Introduction and Debra Atkinsonu2019s Background

Welcome back to our reversing mast cell activation syndrome and histamine Intolerance Summit. I'm your host, De. Meg Mill. And today I'm joined by my esteemed colleague, Debra Atkinson.

She is the owner of flipping 50 and successful podcast host. And we're so excited to have you with us today. Debra. Well, thank you for having me. Well, thank you for joining us.

And before we get into it, I'd like to just give the our audience a little bit of background about all of our experts that are, that are on this, summit.

And could you just give us a little bit of background of how you got to where you are today? Absolutely. So this is we're flipping literally the 40th year, my 40th year full time as a fitness professional.

And, you know, I've danced around a lot of different communities in the fitness industry, but I taught for 15 years in kinesiology at a university and spent a lot of time teaching internationally.

Fitness pros. So instructors and coaches, fitness, personal trainers, you know how to coach. You know not only the the above the shoulders between the years, how to actually coach psychologically and motivate, but also how to apply the physiology, kinesiology, the movement structure programing.

And, you know, I've worked with women in midlife my entire career, not knowing that would ultimately be the niche that I narrowed to. So in the last ten years, it's specifically been women over 40.

Well, great. Well, thank you so much for sharing that. And, you know, I want to start here by getting into something that you and I talked about before we came on air, because you mentioned to me your history as being a fitness professional for all of these years, and not necessarily seeing MCAS a lot or identifying that in the fitness world.

And so I love to dive into that, because I know people often feel loss when you're feeling something like this and you're having all these symptoms and you're feeling lost in so many different areas in your life, and how people can actually help you.

Yeah, it will. And sadly, you know, I think that, just I'm a perfect example to to make everyone aware of here, that when you're seeking out fitness and health wellness advice, realizing that with a 40 year career and as a medical exercise specialist in the last 25, that means that I'm well trained and versed in working with people with special conditions.

You know, long term, chronic as well as acute. And really never once in my career has this come up until I'm really diving into more of a functional medical space and and learning about it, but I have not ever had a woman present herself and say, this is what I have.

I think there may be, lack of awareness that she doesn't feel good. She says no, why yet? So maybe she's not even aware of it herself.

Prioritizing Care and Avoiding Overdoing Exercise

But I would say that most fitness professionals don't know and don't recognize. How do I help this specific condition? So I think to all who are seeking support, I think it's true that you're going to want to, you know, educate them somewhat on what's happening for you, what the mechanism is so that your fitness pros can look at what's the phenomenon that occurs, you know, the exercise and the physiology.

We know that. But what's the physiology that occurs with histamine and mast cell issues. So that we can put the two of them together. It's a lot like menopause and exercise and physiology and exercise.

There's not a lot of research. There's more definitely than in histamine issues. But we've got to still kind of put it together intelligently and say, what's the best way to prioritize?

Which is, I think, the name of the game, you know, there are for for a midlife women who may have a histamine issue or mast cell issue, there's different priorities, and some of them are competing.

So it's by saying, here's our priority, it doesn't mean this is not important. It just means right now we can't focus on all of these things. We've got to choose and narrow our focus.

So we feel good. We improve things so we can work on these things at a at a later time. That's perfect. And that's exactly the way I approach therapy in in the functional medicine treatment, too.

I love the way you're saying that because, you know, sometimes people come in and they want all of it and they want it all right now. And while we want to see that, and we always say, we will see that we have to prioritize this step, then this step, then this step.

And sometimes those steps in the right order make a difference. It's really the order in which you do the steps that make everything fall into place. So that I love how you put that, that you need to look at this first, and then we can move here and then we can move here, and not just while you may want to be at that goal, it just may take you more time.

And that's okay. Yeah. Right. And I think taking more time, you know. And yet in the long run it's not actually taking more time. So if we jump ahead and we try to do something that's on a chapter eight, you know, first what we're doing potentially is setting ourselves back and and it will take more time and, and potentially be more uncomfortable, you know, while we're doing it. Yes.

And that I actually have to tell people sometimes to exercise less. And that's not the way we're we're going to talk about how they can get exercise in.

But I also do think that's actually an important thing to say is that the what you're doing can because sometimes when you're doing chapter eight and you really should be doing chapter one, you could be backfiring.

And that's affecting your health in different ways too. Absolutely. And, you know, I think that too goes hand in hand with any woman over 40, whether she is, you know, dealing with this or not.

She's dealing with hormones that, you know, what we've learned and decades ago and the doing more and the exercise more eat less dogma that still lives and survives up here, you know, in and on social media.

And if it's been in print, online, it's there forever. Unfortunately, we're going to keep coming across that. But we all probably want to exercise less.

We want to make it count more. And that sometimes means, you know, a walk or yoga is more beneficial than high intensity interval training. And that's a hard lesson to learn.

So we probably have to repeat it over and over. Yes. Yep. Those are all great points. So with you, if you have someone who's been suffering, you know, I think one of the things is you don't feel well and you know that you have to get some that you want to get some exercise and you know that moving your body is important.

And, you know, even for detoxification purposes, that sweating is important. So we need to be able to get some of those things in our life, but we just don't feel well enough.

Mobility, Stretching, and Core Foundations

Where would you. Have people. Start? Yeah. Great question. And I think really we all want to look at mobility no matter who we are. And and as we age, you know, we probably have our peak of well, we do have our peak of muscle mass with our peak of bone density.

But nobody ever says, you know, research doesn't actually say where's our peak of mobility and is probably when we're too, you know. Right. I mean, we're still so mobile, we can still fold them up and put it back in and and we lose that pretty darn quickly that we really lose it much more rapidly as we lose resilience in the muscle, as the muscle ages, the ligaments and the joint connective tissue for women over 40 as they're going through perimenopause specifically, and estrogen is starting to come down, there is, you know, greater stability that occurs.

They don't have the lot because the loss of estrogen that leads to laxity. So if you're a woman who's cycling, you're in you're maybe day 10 or 14, 14 days since you first got your period.

You actually have more laxity. You're much more likely to injure. Well, now that a woman might be post menopause, she doesn't have to worry about that.

So for a while it seems, well that's fantastic. You know, I have lower risk of injury. And potentially she may. However, at some point, if she's not maintaining mobility, circulation flexibility, getting that nutrient density which is delivered in the bloodstream to those tendons, they do become much more rigid.

And that's when Achilles tendonitis, plantar fasciitis tend. We tend to see it. And I have to say that anecdote totally because really still, there's no literature to say.

Women in midlife are much more prone to that. We're just all we're all talking about it. Physical therapists and medical exercise specialists who work with this midlife population are saying, we see these injuries all the time, so we all need it.

You know, whether we've we've got a known issue or not. But I think you want to be thinking chapter one. What is chapter one verses chapter eight, which is potentially bone density.

And we want to work on visceral body fat and and maintaining that or losing it if we've got it, we can't do that right away. And we can't do it safely without mobility.

So you are doing something vastly important. If you're maintaining your mobility, your range of motion, you're you're able still to raise those arms all the way up.

It's not just that, but bending over to pick up dog food or children or small pets. We do those things all the day and we never used to stop and think about them, you know?

But there is a point where suddenly, you know, we may have had a little, a little inkling in something just kind of this doesn't feel quite right. And when we get those little niggles, you know, that it puts our antenna up and you don't want to get to that point and have to get that wake up call, because now you probably got a weak link.

So we want to maintain mobility, flexibility. Couple of good ways to do it. Simply stretching. Right. So anybody who's opposed to or doesn't enjoy yoga or Pilates in that structured framework, you know, simply stretching on a regular basis and I'm talking daily, but I'm also talking throughout the day, you know, so we are sitting both of us talking.

Right. And, you know, if you're spending more than an hour and a half or two hours straight sitting, you're stiff, you're, you know, you're putting your body and hip flexion constantly.

We need to open those joints back up. We need to get some fluid synovial fluid in those joints. You know flowing again greasing the joints. And that's a really an important piece of what we do foundationally before we can ever do anything else.

And so that we can continue to do something else. We all need to be working on that mobility. So I think yoga and Pilates are great forms of exercise.

The next step would be moving forward. So you're doing core exercise. And you know, I think everybody's mind, depending on how old they are, is going to go to crunches and sit ups.

And it doesn't have to be that. And ideally, you know, I've got a little statement that is, you know, crunches are dumb and sit ups are stupid. I mean, they're really not very intelligent exercises.

And even even the Navy and the Army gave them up, you know, so the military, I think you still see them, but they don't test them anymore. That's not their measure of fitness.

So realizing that probably that was injurious. And when that happened, probably 15 to 20 years ago, I think that was a wakeup call, that it takes a long time to change a governmental organization.

And so they change. We should darn better pay attention and think about changing that for the better, too. A lot of people argue, but I've done sit ups for years.

My my response to that would be, you've been lucky. You've been lucky. Yes. Well, and so to stretch, when you're saying we're sitting through the day, do you recommend getting up at periods like do you get up three times a day or something like that to go stretch, to break up that pattern?

Yeah. Well, I think if you can. Right. And it all depends on what are you doing. But, you know, you and I may talk for an hour or less. You know, at that point, ideally we're going to get up and move around a little bit for five minutes.

You know, even that. And that is that is a bio break that's going to the restroom, that's coming back, that's refilling your water. It's a vicious cycle. Right.

But you're you're pouring in pouring out of that bio system. Even that is so much better for you than trying to push through, which is kind of the American way.

Unfortunately. You know, a lot of other places don't work in that, you know, long endurance. They do sprints, and then they get up and they do sprints.

And our brain actually benefits from that more. But we also know blood glucose levels benefit from getting up. And having a little bit of activity doesn't have to be it doesn't have to be cardio.

It's just getting up and moving. Move your muscle to use it. Yeah. So short breaks, you know, if it's five minutes every hour or it's ten minutes every two hours would be a great recommendation.

Okay, great. And then I know people are going to be curious because I was you know, when you're talking about the sit ups and the change, would I agree with you if the government changed it then then that's saying something.

But what would you recommend people do if they're looking for something to replace their sit ups and their crunches with, yeah. That's a great one. First of all, number one, I mean, you don't even have to get on your back.

And I think we associate core exercise with I need to I should be laying down on the floor. Right. And so first of all, the number one way to improve your core recruitment.

And for all those people who hold their attention right up here, you know, and so that's about 90% of women generally is what I find. And that means when we start doing upper body strength training exercises, a lot of times they'll complain that this is bothering them and think it's the exercise when it's actually they're over firing muscles that should not be working because they're under firing.

Some that should. But the number one fix to that is breathing better. So it's just learning to take a deep breath in without elevating the shoulders and to exhale out all the way so that we start using the lower lobes of the lung.

We generally breathe in to about the top one third lobes of the lungs. I'm going to turn my camera down all right. And show my belly. So watch and I'll show you how you can learn how to do this.

So okay so definitely sitting in a chair. So if you took your hands and you splayed your fingers and I'm going to put my thumb so I can feel my bottom couple of ribs and I have my pinky.

So at least I'm touching that top hip bone, that iliac crest right here. So I'm just going to feel that. And then the soft space in between. So as I take that breath no shoulder raise inhale it's going to expand kind of like a balloon.

And you want your belly to expand. Most women would say no no I don't if I but sometimes we do. We want to inhale. And then I want you to exhale like you're blowing through a straw.

So literally pursing your lips. And exhale. Keep exhaling. So as I do that you can see what's happening. So it's actually constricting and coming back down.

And with your hands you can feel it even though it may not be noticeable to anybody visually. You can actually feel that oh my goodness, I've got muscles in there.

I didn't even think that I did right. And so they are there. But what you're doing is turning on what we call the vastus, a muscle in the, the VA. And turning that on is like your personal girdle.

So good friend of ours mutually calls it your personal Spanx.

Breathing, Posture, and Better Core Activation

So you either have that on or you don't. That protects your lower back, but it also means you're doing much more diaphragm breathing. And most of the time we're breathing in right here.

You know, we're breathing very shallow. So if you took a deep breath in right now with me and exhaled it all the way out, many of you watching would say that was probably the first time I've done that today, because a lot of us just are so tied up into our day, and we're a little bit stressed, and we're a little bit tense, and we're just getting through things.

And we were breathing from here up. Instead of really using that belly breath. So that's the number one. So if you turn on that personal girdle, the muscles that wrap around your waistband, we rarely hear about those when we're talking about it.

But your transverse abdominis is TVA for good reason, right? It's a long word, but that we don't talk about. And when you're doing Pilates, that's one of the reasons the breath is so very important in Pilates.

It's actually having you recruit that more. And I know a lot of women will say when I started doing Palani is, you know, I really identified with my core so much better and pelvic floor improved.

It's a part of the breath as much as it's a part of the exercise itself. And you can do that sitting upright. So that would be number one. You know, doing planks.

I throw that out there and then I'm going to pull it back in just a little bit. So just a static plank whether you're on your forearms or you're on your arms or hands like the top of a push up, basically, you know, that is not a very intelligent exercise all by itself.

So think about what your body does most of the time in in an upright position. What we're doing is fighting gravity. You know, I mean, gravity is doing this.

And so if you catch yourself at 5:00, 5:00, posture is probably a little more slumped and you know, your belly is hanging over your waistband, but it's because you're not actually lengthening that spine anymore.

So we need to kind of work on that wake up call. And we reaching for things. So when you're in a plank, ideally you're sometimes just going to touch your arm out to the side or you're going to lift your leg off the ground two inches change things up.

So now you have to stabilize against a moving limb, because that's what we do most of the time during the day. And it makes the plank far more intelligent.

So don't don't go for that world record of eight minute hold that you've seen on YouTube. It's ridiculous. You know, if you can hold for about a minute now it's time to let's change and move a limb while you're there.

That's great. I'm I'm noticing I'm sitting here and I'm doing the breath work, and then I'm noticing my posture and I'm putting all these things because we all do it.

You can't. You can't help it. And this is, you know, it's so great to be around people or to have that little bell that goes off every hour reminding you, how's your posture?

Right now going up? Yeah, yeah. And I actually do that with my clients. I also have them set timers and check in with their breath because, you know, in my you know, we're looking at it from two different angles, but I'm looking at getting in the back and the parasympathetic nervous system and key nervous system regulation.

And we work so much on regulating your nervous system. So I do also have do that those breath check ins because you do notice. And anything that I've been doing I'm trained in different modalities of breathwork.

I you know, I've been doing it for years and I have to even personally check in sometimes too. And just like, okay, how am I breathing? Or because it can just you get in your day and it gets busy and you're not always paying attention.

Yeah, absolutely. You know, and I think we we miss when we're compensating whether it's breath or it's a part of your body. Right. We miss if you know word we're looking at ourselves.

Well we're on well we're on zoom. You're looking at oh my goodness. My right shoulder is lower than my left. You know. And you know a lot of times we don't catch things like that.

We don't catch our own walking down the hallway. You know, it takes being with someone who says, are you limping? You know, to to realize that. Wow. You know, I didn't even realize I was.

But now that you mention it, my right knee is bothering me. Yeah. So that eventually causes a domino effect. So we want to really employ that mobility, you know, because that can be a huge asset for avoiding those compensation pieces while you're stretching on the right side, then stretching on the left side, you suddenly become aware of do I have far greater mobility or range of motion on one side than another?

And I can work on that before it becomes a problem. Yeah, that's those are great places to start. And I think that that is so true. And and I have to say, sometimes I bet there's a lot of listeners because I'm going to even include myself.

And not that I'm when I'm thinking of exercise, I'm not even necessarily thinking first of mobility. And I think that we've made such a great point here because I think the foundations are overlooked a lot of times in a lot of exercise programs.

So you are often like, hey, you know, how much can you lift? And and you feel like if you're not lifting all those weight, you're inadequate and you can't do it well, and and it's shaming in some ways, maybe you feel like shamed because you can't actually put the effort in that you want to.

Yeah. And I think that's so true. And I think it's the first thing to go, you know, for a lot of us historically may have been the warmup goes, you know, I'm going to skimp on the warm up or I'll stretch later.

Adapting Exercise for Vertigo and Hydration Needs

I mean, how many times have we all said that right at the end of the workout, I get a jump in the shower, so I know I'll stretch later. Well, here we are 40 years later, and I.

I have probably some stretching to catch up on, you know? Me too. But, as we age, it's the mobility and the warm up that increases the circulation, the blood circulation that gets going during that warm up means there's more oxygen delivered to the working muscles.

So any exercise you do after that point feels easier, right? Just your perception of the exercise is easier because there's oxygen there for those working muscles right away.

And when there's not, that's when we feel that accumulative. You know, I'm feeling tired. I feel a burn. And or that's when I'm feeling breathless because the demand and need for it is there. But the oxygen isn't there yet.

That's, you know, when you start too quickly, you jump right in. You'll experience that to a greater effect. So if you want to feel much more comfortable during your exercise of any intensity, you want a longer runway from start to when you start, quote unquote, working harder.

And that's true even with mobility. We want to be warm. And there are ways to impose warmth. You know, you can take a warm bath, warm shower and then actually we'll do it come out of your sauna.

Or if you're in a larger sauna, I have a solo. So I lay down and that's my relevance. But, you know, if you're actually in a sauna or just a warm temps, you know, you're much more pliable and your muscles will move and respond much more positively.

So you're either going to need to impose it yourself, create it, or put yourself in an environment that does that for you. Yeah, those are really important factors to think about.

And some I was just thinking sometimes, you know, when you have mix or histamine issues, you have so many different. We're dealing with so many different symptoms.

And one of the things, you know, that people will have is sometimes is vertigo. Or you can have like a higher a drop in blood pressure or have like an orthostatic hypotension where when you're going up and down your you're getting dizzy.

so do you have any recommend like so I think like a yoga is a great starter. But sometimes those positional things can be difficult for people. Yeah. And I think you can choose wisely.

So I think you'd be looking for you know, in that instance you'd be looking for something that is, you know, non weight bearing. So a lot of times we do this thing in our membership and it will be like this is a non shoulder bearing exercise.

So we're not doing the transitions to upward and downward facing dog. Most likely because elbows and shoulders are actually 1 in 2 of the most common injuries you know.

So tendonitis that tends to happen and for other reasons as well. So you'd be looking for, you know, all in a standing position where you're stepping back into the warrior pose, stepping forward to transition as opposed to having to go down.

So you have to look a little bit harder to find those kinds of sessions. But they're out there. So it's very possible to still be working on mobility in an upright position.

And yet, you know, definitely I would put something on either side because just even the movement back, you know, I've worked with a lot of clients in midlife who have vertigo, you know, and just it it can be very little, you know, that triggers that.

So having something on either side of you so that you've got something to lean on, some way to stop and support yourself whenever you need it. Important.

So putting those things in place. Yeah. Trying things I know because that that is difficult when you're having the vertigo and you're trying things and you're it makes it another step further in the inability to get into an exercise routine for sure.

Yeah. Absolutely. Yes. And what about, hey, let's move into a little bit about hydration and nutrition. Do you see that? Because I know a lot of people who are living dehydrated without knowing too.

Do you see that happen a lot in the people you're working with? A lot. You know, and I think there's the complication that a lot of women are shedding the water off because they don't want to get up at night multiple times, and that becomes another sleep disruption.

And they've already got a list of things disrupting their sleep. You know, we seem to be in an era where we've got snoring partners or spouses, we've got old dogs.

And and I find a lot of women are willing to sleep in a room away from their snoring partner, but not their dogs. So, you know, but still, you know, a woman may or may not have hot flashes, but she's also potentially got, you know, teenage kids who she needs to wait up for.

So there's a lot of reasons why they're not drinking water, because that would be one more thing to get them up so that can be an issue. But in a study done this is over 20 years ago.

You know, they at the beginning of women, women and men walking into a fitness center, you know, they did a test of what was their hydration level. And over 90% of them were walking into the workout were already dehydrated.

So we know what happens during exercise. You know, the sweating encourages more loss of water. And so it's not good. And we are compromised with even 1 to 2% in our exercise capacity is compromised.

Our heart has to work harder. It's pumping thicker blood essentially through our body, not delivering as much oxygen. So all of that does definitely make it harder to exercise and makes the exercise less likely to be productive, because you're not able to get as much.

And it doesn't matter if you're exercising in water. Out of water doesn't really matter if it's hot and humid or not. If you're dehydrated, you're already creating those issues.

Now, if it's hot and humid, you're going to probably have a worse time, you know, and and that's where it gets risky. But yeah, so definitely hydrating prior and it's it's not you know I'm going to work out.

So I'm going to start drinking water now. I think it is this is are and around the clock thing we have to get right.

Listening to Your Body and Finding Debra Online

It's it's as important as getting the, the amount of protein that you need and to maintain your lean muscle and bone. But we need to start looking at that.

And I think getting serious too about electrolytes in the water, not just plain water. Yeah. Really making sure you're getting hydrated at that cellular level.

Because I know a lot of times people will chug water at a certain time of day and then you're excreting a lot of that

water especially if you don't have the electrolytes in it.

So you're not keeping all of the water that you're drinking. So I think that that's a really key point of saying, okay, we have to remain hydrated all throughout the day and get something in there to really make it happen at a cellular level, which can make a huge difference.

Exactly. Yeah. And, you know, for, for this population for, for women over 50 period, you know, and I would say we're probably going to want to start looking at this for younger women as well.

But nobody we don't want anybody to be really exercising beyond 90 minutes, you know. But that would be where we really get concerned with how are you hydrating within that workout.

So if you're in a hot and humid environment, then definitely making sure you're taking in more and taking in electrolytes and lists. Just make sure that we're very clear.

We're not talking about old fashioned Gatorade or Powerade okay? So those are full of glucose. They're actually dehydrating you more so we want we want very clean sources of electrolytes.

So there's a lot better things out there today for you and your kids. Yeah. It's those are those are also excellent points. We have to look at the right the right type of electrolytes. Yes.

And this is something that I'm wondering and I don't know you know this is hard. It's individual for everyone. But if you know, a lot of people are maybe concerned about how hard to push themselves.

So do you know what? Is there any sort of guideline of, okay, I've got the mobility and I want to do more, but what's too much? Or is it just basically listening to your body and what your body's telling you?

Yeah, I think with somebody for certain who's got histamine or mast cell issues, it's definitely don't compare yourself to any one else. Were you to your prior self?

You know, if this is a recent issue, you've really got to look at where you are. And and I always would say with someone who's got a special condition is we want you to go to the edge.

We don't want you to go over the edge. So it is so much better that you're going to the edge. You're just looking at what else is out there and you're stopping.

Still feeling good, you know, and gradually you're taking maybe another inch and saying, okay, that felt good. How much more can I do? Can I do this little bit more?

And then how do I feel? Because it's very related to the response to exercise that occurs actually very directly will negatively impact Mast cell or histamine.

So that's where it gets tricky. And you know, if your tolerance has built up then potentially you're ready to begin doing more. But it's always let's, you know, take a step forward and then wait 24 48 hours, see how you do, how do you respond.

And and then if we can go further fantasy take but you don't want to take, you know, one step forward, two steps back and then be set backwards and, you know, have to start all over again.

Thank you. That's great advice. Thank you for giving us so much great advice. Could you tell our audience where they can find you? I know you have a great program and it might be something everyone's interested in.

Absolutely. So we're at flippingfifty.com. That's all spelled out. No spaces and on social media, a lot of good resources on YouTube and Facebook and Instagram are our primary are places.

And we're at flipping50 TV flipping50 TV Thank you so much. Thank you for joining us today, Debra. You are welcome. Have a great day everyone.