Fix Your Sleep, Fix Your Pain & Fatigue Transcript

(Transcripts are generated by AI and may contain errors)

Introduction to Sleep and Fibromyalgia

Hi. Welcome to the freedom from Fibromyalgia Summit. I'm doctor Roger Murphree, and I'm your host of the summit. And I want to welcome, Aneka. Karen. And she's the CEO of Sleep Like a Boss.

Great name. We're going to be talking everything about deep, restorative sleep for most of you, that is a pipe dream. I understand, but we're going to dive deep into the importance of a good night's sleep.

And more importantly, what are some of the steps you can do to start to get consistent night's sleep? Aneka, thank you so much for being part of this summit.

Thank you for being on here. Roger, thank you so much for having me. I'm excited. I think your background is really interesting because as a sleep coach and you really specialize with with women, which Barbara manages 8,090% females.

But but your background is also you're a functional practitioner as well. So you incorporate some neuroplasticity, some brain retraining, which several people here on the summit have had.

We've talked about that. And then, folks, some functional medicine principles that, you know, we all know and love. And that combination has really allowed you to be incredibly successful with your clients.

But what I want to know is how did you get involved to become, head of the sleep bar? Sleep like a boss company. I mean, where did that even come from?

You know, it's a bit strange if you think about. I have a background in international business. I used to work in the corporate world and human resources, and I completely burnt myself out.

And I was at a point where it was after I was someone was born, which was a very traumatic experience. And I went back to work and I gave it all, and it was just too much because I ignored myself like nothing else.

And then I just couldn't get up anymore at some point. And I basically quit working and, started to figure out how to heal myself. And that was somewhat successful.

I had a great general doctor who really tried his best.

Aneka's Burnout and Sleep Coaching Background

I had a therapist I went to see which did something. I went to see naturopathy doctor, which is something, but I wasn't. It wasn't all good. And I then had a second burnout because we actually moved from Germany to Canada.

And I live in Canada and my husband's from here. And yeah, so that was a big adventure and that was a bit much. And then every time I was burnt out, I wasn't sleeping.

And I did not understand that because I was like, you know, my body is just screaming for rest. And I try to sleep and I can't. And every morning at one I'm awake till at least four, sometimes five.

And if it was five, I just get up like that one hour doesn't sleep. And I was just like, I'm never healing if I can't figure this out. And then I ran into a functional practitioner who, like, looked at me holistically and looked at what was going on inside my body, from the gut to the hormones to my minerals to my heavy metals, my thyroid, everything.

And we put a plan together and I started sleeping better. And then I found somebody else who was doing similar

work with people who are not sleeping, adding on the whole mindset and neuroplasticity work.

And I was like, yeah, this is this is what I want to do because there are so many women out there and women more than men. There's lots of people struggling with sleep, but women generally more than men.

And if you have an autoimmune condition or anything of that kind, there's pain involved, then even harder to get a good night's sleep. And so, ironically, as a recovering insomniac last night, I did not sleep a wink, made the mistake of getting into bed way too late, and knew I had an early morning.

And normally this. It hadn't happened in a while. So this is very unusual for me. But I can identify. And of course, everyone that's listening to your story is going, yep, yep, that's me, that's me.

Burnt out. Can't now get you know, it's crazy that you can be so tired and you think I'm exhausted, but you're so tired you can't even sleep. And the people with have fibro.

They definitely identify with that. Now, normally I can take, out of necessity. Over the years, I developed a supplement called Delta Sleep, which is a combination.

We'll talk about some of the things that that you recommend to, but gamma me a butyric acid. Ashwagandha. L-theanine sort of people, you know, valerian root.

Some of you may be familiar with some of these things, but normally I can take that when I wake up at 3:00 in the morning and I'll it'll put me back to sleep within ten, 15 minutes.

I don't have any. It's not there on my bedside table because I hadn't had to use it so long. But for fibromyalgia, you know, you can identify with what Aneka saying because this is you.

I mean, this is with fibromyalgia. This is where I start to make sure the first thing we do is reestablish that deep, restorative sleep. Why is it that, a lack of restorative sleep is so detrimental to our health?

Why is that? Well, because sleep is the time where we heal, recover, grow. Right? Regulate emotions. People often forget that part, that very important consolidating memory.

It's it's really that space when we're what we like to call in rested digest. Right. We have this fight or flight this where we're always like on the go, super stressed and we all are right.

Like, who is really stressed these days? And if we then don't sleep, we just push our body to the limit and we don't give it time to rebuild and restore and, we just trigger it more and more.

We push more and more stress hormones into the system, and the body can do that for quite a while. But there comes a point where this is just going to tip for everybody.

And it's having sleep issues if they're pain related, for instance, that might be something different. But if you're pushing, pushing, pushing and you're starting to see sleep issues coming up like that's a red flag, that is your body saying, yeah, we're going in the wrong direction here, please stop and reset what's going on?

Yeah. So when we're in that deep delta way, sleep that really restorative sleep, our body's healing itself is generating chemicals that we need to be able to handle stress, you know, and if you're not getting that deep, restorative sleep, you bankrupt your stress coping savings account so you don't have these chemicals, and then stress becomes more magnified.

And then you see that you're further in depletion of the chemicals, neurotransmitters that you need.

Why Deep Sleep Matters for Healing

And it's this vicious cycle that people get in and they can't get out of it. And I talk about it with my patients. They feel wired and tired. They feel, and some of them feel really revved up.

And with this fight or flight situation, and we know with fibromyalgia, the audit part one, part of the nervous system is hypervigilance for the sympathetic nervous system is really just over going really overboard.

And the parasympathetic, which is, as you said, the rest, would you to would you sit, rest and digest the calm part? The parasympathetic nervous system is dormant.

It's just it's not working. And this is brought on typically, as you mentioned, by stress, right. Yeah. And it said for fibromyalgia because how I look at sleep is I look at all the stressors that are there for people so they can come from the outside, right?

Like your boss, your coworkers, your teenage family, my diet. Yeah. All these things. Right. But they can also be internal. Like they could be things that are causing inflammation in your body.

Right. And that is something that a lot of people are quite astounded about. When we talk about that. It's like, you know, one of the body's anti-inflammatories is cortisol.

So the body helps, like cortisol helps the body keep that in check or suppress the, the inflammation. And when you cut yourself this bleeding and it might get infected or something.

And there's there's inflammation there. And the body raises cortisol to heal that cut. That's great. But if we have gut issues for instance, we might have a leaky gut or something's maybe something people have heard of, that constantly produces low grade inflammation in the body.

And that is a constant release of cortisol. And really stresses us out and leads to potentially cortisol being higher throughout the day and then at night, then we want it and then we can't have melatonin.

Our sleepy hormones come in and help us sleep, and then we get a really messed up what we call the sleep wake cycle, the circadian rhythm. And it's just sometimes you think it's just the what's going on?

I'm just too busy. I'm just like, but I can't calm down. I'm not a meditating type of person. I just can't do all these things because my mind's just on fire.

But if it's actually internal and if it your mind's already on fire, it's probably partially internal. Either it has always been or that has caused it to be like that, then it's really something to look at holistically, to figure out what are those things that are actually keeping you up.

So stress is a big one. But as you just you just mentioned, inflammation is probably the driver. Yeah. And I just I just this morning opened up, in one of my news feeds here, but it was the, the medical.

I'm trying to think of what the, Medscape News and and they have a, a little study in there that they just released. And it talks about how lack of consistent, deep, restorative sleep now, they're they're associating that with arteriosclerosis.

And, and then they go on to say that we know we already know this, that a lack of this consistent, deep, restorative sleep can increase your risk of heart disease, type two diabetes, and of course, low immune function and low thyroid function, low metabolism increases your risk of weight gain.

Irritable bowel, brain fog. Obviously, if you're not sleeping, you're going to have less energy. And if you're not getting deeper of sleep, it's generating inflammatory chemicals, sometimes up to 40% higher than what they should be.

And that kind of makes ties in with that study. Doesn't is it tells you that if you're not getting that good sleep, you're

generating a lot of inflammation that then can cause the arteriosclerosis.

Yeah. And really like all the diseases you mentioned have been linked. Right. We don't know exactly. It's a really a 110 correlation yet. But we know that people who have less restorative sleep tend to be sicker, at some point in their life, which, yeah, it all ties in, it all makes sense.

Yeah, yeah. So we have these different triggers that can just throw off our bodies by a rhythm. And you mentioned a few of those. I mean, heavy metals.

Who would think that having a heavy metal toxicity or really any toxicity issue, whether that's mold toxins, heavy metal toxins or some type of pollutant can be driving this poor sleep.

But yeah, and I think that's why, knock on wood, I've been successful with the most difficult insomniacs because you and I probably approach it the same way.

We're looking at as a functional, medicine practitioner. We're looking at what are the underlying causes that are triggering this, this individual not to be able to either fall asleep or not to be able to stay asleep.

Absolutely. And I think that is the difference that we often see to a classic, your classic doctor that you go to, if you go to your doctor, you complain about insomnia.

They're going to tell you in a lot of cases, what I hear from my clients all the time. And I was like that too. There. I had too much stress. Yeah, thank you very much.

I know, but that is not sleeping is causing significant contribution to it. Yeah, but help me please. And then sometimes you get information on cognitive behavioral therapy.

Stress, Inflammation, and the Sleep-Wake Cycle

Sometimes they give you a pamphlet on sleep hygiene that you need to give you a bedroom dog and to be quiet and all those things, and those are all important.

But if you have serious sleep issues and they don't want to go away after a stressor in your life has been removed, because could be that there is a situation that just really causes stress at that moment.

But once that's gone, your sleep should come back. And if that doesn't happen, then we really need to dig into, like you're saying, what are the underlying issues here? Yeah.

So with my patients, some of them are really hard core insomniacs. And many of them, just the thought of going, getting in bed and trying to sleep generates a fibro flare where they just they get so wrapped up and so anxious about that because you're thinking, oh my gosh, it's midnight 1 a.m.

I'm not going to be able to sleep again. And they get so worked up. And again, another vicious cycle. They get in where they just are just this have this loop, this negative feedback loop, this just going and going.

And again, as a recovering insomniac, I totally understand that. I used to dread getting ready for bed. Now I've learned good sleep hygiene tricks and tips that I share with my patients, and then some natural supplementation and and really to lighten the toxic load.

I think that's very important as well. But with every patient of mine, the first place I start is reestablishing this deep restorative sleep. Because without doing that in fibromyalgia, you don't stand a chance.

I don't care what you do, you've got to get that right. Because if you're not, the body can't repair itself. And you're I mean, if you're not sleeping, you're going to be exhausted.

If you're not sleeping, you're going to have more pain, more information, more likely. Have you heard about more likely to have low moods and feel anxious?

I mean, it's you've got to fix that. You have to. That's a big warning light. That's you got to look underneath the engine and figure out what's going on.

Absolutely. And I think it's the other thing is also, if you have a condition already and you're struggling and you're trying to get better, you need energy, right?

It's like it's already a bigger effort for you than for somebody who doesn't have this condition to maybe even just move. Right. Just go for a little bit outside and not even talking so many steps, but just go outside, get some fresh air, some sunshine, all those good things.

And maybe when you feel better, actually do a little more. But for people with, with a condition that might be very hard, and if we then get some sleep, we just feel like a million bucks. Yeah.

And then we can start doing some of these, implementing some of these changes that we need to make a lot better because it becomes a little easier. Yeah.

So what are some of the steps that people can take to start to write the circadian rhythm, the sleep wake cycle that's become out of whack. What are some of the important first steps they can take?

The one first thing that I have all my clients do is we try to actually reset your sleep, wake cycle, and we do that mainly through light therapy. So we need we have cortisol our a wake or stress hormone.

We have melatonin that's asleep and they work only through light and dark exposure. So getting natural light in your eyes first thing in the morning when you wake up and then just has to be ten minutes.

If you can do more, great. If you can't get outside, if you can on your porch with a cup of water, get ten minutes of sunlight or natural light so your body knows, oh, it's morning.

I'm resetting my circadian rhythm to our morning. Cortisol needs to come up. Okay. That also sets the timer for 14 to 16 hours. I'm going to start releasing melatonin.

So you're going to start feeling tired at night again because that's what we want right? We want that healthy circadian rhythm. What's also super important for that is once the sun's down, really manage your light situation at home.

Because we've all like in this modern world that we live in with technology and lovely these lights that everybody has in their ceilings, you're shining light straight down your head.

Your eyes and your brain think it's noon, because that's when the sun in a summer is right up high in the sky. And we're sending signals to our brain that tells it, you know what it is not sleep time. It's go time now.

So that is something I would really start managing. If I have real trouble with sleep me your lights at home. Try to avoid overhead lighting in the evenings like get those side lamps from the side tables like people used to read by them, where you're where the light actually shines right under your eye but doesn't come from above.

And that might sound a little funny, but that's just biology. We don't want to send the brain any signals that say, the sun's still up because the brain doesn't know what a lamp is or what the sun's where.

If you want to watch TV or you want to be on your phone, wear orange blue light blockers. If you're struggling with sleep, cut that nasty blue light out.

If you're somebody who has a bit of struggle with sleep and that you can maybe be a little more lenient. But if

you're not sleeping, cut that blue light and get natural light in the morning.

And if you can, during the day a few times and I'm talking five minutes, take a break from work here and there, step outside, send a new time signal to your brain, and then your circadian rhythm will over a few weeks and will reset itself to a good release of cortisol and a good release of melatonin in.

So those individuals who can't fall asleep until 2 or 3:00 in the morning. And they've gotten in this pattern for years, sometimes before I ever had the opportunity to work with them.

That's, a real challenge. And, you know, people will say, oh, we just need to be you need to go to bed by 11, you know, there's no way. So in this better three is going to, you know, turn that around and in a day or two.

So there's, there's steps that have to be taken to make to make that happen. Right. Well, actually I'm working with a client right now.

Resetting Circadian Rhythm with Light and Routine

She's actually she's older, she's 70, and she hasn't slept well in 40 years. And she has exactly that problem. She goes to bed at 2 or 3:00 and sleeps.

Then because she's retired, to like 11, 12, one the next day and her life is totally off track and you can reset that, you can move your circadian rhythm back.

You might never be a person who goes to bed at ten. We don't know because you might because night owls and early birds from like a chronotype perspective do exist.

But can we move forward from a three game to women? 1 a.m. yes, but if you now try to go and say, hey, I'm super motivated, she's at 11:00, let's go back, you're going to be lying there staring at the bedroom ceiling for hours because your circadian rhythm is still on that other time, right? So if you have something like that, that is where cognitive behavioral therapy for insomnia is something that might help.

And what and what we do with that is that we start shifting your circadian rhythm forward. So let's say somebody goes to bed at three, we start helping them move the clock back in very small increments.

Generally, we work with 15 minutes where we say, you can get go to bed 15 minutes early. And if you sleep well like that for five, five days a week, you can shift another 15 minutes.

But at the same time, you need to shift your morning wake up at two. Yeah. And you need to be super consistent with that because otherwise that time in bed just gets bigger and your body's like, can't find a new rhythm, right?

So that's something that we need to really shift where we potentially sometimes work with Time-Released mental tone and to help people get fall asleep at night.

And but it's a very slow process. And that client that I'm working with now, we're doing it in five minute increments because 15 miss Ramada up if we go in five minutes, which takes a long time.

But it works and we don't know yet how far we can shift. But so far we've already shifted from 3 to 1. So that's really good. It's pretty good. Yeah. It gives her two more hours during the day and also right to spend with her family.

But that is a process that can take time. But the body can do it. But it just needs to do that. And with that, that light exposure is key to manage that morning light and to manage that darkness at night, because the body really needs those really sharp signals.

So now it's awake time and now you have to go to sleep. So it's really about trying to balance the whole cortisol melatonin ratio and timing really because you you know, you and you do testing that like I do.

But you can see a four sample cortisol test. And you'll see that in the morning it when it should be at its highest. And then it and it ebbs and flows.

But then it just should start to go really low in the evening as the sun goes down and should be at its lowest by, you know, 10:10 p.m. or so midnight, and then it'll stay, then the cortisol will slowly start to creep up.

But some individuals, they they're tired all day long. And then about eight, 9:00 they get their second wind. They have a little bit of energy. And then they're trying to do everything.

They haven't been able to do that day because they haven't felt good. So now they're doing the laundry, or now they're cleaning up the kitchen, or maybe, maybe they hadn't had any alone time. Meat.

If you know they're a parent and they just need that one time, but then they miss that window of opportunity to wind down. And now they're now there, you know, 3:00 and finally they can go to sleep.

But that pattern that people get into, there's ways to break that, healthy ways to break that. What are some of your tips? Obviously the light you know, the light therapy.

That's very, very important. What about going to bed at the same time every night and trying to get up at the same time every morning? The second one, the second one is actually more important.

Yeah. I was going to say is your. Yeah. Get up at the same time. Yeah. Our body needs rhythm. And why are we always so hung over on a Monday. Because every Monday to Friday have a reasonable sleep schedule.

And then Saturday Sunday we deviate from that schedule. You know try to keep Monday to Sunday within a half an hour of when you wake up. Yeah. Because that gives your body even more of signals of oh yeah, now I'm supposed to get tired now I'm supposed to be in wake.

The body can deal with that a lot better. With women, we are even more complex because we also have a menstrual cycle that goes over to our circadian rhythm, where we have hormonal fluctuations that are more intense than men's.

So that makes us even a little more complex when it comes to sleep. So these rhythms are really, really these routines are really important to us with going to sleep at the same time.

That is great. It's but it's secondary to getting up at the same time for you. For instance, if we can pick on you as an example because you said I didn't sleep well last night, or I really didn't sleep, what happens a lot in those cases, people are like, oh, you know what?

My normal bedtime might be midnight. I'm just saying this now, tonight, I'm it on a bed at ten because I'm so tired, because I didn't sleep last night.

And that's a mistake. Because if you do that, and even though you might sleep because you're actually exhausted, because you didn't sleep yesterday and you're shifting your circadian, you're starting to play with your circadian rhythm in a way that your body will not like at all.

So tonight, you might then get a decent sleep. Tomorrow you likely won't be consumed deviated from your site. Also, in cases like these, ideally you go to bed maybe half an hour earlier, but you really try to make that stretch from 10 to 1130.

And I know it's going to be not nice, but that's the way to not shift your circadian rhythm even more, because that's happened that is what happens. A lot of people don't sleep well.

They go to bed early the next day. They still don't feel great. They caffeinate then they play with with the caffeine. The caffeine then kind of plays with their cortisol again and their melatonin.

And then we get into a vicious cycle of yeah, no sleep pattern. Yeah. So I have patients that tell me, oh, Doctor Murphy, I wake up at, you know, 3:00 every morning and I can't go back to sleep.

I'm just exhausted. But, you know, what can I do? And then I start to quiz them, question them, and I find out they're exhausted all day, and they're going to bed at 730 at night.

So they're, you know, they're getting, you know, quite a bit of sleep. It's just not in the right timing. And that can really create some problems as well.

I mean, obviously, if you're waking up at 3 a.m. and the rest of the world is not, it makes it hard to interact with your family and, you know, whatever else you want to try to do that day.

And then the other, as you already mentioned, I have some patients that sleep until noon, and then they wonder why they can't wind down and get in bed at a decent hour or so.

So a big part of that is, is, is timing, definitely the timing that you mentioned melatonin. And that's probably one that people think of right away when they, you know, they and everything, everyone is an insomniac or have trouble with their sleep is probably true now time with, with or without success.

But that is the sleep hormone. And you would think that that would be all you would need to do is just load up on melatonin, but didn't always work. No, when it doesn't work for a lot of people, actually.

And I know if you were in like, in the biotech or like in the people who are like in the health space, they even high dose this stuff now and they all think it's great.

We don't know anything about that yet. And I'm personally melatonin is not necessarily my go to, I only do that when I shift a person's circadian rhythm.

Timing Sleep, Melatonin, and Caffeine

So if I try to get them from 3 a.m. to 1 a.m. because I need to make them a little more tired, in the beginning. But generally, most of my clients actually have, because we measure the melatonin, have a decent amount of time in, so that is in most cases not the issue.

It's more the cortisol, the stuff that actually raises the stressors that bring the cortisol up and suppress the melatonin is the problem. And yeah, and anxiety and stress and all those things can do that too.

Right? So there's normally I, it's not my go to because even like if I, because it doesn't work for a lot of people, it gives you hangovers potentially the next morning.

People are just not as alert as they want to be for a few hours when they have to go to work. So that's not helping. And I kind of try to get to the root and then most of the time it sorts itself out, or we get clients to a point where they can actually some people are still really anxious sometimes on a Sunday night when it comes to Monday morning or something, but then they're so good they can take their three milligrams of melatonin, use it Sunday night, sleep well the rest of the week.

They don't need it. They can switch on and off, which to me that's fine. Especially there are people who've come off sleeping pills or antidepressants because that's all a lot like we have a lot of that too. Yeah, yeah.

So melatonin is. To me like, yeah. For jetlag. Yes. And for shifting circadian rhythms to basically that's what jet and well and and all candidness. So I'm a big fan of melatonin because of it being an antioxidant.

I mean I think that's part of it. Yeah. And it helps for the immune system. And there are some patients, I mean, not the patients I work with all have sleep issues.

And some of them are really are that I will use, you know, ten milligrams, 20mg, which is really high doses. But it's either that or, you know, stay on Ambien.

And, you know, many of the patients with are on sleep medications and they're still not sleeping. Yeah, we know with sleep medications, studies show that if you're honest, taking a sleep medication, you increase your risk of death by five fold.

No matter what sleep medication you're taking, no matter what illness not to scaredy body. I'm just. I'm just sharing. Not scary. And so you want to look for a natural option?

No one has a sleep drug deficiency. I mean, it's something else is going on. And a big part of. I've already mentioned this imbalance between the cortisol and the melatonin.

Now, one thing we do see in fibromyalgia across the board is low serotonin. It's brain chemical. And it's in the gut as well. More more in the gut than it is in the brain.

But the serotonin is is needed to make that melatonin. And when you're deficient in serotonin, you're going to have trouble getting enough melatonin produced.

But I usually start my patients with five hydroxy tryptophan and and the synergistic vitamins B, vitamins, vitamin C, magnesium. Yeah. To get that serotonin level up, which raises their pain threshold.

That's one thing that it does. But then also it spills over into making that melatonin helps for mental clarity of mood. Just a happy hormone helps regulate.

GI motility. So it can be very helpful for those with IBS, which is about 70% of people have Vadra. Do you do you find that there are challenges with individuals and their in their diet in particular things that they're eating that are probably contributing to some of their, sleep issues?

Yes it is. I think it's partially what you eat. It's when we eat. So. So the timing too. Yeah. This is timing. Their stability is huge with sleep. With women I often see.

Oh, I didn't eat all day. I lived off coffee and muffins and bagels. And then I had a big dinner. Yeah. And then you have energy because that's the first time.

And then you gave your energy. Yeah, but the other thing is, if we eat inflammatory foods, and I know these are hard for people to give up gluten, dairy, seed, oils, sugar, sugar, all those are, highly inflammatory foods.

And if we are struggling, then they're even more harmful in that situation to us. Then to somebody who might not have a health condition, they're still inflammatory, but their bodies just might be able to heal better from them or react less to them.

So yes, absolutely. I kind of I really overhaul people's diets, which is sometimes hard. I get it because you have to kind of get your family behind it.

Otherwise you can be making changes for yourself and no changes for everybody else. And that is hard. Yeah. But it's important to healing and it is so important to sleep.

So one of the I just early on, I remember in this case I had really tough insomniac and for her, you know, I mean, and I, and I say this with, with, with conviction that if you don't get the sleep thing figured out, your fibromyalgia symptoms are not going to improve.

And I 22 years of specializing in fibromyalgia, this is a start here every time because I've learned the hard way this you have to get this right. And what I found out with this individual, she would she was exhausted.

She get in bed at 10 a.m. and she she was really good about sleep hygiene and everything. She get in bed at ten and every night, every morning she'd wake up at 230, almost on that 230 and could not go back to sleep, but she would wake up in a panic and a panic.

And I know you have clients like this and what it what it came out to be is that her blood sugar was bottoming out at 2:00 in the morning. And when your blood sugar bottoms out, your cortisol level goes up.

So she was getting this spike of cortisol at 2:00 in the morning, and she had no choice but to sit up in bed with, with, you know, the heart palpitation and everything came to, you know, we came to find out she just was really sugar intolerant.

She could not have especially close to bedtime where she was eating on the sly. By the way, you didn't tell me to. I finally cornered her, but she said no.

You know, she's in a, one of those little pint things that Ben and Jerry's every night.

Diet, Blood Sugar, and Hormonal Factors

Ice cream need. And sure enough, you know, a few hours later, her blood sugar would just prune and it would wake her up. So I I've learned to really be a good detective and try to figure this out.

Obviously, you have. Yeah. And I think you have to because those things are the little things that people would not think about, but those and that is that is even an easy fix.

And if she's still hungry, she can even eat something. Just not a time to Ben and Jerry's ice cream, right? Like, right. You can have things and a lot of people do better with this snack before, but if it's balance, if it has protein, fat, and a little bit of carbohydrates, right.

They do. It gets them over that hump, that 3:00 issue. And sometimes it's that easy but often it yeah, but often it's not. But it's a big contributor for sure. Yeah.

Now you mentioned a little bit that hormones as we start to kind of wrap up let's get some of the hits, some of the highlights. So hormones definitely can play an issue especially with females.

Progesterone is a big one. I think that oftentimes I see him and my patients, they're estrogen dominant. So if you've had a, endometriosis or if you had, ovarian cyst or, some of these other conditions where, where you have more estrogen and progesterone that can really throw things off.

And progesterone is very calming, very relaxing. But then again, estrogen may be something needs to be balanced too, because it can be low and it can create hot flashes.

So there's definitely a balance that has to happen there. Absolutely. And and we see our sleep changing like even in women. I'm mid to late 30s already.

Progesterone starts declining. Right. And then we get this fear in our 40s towards menopause like in perimenopause where we kind of our estrogen dominant, even though we might even not even have a ton of estrogen, we just have more estrogen and progesterone that can already caused sleep issues.

Then we get into that rollercoaster of like before we really get into menopause, right? And then the hot flashes come and the night sweats and all that fun stuff.

And then eventually testosterone goes down too. And low testosterone can also cause sleep issues. So it's really something where you can often do a lot with very little.

And often it's also just creating the understanding of what is happening. Right? Even if we say we get this anxiety, I

find when people understand what's happening in their body because they're seeing what's going on, that already gives a bit of a okay, I understand now what can I do to fix it.

Yeah. What what role does exercise play in good sleep hygiene? That depends on how bad of an insult you were. If you're really burnt out. Yes. I want you outside moving.

But but moving. I mean, you can just walk and you're totally. That's all. We're not going to stress you when you adrenals more because it's not your body can't deal with it right now.

Right. If you're still okay, if your cortisol is still high but there is cortisol, you can do some exercise and it's great. Like we need to build up what we call sleep pressure.

We mean, like, the body needs to get tired. And exercise is a great way to support that. If you can do it, if you're physically in a state where you can do it otherwise, to me it's movement and you don't want to do it too late before bed.

A lot of people are like, oh, I need to hit like my the gyms are open at like people go to the gym at ten and then can't fall asleep for two. And of course they can because they've racked up their cortisol.

Yeah, at the gym. And that needs to come down. And that just takes a while to be metabolized and broken down. And then you'll eventually get tired. So great if you can exercise.

It's a big plus for a good night's sleep. Just do it ideally up to three hours before you want to go to bed and you know, some people hear this, so I'm sure the people watching this, that's what they hear. You just need to exercise.

But with fibromyalgia, they can barely get out of bed sometimes. So when they hear that, I mean, they're thinking, hey, hey buddy, you need to walk in my shoes and see what it's like, but but, you know, if you've got this adrenal fatigue where your adrenal glands are exhausted and you're just burned out, you really can't handle any additional stress.

That's why I'm fibromyalgia. Stress is so magnified, you can't deal with it. And exercise is really healthy. But it's a stress. It's a stressor. It's a good stress.

But you really got to be careful how you start to incorporate that. Some of you, you know, definitely what I encourage you to do that. And if you are exercising, you know, continue to do some, but don't overdo it.

I think I see that a lot of times people just push themselves, push themselves, and they actually set themselves back on their health journey by doing that.

Absolutely. Like these things. When I see this peloton bikes and I used to just been like, I'm a huge fan, like when you're burnt out, when you're not sleeping well, stay away from these high intensity cardio, yoga type like that is all just way too much.

And you're not going to hear yeah, yeah, yeah, yeah, you got it. You got to really be careful and guard your energy reserves what you have now. But you mentioned getting out, just having nature, getting outside, just walking, just stretching these things that you can do, but you just don't want to, you know, it's kind of like, with fibromyalgia patients sometimes.

Oh, I just need a deep massage. I need to work all that out. And then they go and then they can't get out of bed for four days, you know? So. So there's a time and a place, but you got to be careful how you go about doing this.

Yeah. Well, Aneka, we've we've covered a lot of topics. I mean, we really hit, quite a bit and we haven't talked much about supplements. And I know as a functional practitioner, you incorporate diet and testing and a lot of different things.

You're not a big fan amount until you understand that. Are there some supplements that you found that can be helpful with, helping people get that that circadian rhythm back or.

Oh, let me, let me let me reset? Or are there some go to supplements that if this person just needs some help to be able to fall asleep, or if they wake up in the middle light, something they can take to go back to sleep. Now, maybe it's just a short term to kind of reset things.

Are there some things that you like? Yeah. One thing that I definitely like is magnesium.

Supplements and Final Sleep Recommendations

Yeah. By itself is always a bit of a thing. Magnesium need some cofactors to really work and sell very well. So I would consider, something like, magnesium B vitamins.

They are a great combo. B vitamins. Not at night though, because you they can wake you up. You want to do that in the morning and you want to. I always like my clients to have split magnesium doses, some in the morning and some at night.

Some people are very sensitive and can even do that. Even magnesium spray, if that is something that might work. Some people don't like it because it dries the skin out or out, or magnesium lotions.

If you if that's something you can stand on, like just the touching even I don't know how that might be for your patients if they say even that is uncomfortable for me.

Those magnesium oils, those are great. If you can take an Epsom salt back, if that's something they can do, maybe it helps with it. Detoxing. It's not.

The magnesium that you ingest is a bit different, but it helps relax and detox. And it's a great start. L-Theanine works great for people. Gaba it works sometimes. Great for people.

Not all the time. Those are things you can try. And for a lot of people, they, they work. If that's just a smaller thing or that is exactly that issue, then that can help you.

But in that case, also a little bit melatonin might help you. Yeah. So I mentioned earlier about this low serotonin a lot of individuals with fibromyalgia or their recommended antidepressants.

And we've had numerous conversations on here about that. No one has. And I need to present deficiency. And these medications don't make serotonin. They only help you hang on to what?

Serotonin you have. But if you're already deficient, you're already run down. I mean, that's but what you are. If you have fibromyalgia, it makes more sense to take things that your body can utilize to make that that serotonin and certainly diet, you know, eating a good healthy diet with protein proteins where you get these amino acids, like tryptophan that turns into five trips and, and in a certain, but I like, I like l-theanine, although some people say that it's not strong enough.

I like Gaba, although some don't absorb it very well. So so sometimes it doesn't work very well, but there's some natural, as I mentioned, the Delta sleep thing that I developed.

I really like that my patients, I enjoy that, but I like your approach in that you're really trying to dig deep to figure out what can we do to reset the circadian rhythm.

It's not a supplement deficiency. It's not a melatonin deficiency. It's something else that's driving this. And I really like that approach. I really appreciate that.

Where can people find out more about you and your work? What's the best website for them to go to? Website is,

sleep Like a boss.com. I love the name.

It's it's I love the name. It's great. And they thank you so much. This has been enjoyable. I really enjoyed getting to spend some time with you and, and hope folks really will, put deep, restorative sleep, give it the importance that it needs.

I really believe you can get this right. So many of your fibromyalgia symptoms will improve across the board just by getting Nic that good, consistent, deep, restorative sleep.

Thank you so much. Thank you so much. It was fun.