 12 hours without eating.

That is what the gold standard should be for every human being with with with exceptions. I may put a little caveat, but I think intermittent fasting can absolutely be a tool that those with a thyroid issue can utilize.

But here's the other side of that. What I see is a lot of women who get into perimenopause and menopause, they become weight loss resistant, and they start to think about fasting as one of many strategies.

But they overdo it. They're over fasting, they're under eating chronically and habitually. They whittle themselves down to one meal a day, which is omad.

Fasting With Thyroid Conditions

They get angry with me on social media when I tell them omad is not a sustainable strategy, full stop because you're not nourishing your body. And so much like over exercising can be problematic under eating can be problematic over fasting can be problematic.

So I think when you're working with someone like yourself or with me, those are the conversations that we're having, is that all of this is nuanced. There's not a ton of absolutes in medicine, in my estimation, especially with outpatient management of patients.

But there are lots of nuances. There's a lot of gray areas. And once you can understand that, that is the sweet spot. It's saying it depends. Is it right for you? It depends.

Is this the time to fast? It depends. You know, if you are training for a marathon or you are doing a lot of intense exercise and you're not sleeping, please, please, please do not do a 20 hour or 30 hour fast and think that you're benefiting your body.

We become less stress resilient as we are navigating perimenopause and menopause, and we just have to acknowledge that we have to be kinder to ourselves.

And that's a whole separate conversation. There's a lot of lack of kindness to ourselves that occurs in our space, where people just push everything. It's like push, push, push, push, push.

Yeah, in reality, we need to give ourselves a break. I couldn't agree more. And I think in the intermittent fasting community, so much of the time it is that push mentality.

It is let's be really hardcore, let's be really rigid, let's be really dogmatic. And I love that you're emphasizing it doesn't have to be that way. And I advocate for the same.

It's like you can intermittent fast with balance. It doesn't need to be extreme, and you need to be able to tune in and listen to your body and not just push through and restrict more and, you know, I think that's so such a powerful perspective that I do think is missing in especially the wellness kind of functional medicine community sometimes in regards to women, even more so.

Yeah, I absolutely love that. And if someone is in a balanced place with their thyroid, if they're not pushing their body to the extremes in so many other aspects of their lives, what would you say?

A good step up from a 12 hour digestive rest would be for those people? And what would that look like practically in your opinion? Yeah, no. Such a great question.

I mean, it's really looking at maybe you're going from finishing dinner at 7:00 at night and having breakfast at 9:00 in the morning, so that's a 14 hour fast.

Believe it or not, that is a 14 hour fast. And for a lot of people, they feel better eating earlier, not within an hour of waking up, but they do feel better if they're eating earlier in the day.

And we know we're more insulin sensitive earlier in the day. So let's let's plug that as well. But I think for a lot of individuals, it's thinking thoughtfully about when did you eat dinner?

And then thinking thoughtfully about when are you going to break your fast and breaking your fast could be 9:00, it can be 10:00. What I don't like to see is the woman who says to me, I had dinner at five, I 12 hours later I go to the gym and I push really hard for an hour, and then I don't eat until two.

Like that is not what we're advocating for. We want you to nourish your body. And there's actually I think there is a good amount of research coming out that suggested that women do benefit from, a less compressed eating window around more intense exercise and certainly around strength training.

So on days I strength train as an example, I don't go more than 13 or 14 hours without eating, and I make sure that I'm eating properly within, you know, probably a two hour window of when I've lifted weights.

And for some people, you know, so much of it's situational, like for you and I, we run businesses. We have a bit more flexibility than when we were seeing patients in a hospital or in a clinic where we're seeing patients like every 15 minutes.

And so it's it's figuring out ways that you can break your fast. And maybe you're breaking your fast with a protein shake. Maybe you're breaking your fast with bone broth.

I mean, there's a million ways that you can work around this, but usually I ask them to think about, when do you finish dinner? When do you naturally start getting hungry?

And for a lot of people, physiologically, we are generally not hungry the first hour or so that we are awake. It's generally 2 or 3 hours later and again, understanding that if you look at the research, the people that are benefiting the most are eating earlier in the day.

And obviously this time of year we're heading into winter. It gets dark at 5:00 at night. Not everyone's going to, you know, be able to close their feeding window before five.

But in the summer and spring I'm like, listen, eat when it's light outside, don't eat when it's dark outside. Does that

mean that that is 100% of the time?

No, but if you're doing that 5 or 6 days out of the week, you're doing a lot of beneficial things for your body. So just being thoughtful about when do you work out what makes sense for you?

What is sustainable? That's another piece is that if it's not sustainable, then it's not reasonable. If you were to say to me, Cynthia, I want to fast three days out of the week, meaning three days out of the week, I'm going to thoughtfully think about a 14 or 15 hour period of time that I'm not eating.

That's great. You do not. When heavy metals, if you suffer the most. Now, I'm gonna say that again. Women are so hard on themselves. You are not going to win a medal by suffering to intermittent fast.

You know, white knuckle fasting is not the way to do it. Thinking about what is sustainable, what is reasonable for you. I have some women that just fast Monday through Friday because on the weekend they want to be able to sit down with their kids and eat their meals with their family.

And that's completely fine. Some people want to fast three days a week and I'm like, listen, even a few days a week of intermittent fasting is is beneficial.

It does not have to be this rigidly dogmatic, perspective where you are self-flagellating where you are beating yourself up. You know, we do such a great job of that anyway.

And I say great as it quotes great, great. We as women. The shame blame game is is something that so many of us do internally and externally that I would say just to figure out for you what feels right.

And the other pieces, it depends on where you are in your life stage. If you're a menopausal female, you can get away with more fasting than a younger woman.

If you're under the age of 35 and you're thin and athletic, I don't want you fasting or I don't want you doing it more than an occasional after. So if you're in perimenopause, you're between like 35 and 50.

You need to fast for your menstrual cycle and understanding where you are. And if you're a guy or a menopausal female, so much easier. Yeah, I love that.

You know, again, it's don't be rigid, don't be extremist. Even with my patients, I'm like, look, I only want you fasting at most 4 to 5 days a week. Like we're not trying to overburden, overtax our physiology.

And something like you said, long term sustainability is key, you know, and it should be able to complement your normal life. You shouldn't be suffering.

So I couldn't agree more. And then have you I've I found some interesting things with intermittent fasting and Hashimoto's. Have you seen in your patients or clients, people whose autoimmunity kind of reduces the severity diminishes a little bit.

Speak to that alone. Yeah. So I think it's a couple of things. You know, when I'm talking to thyroid patients, autoimmune patients, we're talking about elimination diets.

We're talking about gluten grains. We're talking about soy. For a lot of people, they struggle with one of those. And more often than not, it's not even the gluten.

It's the dairy. You know, people loves their dairy. And I get it. I went dairy free eight, six years ago, almost seven years ago. And I was shocked at how hard it was.

And it wasn't even like I ate a lot. So I think it's a combination of things. It's talking about elimination diets, even when they don't want to. Because let's be honest, most, if not all of us, we are very food monogamous.

Fasting, Autoimmunity, and Gut Health

We like the same foods. We want to eat the same foods all the time, and it's important to have some degree of diversity in our diet. So that's number one.

When we're talking about meal frequency and whether it's digestive rest or intermittent fasting, I am shocked. And how many women will say to me, I didn't realize how bloated I got because I ate so frequently.

I didn't realize how bloated I got from gluten or grains or dairy, or insert whatever food it is that we have pulled out of their diets. But when you're looking clinically at labs, it's amazing to me how just something as simple as eliminating gluten for dairy.

And we could talk about cross-contamination sometimes. It's also grains. We're even limiting sugar in a diet eliminates a lot of the digestive issues that someone's experiencing.

And, you know, the other thing that I think is, is interesting when we're talking about autoimmunity, we're really talking about a history of leaky gut, whether it was overt stress, antibiotics, chronic crappy ultra processed foods.

And I'm not being pejorative when I say that. If you look at the research, ultra processed foods do a lot of things to damage the lining of the small intestine, not to mention blood sugar dysregulation.

But when I start talking to women about like, how did you become susceptible to an autoimmune condition? It unpacks a lot. Sometimes it's trauma, sometimes it's, oh, I was on antibiotics for six weeks because I had Lyme appropriately.

Sometimes I went through a divorce. I was hospitalized, I was, you know, my husband lost his job, just some type of overt stressor that has occurred in their bodies and helping them understand how that happens, how the susceptibility of autoimmunity comes about can open up a lot of opportunities to have different discussion.

So whether it's therapy to deal with the overt trauma, whether it's food elimination diets, whether it is meal frequency, whether it is just, you know, dealing with the stress that people are experiencing.

I always say the pandemic is a time that I hope we never see again. In terms of stress levels. You know, everyone, I don't care how laid back someone was.

Unprecedented stress levels and then looking at stool studies, bloodwork and I was like, Holy cow, what is going on? And it really speaks to this complex interrelationship of the interplay between autoimmunity, stress, leaky gut, etc..

So I think there's a lot of different things, but I absolutely have seen improvement. And what I find baffling is patients will sometimes say, I really I desire to feel better, but not everyone is ready to be able to make the changes that they need to make.

And I get it. I've been there when, you know, things were suggested me and I was like, no, not ready to do that. But helping people understand that there's a lot that goes into what makes us susceptible to autoimmune conditions.

And, you know, we know that women make up the bulk of I think it's almost 75% of autoimmune conditions are found in women. And once you have one, you're more susceptible to other.

So if you've got hashes, guess what? You probably had something before. You'll probably have something afterwards. We're just much, much more attuned to that.

And then the other thing I would say is, I think stress management is a huge part of managing, an autoimmune condition. And I think a lot of people are just disconnected from their bodies, whether that is a byproduct of chronic trauma or just maladaptive patterns that we create for ourselves to navigate our lifetime.

I do find for a lot of women, they're sympathetic, dominant to helping them understand what are the things we can do to quiet that autonomic nervous system, because if it's chronically over activated, it's like you can do all the right things, and it's like your body's still feels like you weren't safe.

Yeah, it's not going to heal or get to a point where it is healing. Like part of that healing journey is a journey. It's a marathon. It's not a race. So absolutely, I could not I couldn't agree more.

And I know a lot of your work centers around metabolic health fasting, but I know there's a big bulk of your work as well that really hones in on hormones and our different seasons of life, our pre menopause, our perimenopause, our post menopause and kind of those shifts in relation to metabolism and everything else.

Do you have any tips or thoughts specifically for women in these various phases? Metabolically speaking or fasting? Speaking either one. Give us some of your your wisdom that you've got tucked in there.

Well, I think, you know, if you're under 35, you still are in your stage of peak bone and muscle mass. So you're going to have more muscle mass, which it's not just about body composition.

We know that you have greater propensity to be able to, you know, you get you have a bit more leeway with your diet.

Hormones, Perimenopause, and Menopause

You know, you may find I know, I certainly if I look back at what I eat at 25 or 30, it was not what I was able to get away with at 40 or 45, something people understand metabolically, you are at your peak kind of metabolic stage in your life, so you can probably get away with more carbohydrate, discretionary carbohydrate.

And I'm not talking about processed carbs, I'm talking about carbohydrates, you know, sweet potato, fruit, etc. you know, that is the time to really focus in on maintaining and building muscle because your body is, you know, in this stolen and anabolic phase, it's still be able to build muscle fairly readily.

Again, being conscientious about if you're already very athletic and lean and doing a lot of training, you shouldn't be doing a lot of fasting. Could you benefit from 12 hours of digestive rest?

Absolutely. Understanding where you are physiologically in your menstrual cycle. So in the follicular phase, when the hormone estrogen predominates, you can get away with a bit more fasting.

You can probably get away with a lower carbohydrate diet. You can get away with more training. You may find that you have more energy versus after ovulation when another hormone called progesterone predominates.

You may find that your body wants you to rest more. You may be interested in having more carbohydrate. You may be more interested in restorative practices like yoga, tai chi, etc.

then we look at women in perimenopause, which is 10 to 15 years preceding menopause, average age of menopause. The United States is 51. So we're talking about late 30s.

And this may show up. As you know, you may have intermittently throughout your menstrual cycle, have trouble sleeping closer to when you start your bleed week.

You may have more anxiety and depression. Unfortunately, this is also a time when I see women put on antidepressants and anti-anxiety agents. This is not to suggest that may not be appropriate for you, however, it may just be that you need a little more progesterone because one of the hallmarks of perimenopause at the beginning is your ovaries are old, as you are.

Many people don't know this. Our ovaries drive senescence in the body. They drive the aging process. We call it ovarian senescence. That is what drives our fertility, our internal aging, our biologic clock, which I find fascinating.

And as our rivers are producing less progesterone, that shows up as having your menstrual cycles, insomnia, especially around your cycle, anxiety, depression, etc..

So, you know, those women are going to be more conscientious of managing their stress. They're going to have to focus on sleep, that anti-inflammatory diet that I was referring to earlier.

Unfortunately, you cannot eat like you were eating when you are, a perimenopausal menopausal female. It is just a fact. I always tell my teenagers enjoy it.

And I say that to sound, pejorative. It's just factual. You just cannot tolerate the same types of foods, so alcohol may not agree with you anymore. You may find that gluten and dairy don't agree with you anymore.

You may find that, a lot of ultra processed foods make you feel poorly. So as you're navigating perimenopause, stress management and sleep have to be paramount.

I don't recommend anyone start fasting at that stage of life if you are not sleeping right. I always say, if I cannot get you to sleep through the night, it is more important that we figure out why you're not sleeping and dial in on that first before we even try to intermittent fast.

So that's kind of perimenopause again, the application of where you are in your menstrual cycle, whether it's when estrogen predominates or progesterone. So that's your follicular phase with estrogen predominates in your luteal phase.

And progesterone predominates. And then as women are kind of navigating, you know, very low progesterone, we actually have the highest levels of estradiol are predominant for investors.

And during perimenopause, more so than any other time in our lives. So that drives a lot of erratic symptoms. I would say there's like over 100 identified symptoms of perimenopause.

So it can run the gamut from itchy ears all the way up to, you know, heavy menstrual cycles, insomnia, anxiety, depression, fatigue, brain fog, etc.. But as women are kind of getting the tail end of perimenopause, the end of our fertile time in our lives, for a lot of women, it can be, you know, it can be a source of frustration.

It can be a source of feeling like they're out of touch with their bodies or like everything I used to. You no longer works. That can be frustrating in and of itself, but it's it's it's that the word pause that's in perimenopause is important because you are being forced to focus on yourself.

Maybe up until that point in your life, you've been focused on your children, your husband, your partner, you know, the people you work with, your family members.

All of a sudden you are being forced to focus on you and doing what's best for you. And for a lot of women, they struggle with that. They really struggle.

The irony is, as we get towards the end of perimenopause that precedes menopause, estrogen is a people pleasing hormone. And so what many women find is they find their voice.

And this is one of those things that I tell everyone, it's like a blessing and a curse, because I cannot not speak up for myself. You know, maybe before, as a reformed people pleaser, I did that to kind of keep the status quo.

I don't I don't feel that way anymore. So as you're navigating late perimenopause in a menopause, you may find it's a whole lot easier to say, you know what?

This doesn't work for me. I don't want to eat dinner at 7:00, and I want do to dinner at 5:00 at night. I don't want to, you know, break my fast at 12 and be fasting for 20 hours a day or whatever it is.

I prefer to eat earlier. So it's helping women understand, like what feels good. That experiment. And of one, this applies to every woman you know. How do you feel when you eat certain foods?

How do you feel when you do certain types of exercise or intermittent fast, or do digestive rest? And then the other side of the coin is working with providers that are talented enough to be able to look at clues and blood work in stool studies.

Take a really good history. I mean, you and I were talking about it before we started recording that. So much of what we do is really listening to our patients and understanding what their needs are and helping them navigate their choices.

Like, here's a buffet, pick what works for you, and then let's move on. And that can always change. It's not you know, it's not a it's not written in stone.

And then you're stuck with whatever choice you make. So I think for a lot of women, it's that advocacy piece throughout their lifetime of figuring out like, what makes your body feel good, what makes your body feel energized, what resonates with you, what makes your body feel safe?

All of those things are very important. And if you are doing that, I would be surprised if your thyroid and other markers weren't optimized, or at least heading in the right direction.

I love that absolutely. Well, this has been enlightening even for me. I have loved this conversation. Thank you so much I do. I know you have a gift, a special guide for our listeners, but I feel like is a very, very valuable tool.

Can you tell us a little bit about it and tell us where people can find you and your favorite place to kind of hang out, where people can learn more about Cynthia Thurlow?

Yeah. Thank you so much for having me. Always a pleasure to connect with you. So we have an intermittent fast and intermittent fasting quick start guide that we will offer, and we'll probably throw some other things on into that that would be of value to your community and obviously to the summit.

I would say first and foremost, my podcast, Everyday Wellness, that I've had the honor of having you on as a guest, is probably my favorite thing that I do within my business, quite honestly.

Beyond that, I tend to be most active on Instagram. I'm trying to grow TikTok.

Where to Find Cynthia and Her Resources

I know that, a call is giving me all the tips to make sure that comes to fruition, but I'm also active on YouTube. I am active on acts for Twitter, although be forewarned, I can be a little snarky.

I can get away with it there versus other places on social media. And because I grew up in new Jersey, I remind people I'm like that snarkiness is there, but I keep it on the down low for the most point.

And then I also have a free Facebook group that has men and women in it. It's called The Midlife Pause, and that's the name of, a supplement line that I just finished kind of working on and the name of the upcoming book.

And so the midlife pause, backslash my name, but it's a very, supportive, uplifting, positive community of men and women. I always say men and women because there are some guys in there, but they're there really to support their spouses and significant others, which I think is really sweet.

But you can also find us there. I love that, and I love the whole idea of the pause. You know, it's it really is a unique way to look at and kind of approach this season in our lives.

So thank you for speaking to that. Thank you for empowering so many women in so many different ways, and just

eternally grateful for the knowledge that you share.

So yes, you all please check out Everyday Wellness podcasts. I love it myself and thank you so much for your time. Thanks for being here. Thanks for having me.