Folate vs. Folic Acid and the Importance of B12 and B6 as the Methylation Team Transcript

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Introduction to Folate and Methylation

But the problem is, folic acid is not a vitamin, not in the way that the body recognizes it as such. It's a synthetic version of a vitamins. The vitamin is actually called folate.

And when you start to understand what folac acid it is and how it differs from folates and the how the response to it, then you can start understand some of this stuff.

Welcome to Vitality Radio, the podcast that helps you make sense of natural supplements and thrive without pharma drugs. I'm Jared St. Clair. I grew up in a health food store and spent over 40 years now figuring out what works and what doesn't, so that you can make confident, informed decisions about nutrition, supplements and your health.

Welcome to Vitality Radio, the podcast where we help you master natural supplements, enhance emotional vitality and thrive without the use of pharma drugs.

I'm Jared St. Clair and I've got my lovely wife, Jen, here with me today. We promised you an episode last week about vitamin B12. folate and vitamin B six, understanding methylation mood and mental energy.

That's what this show is about. And before we get into the science, the labels, to supplements, how to use them, why to us them and all that kind of stuff.

I want to start today's episode off with a story because this entire conversation exists because of this story and it's. Not my story, but I shared in it a bit.

It's Jen's story about what she's been doing experimenting with B12, B6 and folate, specifically B 12 and full eight over the last few months and what we have learned together as she has been this experiment.

So I'm going to turn it over to Jen and she'll enlighten you because it's pretty fascinating. And I think there's a lot of people listening to this show that can really benefit from this.

All right, thank you. So I'm going to take us back a little bit to an earlier starting point, as most of you have probably heard my episodes on Vitality radio podcast, talking about my issues with bipolar and overcoming those things.

As a lot of, you know, I overcame that kind of quite a few years ago. But we did that through supplementation and mindset work and I did really well for the most part, but I still had these ups and downs, anxiety, depression that would come in waves.

It wasn't constant like it had been, But they were still pretty big waves, a lot of emotional swings that didn't respond to mindset and lifestyle and supplements.

And still just this sense that something still wasn' quite right. I also was dealing with sciatica at the time and we had a customer come Talking about going grain free to fix his sciatica.

Jared approached me said, would you want to try this thinking that I would not be up for that? And I immediately said well, yeah, it was that bad. And so I decided to go grain-free to fixed my sciatic.

And it worked. Within a few days of getting rid of grains, my sciatica started to get a lot better. When I made that decision, I had no intention of treating the mental health aspect of what was going on in my life.

But as the sciatic got better and a little bit down the road from quitting the grains we all of a sudden kind of recognized that my mood had leveled out and become a lot more stable.

I wasn't having the anxiety and the depressive episodes and mood swings. And so we started thinking why would that be the case and we realized that in removing grains, we also remove fortified folic acid from my diet.

And this was the first time in my life that I had completely removed folic acid. And the way I felt the improvements we saw seemed to be a little too specific and consistent to ignore.

So as we started examining that, we had been suspicious of me having MTHFR, which is a genetic variant. That folic acid removal and the way I reacted to that kind of solidified our belief that that's what I was dealing with.

And so what do I want you to understand about folac acid? Folic acid wasn't poisoning me as some people think it does. But what it was doing is it interfering with the folate signaling in my brain.

So removing it reduced the neurological noise rather than adding to it. Once we realized that and I was stable without the folic acid, Jared had recognized that I needed to be supplementing with methylfolate, which is the bioavailable form that folate acid is supposed to convert to if your body does that correctly.

Jenu2019s Health Journey and Grain-Free Discovery

We use methyl foliate and methylcobalamin. I did really well for quite a while on that, but I started to feel like it wasn't doing quite as much and not quite good as I had felt early on.

I want to clarify this too because this is a really interesting thing because I know there are a lot of people listening to this show that find themselves in the position that you were on and that's that they think they're doing like everything right.

They're eating organic, they're, you know, not using all the chemical cleaners and they are taking their supplements and all that kind of stuff, but they still not like where they want to be, right?

And the crazy thing is like if we look at you eight years ago and then we looked at three years when, roughly when this all happened, because it was almost exactly three year ago that you went grain free, Yes.

Yeah. The difference between eight years ago and three years is huge. Like you would have been, and correct me if I'm wrong, pretty happy to live the rest of your life like that with no additional improvements.

But you're looking at it and I am looking and thinking, You're working really hard to be super healthy and optimizing everything, and you're still not there, right?

And so then it gets a little frustrating because you go, man, I'm putting all this time and effort and focusing and reading labels and all the stuff. And we had suspected the MTHFR thing.

In fact, you were using Ultimate Vitality Multi, which has some methylfolate, some Methyl B12 and some P5P in there. And I believe at the time that you were using some additional methylfolate, but you had not taken the step to remove the folic acid.

And we weren't sure if you have this genetic variant. We just thought you probably did based on what we'd read. Right. At the same time, we didn't really understand in depth what that meant.

we kind of knew a very basic, and we had a basic understanding of it, But we really didn' understand the depth of that and what all that included at that time.

Yeah, exactly. And, and that's one of the things, if you listen to Vitality Radio enough, you realize that, or at least hopefully you realized that I don't believe that.

I know everything about this stuff. Uh, I, uh, know a lot of stuff about. This and I understand supplementation, but this is an area. MTHFR that I've kind of steered clear of to a large degree and kind left it up to the functional medicine doctors and things like that.

It's pretty complex. And yet what I find is there's more and more people coming into vitality on a regular basis that are aware of Mthfr. They know what it is, kindof, but they don't really know to do about it or they think they know it to about but haven't been really well educated on it.

So we basically decided over the last month or so that we're going to take this on as a real challenge to help you understand it, frankly, through the education that we're achieving through helping Jen figure it out with her body.

I'm kind of the guinea pig for this. To a large degree. And the rest of this story is pretty fascinating because of that. But I just wanted to kind step in there because I know you may be one of these people listening out there that's like, man, I feel like I am doing it all right.

What am I missing? And this is one those things that a lot of people we think are really missing. Right. So, exactly, I was supplementing with the Ultimate Vitality, which has methylfolate and methylcobalamin and P5P.

And I supplemented a little extra on top of that because I think we kind of thought, well, maybe a bit more. Because we understood that I had a problem with methylation, we assumed that a more was probably a better.

But things weren't going so great, I wasn't feeling great. And I happened to be in, Jared and I both happened be into our functional med doctor, getting some blood work done for some hormone stuff.

The nurse offered a B12 shot. I had never had a B12 shot. I'd heard great things about them. Everybody talked about how great they felt after them, and so we agreed to do the B-12 shots.

And we did verify that it was methylated B 12 and methylpolate in the b 12 shot, correct? Yeah. Yeah, we made sure it had the right stuff in it. And so we got those B12 shots and oh my gosh, by the next day, my energy crashed to a low that I hadn't felt in I don't know how long.

And my mood, it was rough. I really struggled after that B-12 shot. And I'm in a couple MTHFR groups online and I am reading a book on it. And based on what I had been reading, I started, and then with that experience with the shot, had a feeling that I was first taking way too much.

Then I some questions on whether I actually was using the right form of methylated Bs. And so we decided to switch the methylfolate to folinic acid, thinking that that might be a little gentler on my system.

And folicic has been in the news a bit with Kennedy talking about it for use in autism spectrum disorder. And so I thought I'd give it a try. Well, I'll tell you what happened first.

I crashed, really hard. And I hit a level of depression that I hadn't felt in years. Some of the thoughts and things that came, it was just bizarre and I could not figure out what had happened for a couple of days.

My energy was worse, my motivation was awful. Yeah, the depression was at some of lowest I have been to before. And after a couple days, Jared was just like, what in the world is going on?

What happened? And as we got talking through things, the only thing that had changed was I had switched to the folinic acid. But it wasn't just a switch to folicic in that process to see how I responded to it.

Jared and I decided that I would stop taking the ultimate vitality multi. And so what we later discovered is that the flenic acid wasn't necessarily the problem.

It was taking away the methyl donors that I was getting from the multi and all of this might sound a little gibberish to you at the moment. We will do a podcast later to explain some of these, but it wasn' t the folinic adding in a new

way, I have to convert flenic acid differently.

It's not converted like methylfolate is. And then we took away the methyl donors in the P5P and the methocymolamine and it just sunk me. Yeah. and, and It was wild because I mean, it was like a major flashback.

it. Was it, was the Jen that I met who's really struggled with deep depression. I hadn't seen that version of you in like three, four years, at least at that point.

And so it's, so we knew that there was something seriously wrong. Cause there wasn't a life thing that suddenly made you depressed. Like life was doing what life is doing, right?

Everything was fine as far as that goes. So it was completely unexplained. This is really important. There's a couple of aspects of this that I think are super important first off, I took the B12 shot.

I didn't feel one way or the other. Like I hadn't noticed that it was particularly beneficial, but it didn' do anything to crash me or make me feel worse.

I've experimented with various different kinds of B12, folate, on-folate not on fol-ate. It doesn't impact me one-way or other very much. And I would dare say there's a high percentage of people listening that will fall into that category of someone who can play around with this stuff with relative ease and not really notice a significant difference.

That's where this whole genetic thing really, really plays a role. And when you see someone who is, you know, or maybe you're one of these people yourself that's very sensitive to these kinds of changes and you change one thing and it's like, oh my gosh, I don't like how that felt or holy cow, that feels really good.

I feel much better now that I've made that change. There's a really a good chance, especially if it has anything to do with the B vitamins, folate, B12, those kinds things that you do fall into the category of one these genetic mutations or variations or may be multiples of them.

understanding what we're about to share with you can be incredibly powerful because the good news from this experience, because it wasn't fun while you were going through it, is that it has led us to a much deeper understanding and you're doing way better now.

I just wanted to clarify that this isn't everyone, but certain people, it's a big deal. Yes. And so, yeah, we realized that it was when we switched the phylinic and stopped the multi that I really tanked.

So I kind of reversed course. I stopped to the PhyLinic, and I went back on just the ultimate vitality multi. And within a day or two, things started to stabilize a lot more.

I started feel a little more like myself and pulling out of it. And so, and then we looked into other forms of B12 that could possibly work better for me than even the methyl.

And so what we ended up figuring out is that I was taking way too much methylcobalamin and we introduced a form called hydroxocobolamin that is a little steadier in its release.

That's currently what I'm doing is about half of a hydroxycobilamin along with the ultimate vitality. I am doing a lot better. My energy is coming back.

The depression is gone. and the brain fog, all of the crazy, weird things that just knocked me out seem to have disappeared. But you're also doing a lot better than you were before the B12 shot.

Yeah. I feel like I'm coming almost back more to a normal than… The B-12 was the shot, was big catalyst that really… I wasn't feeling great before that.

And that just really sent me spiraling. And then we started trying these other things that at first didn't work very well. and now we've found a spot that I'm actually feeling better than I was before the B12 shot.

Mostly your biggest complaint was the energy, right? Low energy. Low mental energy low physical energy she would tend to, you know, kind of turn into a pumpkin at like 6 PM or even earlier and just be exhausted.

Earlier, lots of time. About by four o'clock exhaustion was starting to sit in and by six. I was pretty done for the day. And your mood would tend to go with it too.

You'd get really tired and you'd also just get kind of a little cranky, a bit. Yeah. That's where it was like, well, what the heck's going on? Because I'm telling you, you need to understand, I've probably said this on the show before, My wife, when she buys in, she is all in on a thing.

So if it's organic, let me just tell you a quick story. We got grapes the other day. Accidentally, didn't get organic grapes. It was a food delivery thing, and we ended up with the non-organic grapes, she won't touch those things.

That's just not going to be her thing because they're on the dirty dozen. We don't do non organic grapes. I'm not feeding them to my kids. It's that kind of a thing.

She's all in on this stuff. And so when she's eating grain free and she is eating organic and cleaning with certain things and not with other things, and all that stuff, she really walks the walk better than I do for sure.

And so it became very frustrating that she was walking the walks so well and yet feeling so tired all the time. It was starting to wear on you. You were getting pretty darn annoyed with it really and thinking, gosh, what has to change here?

And the coolest thing about it in my view, even though it wasn't fun how you discovered it, Is that, and I think there's a learning here for everybody listening is that you did experiment kind of accidentally with the B12 shot.

It was like, I mean, literally the doctor's office said, Hey, we're doing a special on B-12. Right. Yeah. We'll take the. But that. was the catalyst that you said it was.

And it did essentially force our hands to look and say, we need to understand this better, right? There's something here because Jared did the same thing and he feels fine and I did it and feel like crap.

Right. So that was really, really a powerful moment to pay attention to what's going on in the body and to say okay we got a shift course, but at the time, got to educate ourselves first on how to do it.

That's when you really started digging into the different B12s and all that stuff. Yeah. Well, and yeah, it was a good catalyst for me. I've known I needed to look deeper into some of these genetic variants that we suspect I have, but I kind of kept pushing it off.

B12 Shot Reaction and Folinic Acid Experiment

And when all of this happened, I finally picked up one of the books I had and started diving into understanding this on a much deeper level. So many things all the sudden started from my entire life as I'm reading this book started to make sense.

one of the things we realized is that, yes, I definitely have some MTHFR variants. I've not done testing, so I don't know exactly which ones. And then there's another variant called COMT, which can be fast or slow.

i seem to have a fast COMt, which also adds a whole other layer to how I methylate and detox and all of those types of things. So starting to understand that has given me a whole new pathway to start looking at and it's been kind of fun.

I told somebody the other day, it is like a puzzle now and I love puzzles and trying to figure out where to go next and using diet and not just supplements but totally revamping my diet again to include certain things and get rid of a few things I let sneak back in and the combination is, like we said, helping a lot.

way better than I did even before all of this started. Yeah, and it is exciting because I've been frustrated too because The challenge with being me, if you ever wanted to understand what the challenge of being Jared St.

Clair is, is that I tend to have had much more success with people that are complete strangers in helping them and guiding them in their health and nutrition journey, oftentimes than I have with members of my own family.

Now, I've had a lot of success, with my sweetheart here, and she's done so much better through some of guidance and education and mostly her effort to actually make the change.

But we had come to a standstill that was pretty frustrating for both of us because you know, you're the one that Was feeling it but it wasn't great for me either because I get home from work and I'm like, where's my where is my wife?

She's exhausted laying on the couch wondering how she's gonna, do anything from stay up and watch a movie to, you know, play a game or do whatever else we got to do at night.

And so both of us were kind of like, this is annoying. Let's get this figured out. But we hadn't for whatever reason, I guess, made the decision to. Do the deeper dive into this until that B12 shot opened our eyes, right?

Right. So you just have to, you got to pay attention to these inputs and things that are happening and keep track of what's happening in your, in, your body and how you respond to certain things.

One of the things, that can be super, super helpful, regardless of, what you're going through is actually keeping a food diary, a supplement diary paying attention, to your pharmaceuticals.

We were just helping another family member who was put on a couple of new pharmaceutical that our. crashing him in a significant way. And we were able to help him understand why that's happening and what's going on there.

But a lot of times people just kind of throw things into the mix. They keep living their lives. they don't realize what actually happening. and thankfully we have been able piece some of this stuff together for you and we figured out a And then it's like, okay, we got to do a show on this because people need to understand how it works.

Well, and I'm also, you know, I, in that menopause phase too. So I think a lot of people could easily write off a aot of what I was feeling just as it is just part of life.

It's just what happens. That's a good point. And I am just not willing to accept that. I want to feel better than I… I know I can feel that I have been.

and so I hope we can get across to you that, more doesn't necessarily mean better. different forms for different people and that there are answers out there, you might just have to experiment a little bit.

Yeah, and so what really changed everything for you wasn't necessarily fixing your deficiency, because we already thought we'd fix the deficiency with the methylfolate and things that you've been doing now for years.

At this point, it was removing the thing. And now we're talking about back to going grain-free, removing that thing that was kind of scrambling the signal in the first place.

That was that folic acid that popping up in everything. We'll talk a little bit more towards the end of the show. All the places that the folate acid tends to be hiding, But this episode really is kind of a first step into our future discussions on MTHFR and other genetic variants that we will be focusing on over the next few months.

And frankly, this kind harkens back to what we did with parasites, you know, a couple of years ago. We did this big parasite series back in April of 23, I think it was, where we talked about our own personal experience running through a parasite cleanse for 90 days and what and how we felt and all that stuff.

And you know, I guess, you called yourself a guinea pig, but to some degree that is what we are when we bring this show to you and with this MTHFR thing.

It's been super apparent working at Vitality Nutrition, actually talking to people one-on-one that this, when they say 40 to 60% of Americans are dealing with one or more of these variants, that's absolutely true.

And it's just time, you know, we need to talk more about it. and dig more into it. And so you're going to be hearing a lot about that over the next few months.

This is us dipping our toes in talking specifically about kind of the three big key vitamins that play this major role in MTHFR, but we'll get deeper into as we move into 2026 for sure.

Think of this as kind a primer episode. Alright, so let's see. Let's talk about folic acid. We've all been told that it's this really great vitamin that we all need.

Pregnant women absolutely have to have it or they'll have neural tubal birth defects and all that kind of stuff, right? But the problem is, folac acid is not a vitamin, not in the way that the body recognizes it as such.

It's a synthetic version of a vitamins. The vitamin is actually called folate. And when you start to understand what folic acid is, and how it differs from folate, how the body responds to it, then you can start understand some of this stuff.

You know, we've been talking a lot about endocrine disrupting chemicals lately on Vitality Radio. And that's the other big thing you're going to be hearing a little bit more about is the endocaine system and it works and of course all this other stuff interacts anyway.

Moving into 2026. but you can think of folic acid kind of like an endocrine disrupting chemical specifically in bodies that are dealing with these genetic variants.

It will get in to where folate is supposed to go, but it sends essentially a mixed signal for lack of a better term. It doesn't destroy the receptor or harm the cell necessarily, but it confuses the heck out of the body and interferes with cellular communication just like endocrine disrupting chemicals do with hormone production and things like that.

So you can look at it like. And if you start to look at it like that, then you can also consider what you do in your life to avoid endocrine disrupting chemicals.

You know, perhaps it's buying, you know clean shampoos or body care products or things like. Well, the same thing can be done in avoiding folic acid in buying different types of foods.

Yeah. And so you've got to look at folic acid. It's not a poison. That doesn't poison neurons and it doesn' actually damage the brain, but it can interfere with how folate signals and functions.

When that signaling is disrupted, neurotransmitter balance suffers a lot sometimes. Like Jared was saying, it's a like the hormonal balance that suffers when you're exposed to endocrine disrupting chemicals.

Yeah, and we've really come to believe this. And the problem is we don't have strong evidence scientifically yet. I think it's coming, but it is not here yet that this is the case.

But we believe now that a great number, perhaps the majority of mental health issues in this country are directly related to this MTHFR, this set of variants and overexposure to folic acid and underexposure to the actual vitamin

folate and B12 that we need to create that methylation inside the body.

We believe that anxiety, depression, bipolar, all of these things are very closely related to this in a high percentage of the people that are out there dealing with it.

So if you are one who is in that state where your mental health is not optimized or not where you'd like it to be, or you have friends or family members that're in situation like what Jen was years ago, then this show and these future MTHFR shows are absolutely for you.

So let's describe how folic acid works in some detail. It's not a neurotoxin. A lot of people online are calling it a neural toxin, I've been guilty of calling in a neuro toxins in people with MTHFR.

And that's technically true, but it kind of behaves like one because it gets into the neurological system and it does confuse things and neuro toxins can also do the same thing.

The biggest difference is it doesn't kill anything. but it does confuse the system. And people with MTHFR sensitivities, it can act very much like a functional disruptor of the endocrine system, specifically when it comes to neurotransmitters, dopamine and serotonin and things like that.

Understanding MTHFR, COMT, and Folic Acid

It's a synthetic inactive form of folate. Before the body can actually use it, It has to be converted. Human conversion capacity is slow and easily overwhelmed, even in people without Mthfr.

It's everywhere because it's been fortified into our grains and it has been into a lot of supplements and you can even find it in things like orange juice.

It is kind of crazy all the different places that it is. And when we get a little out of it, conversion doesn't keep up and unmetabolized folic acid can accumulate and interfere with normal folate physiology.

That interference can compete with natural folates, the actual vitamin we need at the receptor site, reduce effective folate delivery to the brain, mask or worsen underlying B12 imbalances or deficiencies, and disrupt neurotransmitter synthesis and regulation.

Yeah, so when this happens, the symptoms look a lot like anxiety, depression, mood instability, irritability, poor stress tolerance, and disrupted sleep.

This is where removing the folic acid becomes really important. And for some people, like myself, it's the primary lever. Eliminating folate acid can be the upstream switch that just changes everything.

By removing fortified grains and folic acid containing supplements, you actually remove a constant source of signal interference. And when that interference is gone, several things tend to happen in sequence.

Folate receptors begin working more normally, neurotransmitter production can stabilize, B12 balance improves, and the nervous system stops constantly compensating.

In those cases, people aren't fixing an efficiency by adding something, they're actually restoring clarity by removing the thing that was scrambling the signal in the first place.

And that's why the improvement can feel dramatic and sometimes very fast, which is exactly like it was for you. I mean, it crazy when we looked back, because we were looking at pain, right, as while you move the grains.

In fact, we started reading a book called No Grain, No Pain, so that is our focus, but it didn't take long at all for me to say, what's going on with your mood because you are super balanced all of a sudden.

And then we looked back and it was like, well, that's the lever. We took out folic acid and all the sudden stuff doesn't affect you like it used to. It was amazing and dramatic.

I was really, really cool. So it's important to clarify that MTHFR is this big factor that I don't think really can be overstated and is often super misunderstood.

It doesn't mean that everyone with MTHFR will have major problems with folic acid. And it doesn' mean the folate acid is universally harmful or a quote unquote neurotoxin like you'll sometimes hear it called.

However, it is highly likely that removing folac acid containing foods and supplements will improve things if you're dealing with mthfr. Having MTHFR makes you more likely to experience folic acid as a disruptor rather than a helper.

And because of that, it's always reasonable to experiment with eliminating folate acid, regardless of whether someone knows their genetics or not. We suspected yours, but we didn't know.

My gosh, are we glad that we experimented, right? Yes, very much. And here's the practical reality of it all. Most foods that contain folic acid are and are fortified.

They're ultra processed foods anyway, refined grains, boxed products, synthetic health foods. None of these are foundational foods to begin with. So removing folic acid usually means that you're improving your food quality, more whole foods, reducing metabolic noise, and simplifying the system.

There is no downside that I can think of other than the effort and inconvenience, which is, for some people, too much of a downside, unfortunately. But that's the only downside to removing folic acid from your diet.

You have to read labels a little more and be a lot more. A lot more. It's hidden in a lot of things. And yeah, just be aware of what you're buying and what your eating.

But for the right person, I can't even stress how impactful the difference can be. Yeah, it's such a big deal. Listen, when we talked through your story, the episodes of Vitality Radio called Jen's Story, we started with supplements and worked on getting you out of pharmaceuticals and working on mindset and all this stuff.

And the last big lever was diet change, right? Because let's face it, that's the most difficult thing for most of us to change. We like the things that we like.

Uh, we liked the convenience of being able to eat out wherever we want. uh, We liked convenience and in some cases, the less expensive foods that are these fortified foods.

But if you're really trying to understand what's going on in your body and you are struggling in these areas, you owe it to yourself to at least to the experiment, remove the folic acid and see what happens.

Let's talk about. how folic acid kind of builds up in the system. There's an analogy called the bucket analogy with folate acid. And what happens when you have an excess of folac acid, which we believe most Americans do, right?

Because there's just so much inundated with it. A lot like what we talk about with endocrine-disrupting chemicals. We've all got too much. Even if we've cleaned up some things, it's still everywhere.

Your body has a limited capacity to convert folic acid to its usable form, which is folate. That conversion process is relatively slow and it is easily overwhelmed, especially when intake is high from all these different areas, fortified foods, supplements and things like that.

Every time you consume folic acid, you're pouring more water into that bucket. As long as your conversion pathway can keep up, the bucket stays manageable.

But when the intake exceeds conversion capacity, which is very easy to do in the fortified food environment that we live in, The bucket starts to fill.

And once that bucket is full, additional folic acid doesn't magically disappear. Instead, unmetabolized folac acid begins circulating, interacting with folate receptors and transport systems in ways that it was never designed to do.

Here's the critical point. This is not an acute toxicity issue. This has a chronic signaling and regulation issue and once the bucket is full, it doesn't necessarily empty overnight.

Even after removing folic acid from the diet, It can take weeks and sometimes even as much as a month or a little more for the system to fully clear and re-regulate depending on how full the Bucket was, overall detox and clearance capacity, your nutrient status, including how much B12 and B6 you've got on hand and your nervous system sensitivity and I wish that we could tell people exactly how long it took for your mood to start balancing out like in that dramatic way.

But we were looking at how bad your sciatic nerve hurt and how your back pain was. And we just weren't that focused on the mood thing. We think looking back that it really was somewhere in the first month that things were significantly better and just got better.

You know, and then it was like, it didn't just get better, you just hit a point where Stuff didn't impact you and create anxiety like it once did. It didn''t sink you like at once.

That just was a thing of the past. And it was such a cool shift because everything all of a sudden just kind of started to roll off your back. More like, it kind always has for me, but we never saw that with you before.

Yep, exactly. And so everything Jared said before explains why people have very different experiences with this. Some people can remove folic acid and don't feel better immediately, but they can notice gradual improvements over time.

Others can feel surprisingly fast because maybe their bucket wasn't as full to begin with. In both cases, the same thing is happening. There's less interference There's clear signaling and there's less need for the nervous system to compensate.

I would say before I met Jared, my diet was awful. I paid no attention to what I ate and I lived on carbs, bread, cereal. Dinner most nights was a bowl of cereal And so as I looked back, I was feeling my folic acid bucket full on a very regular basis.

Now, once I met Jared, he did, you know, point some things out to me and I had started to clean up my diet in some areas. I. Was doing a little bit of organic here.

It was getting rid of more process there. And, so I, had slowly started too, to change some. Things, it was never getting emptied, but it, was definitely, i was slowing down on.

Filling it up, and you were feeling better. Just not as better as you wanted. Right. There were definitely some improvements, but it was when I completely cut it out.

And yes, as we think back, I would say within that first month was probably the most noticeable difference. Yeah. Then what's cool, like I said, is that since then it's been very steady.

From a mood standpoint, you've been as balanced as anyone I know over that time. It's has been such a cool thing. So the challenge was that over time, we started recognizing that your energy was starting to sink.

the B12 shot and all the other stuff we talked about. So you weren't as optimally well as you wanted to be, but from a mental emotional side, you were doing great.

Yeah, it was really, really cool. We just have to recognize that it's an individual thing. Some of this is universal though. All of us, unless we're actively avoiding it, are inundated with folic acid and it is a fairly significant challenge.

We're not going to undersell that to remove it from your diet. It's a lot of label reading, it's less eating out, but again, really good for you. Not just good your body, also good to your budget.

Its really just relearning and its not that you can't have the foods that love because For the most part, everything that we want to eat, we can still eat.

We just have to be picky about the source, right? So like, it's not like we cant eat bread or we cannot eat crackers or even cereals and things like that.

They're all out there and available in forms that don't have folic acid in them, but you're not eating the same ones you used to. Different brands, different things.

You have a lot more selective. Yeah. And, but when we look at mental health in this country and everybody knows, everybody listening to the show knows that there is what's known as the mental-health crisis in America.

We really do believe that this is one of the things at the root of that mental crisis, not for everybody, But for a high percentage of people that are dealing with this stuff.

and that's why we just wanted to get this information out there. It's such an important concept to understand, and it's something we talk about one-on-one with our clients on a regular basis, but we just haven't really gone deep on it here on the show.

This entire process exists in everyone, But it is significantly exacerbated in people with MTHFR variants. And here's why. Everyone has limited capacity to process folic acid.

But people Mthfr variants have less downstream flexibility. When unmetabolized folac acid accumulates, it creates more disruption for them. Their bucket fills faster and the consequences are felt sooner and more intensely.

In contrast, people without MTHFR variants often tolerate folic acid better. And I would say always tolerate, folate acid, better for many of them, excess folac acid may be a minor issue or no noticeable issue at all.

Problems typically arise only with chronic high exposure. So this is not an everyone is broken story. It's a sensitivity and a load story, and it varies from person to person.

All right, so I just want to address really quick too why adding more folate can backfire. On top of the ongoing folic acid exposure, if you go ahead and add more full late to it, that can actually end up making things worse because as we were saying, adding more, even if it's folate, doesn't fix the problem.

It just adds more pressure to a system that's already overwhelmed. And so for the right person, which I think is pretty much everybody, the first and most important step isn't to add anything, but it would be to stop the constant refill of the folic acid.

Yeah. And it's interesting. That part's a little tricky. We wanted to have that in the show because it is an important thing. You can just plain overdo it because again, the whole bucket analogy thing, but we do believe that, in many cases, and we've seen this, people that add folate, because the thing you have to understand that we haven't really clarified here that I think is really important is we have this need for folates, right?

And we had this massive supply of folic acid, not the same thing And if you are very deficient in folate and you add folates in the form of methylfolate or possibly folinic acid, in some cases you will improve and feel better.

How Folic Acid Affects the Body

In many cases, I think you'll improve. But in many other cases it can backfire, like what Jen just said. And the only way to know is to try. obviously trying to get across to you is the bigger lever is pulling back on the folic acid, get the stuff out of the way.

It's crazy how much this comes back to exactly what we've been teaching with endocrine disrupting and stuff, right? Get rid of Again, folic acid, not technically a toxin, but kind of behaving like one, and then replenish the body.

It's really, really important. Let's talk about though, if you decide you want to use some folate, how do you know? Because this is a really confusing vitamin in terms of what it shows on a label.

And we talk all the time on Vitality Radio about helping you read supplement facts panels so that you can understand them. When a label says folate, what does that even mean?

It oftentimes doesn't specify. Sometimes the label will literally just say folates. Some of the labeling around folated and folic acid isn't done correctly or even legally.

We've seen different labels that say different things that aren't quite what the FDA even requires. So it can get a little bit confusing. But as we've been researching this and literally, just looking at all the products on our shelves and trying to understand how different companies are labeling it, I think we've got it pretty nailed down to help you understand.

First off, most of the bottles that contain folate, whether it's your multivitamin or just your B complex or your folates supplement, will still have the word folic acid on the bottle.

And that confuses the heck out of people. It will still say folic acid, even if it's methylfolate. So you might see something that says methyl folate that's listed as 5-MTHF, or you'll see maybe L-5-methyltetrahydrofolite, Or you may see 6S- 5Mthf.

Sometimes you will see trademark names, ones known as quaterfolic and other ones called as metafolin, and those aren't the only ones. There's a few of them.

And then if it's folinic acid, and that confuses people too, because folanic and folic aren't that far off, you'll see that as either calcium folinate or five, four mil tetrahydrofolate.

Now. It's a mouthful. There's a lot there, okay? And this is important to understand. If it just says folate and folic acid or just folac acid, it's safe to assume it is folc acid.

It is the synthetic form. if it says anything having to do with MTHF, or methyl or Methyltetrahydro, or has one of those brand names like Quatrofolic or Metafolin, anything like that, you have a methylated form of folate.

And that's really important to understand. That would be then a methylated form that cell ready. It's the kind that should not be creating cellular signaling issues or anything that.

If it says folinic, not folic then you have the folanic form, which is also a bioavailable form that the body that doesn't create mixed signals in the.

So you're always looking for that. Even if it's says 5MTHF or methyl tetrahydrofolate and then somewhere in parentheses is folate acid. It's not, it is actually a converted form of folac acid and that's okay to take.

Now there's also these three letters that will be on the label. DFE, that's D as in dog, F, Frank, E, Edward. DFV stands for Dietary Folate Equivalence.

The number in parentheses tells you what form it is and how much raw material is used. If a provider recommends, like your doctor, if he recommends 400 or a thousand micrograms of folate, they're almost always talking about the DFE.

So when you're looking at your dose and you are trying to get 400, or 800, a 1000 or whatever it, based on what you've read or what your hear on this show or you talk to your functional medicine doctor about, you're looking for the number that is the DFE number.

That's how you judge your dosage. All right, so let's talk for a minute about why B12, folate, and B6 work as a system. And they don't work in isolation.

They work together to build red blood cells, regulate neurotransmitters, support detoxification, control homocysteine, maintain cellular energy. If one is missing or mismatched, then the entire system can be strained.

This is why people can take B-12 and feel better for short time. And then maybe they start to feel worse or they take just full eight and they feel wired, anxious or flat.

They're pushing one lever without supporting the others. And that actually is the explanation for why when I dropped the multi and only did the phallinic, I had the crash that I.

Now that we've talked about methylation and folate signaling, we need to talk about vitamin B12 because this is where a lot of people get tripped up. Just like folates, B-12 is not one single vitamin.

There are multiple forms of B 12 and they behave very differently in the body, especially when it comes to energy, mood and neurological tolerance. This is one of the reasons that people sometimes will say, I tried B12 and it didn't work for me, or I try B 12 and made me anxious.

Or in Jen's case, when she had that mega dose of B-12 from the shot, it made her tired. The opposite of what B twelve shots are supposed to do. typically going to be either the wrong form for you or the amount for your or possibly both.

So let's talk about the different forms of B12. The most common one that's sold in most mass market supplements and still in a lot of health food store brands is cyanacobalamin.

Cyanacabalamine is the most commonly and the least expensive form of b12 it's synthetic and it contains a small cyanide group. Yes, you did hear right, that the body has to remove before the B12 can be used.

Now, the word cyanocobalamin sounds scary because it contains the words cyanide, but that's misleading and it does get overblown on social media, in my opinion.

The cyanite component is chemically bound, extremely tiny, and biologically insignificant at supplement doses. Your body safely removes it during normal B-12 metabolism and clears out of the bottom without much issue in healthy people.

So the issue with cyanocobalamin isn't so much danger, it's efficiency and suitability, especially for people who are sensitive or dealing with methylation or detox challenges such as MTHFR.

For many people, the conversion happens without any issue at all. But for those with higher toxic burden, slower detox capacity, or neurological sensitivity, cyanocobalamin can not only be less effective, but can also not be well tolerated.

This often gets overblown, like I said, on social media because of the word cyanide and people love to live in fear. I don't really subscribe to all that.

Cyanocobalamin for the right person isn't that bad, but it is the least, the lowest common denominator when it comes to B12. And we don' ever really recommend it to anybody because you're always better with one of th other three.

So yeah, the other one that most people are looking for these days and talking about is methylcobalamin. And that

is the methylated active form of B12.

It directly feeds into the methylation cycle and supports your nervous system, health, neurotransmitter balance, and cognitive clarity. For many people, including those with MTHFR variants, methylcobalamin works extremely well.

Problems tend to arise when the dose is too high, which tended to be my case, the nervous system is already overstimulated, COMT activity is fast, that's another genetic variation that we believe I have, or the rest of the B complex isn't supported.

When that happens, methycobilamin can feel too stimulating or anxiety provoking. And that doesn't make it bad. It just means that it's a pretty powerful supplement in certain people.

And so you need to do a little bit of experimenting and keep it on the low end as you're doing that. The next one is one most people have never heard of.

It's called adenosylcobalamin. And adenosyl cobalamin is the mitochondrial form of B12. That's the stuff that's right there where your body's creating the energy.

Reading Labels and Choosing Folate Forms

Instead of working primarily in methylation, it supports ATP production and cellular energy, and this is deep metabolic energy not anything like caffeine and energy or any other kind of stimulant.

This is why adenozole cobolamin often pairs well with methylcobilamin, One supports methylation and neurology and the other supports energy production.

We love the methylcobalamin and adenosylcobilamin for the right people. And in many cases, a combination of the two. That combination can be a real sweet spot for right person.

and we actually have a supplement here that is one of our most popular B12 supplements. It's a thousand micrograms of each. For a lot of people, that's is a great way to go.

So the last form of B12 that we're going to talk about is the one that I'm currently taking called hydroxocobalamin and it's the most neutral and adaptable form B-12.

It does not donate a methyl group directly. So instead the body converts it into methyl cobalamin. or Denisol Kabalamin as it's needed. This makes it especially useful for people who are neurologically sensitive, have fast calm tea, or feel overstimulated on methylated B vitamins.

And as you heard before, as I was telling my story, this ended up being my sweet spot. Not because I needed more B12, but because i needed the right signal at the rate pace.

Right now I'm in a really good place with the adjustments. but we are still considering a few other tweaks. I think we're going to add in some adenosyl and see if that can get my actual physical energy up a little better.

But we'll do that after the holidays. Yes. See how things go. All right. And then let's talk about form because this is really important too. This is one of those places where I essentially taken a stand over the years at Vitality Nutrition.

There are lots of B12s on the market that I think are just not very effective at all. The biggest reason for that is because they're in an oral form that you swallow as opposed to putting in your mouth and letting it dissolve.

And that's known as a sublingual delivery, basically under the tongue. It's especially important with B12. Unlike most vitamins, B-12 absorption in the gut depends on multiple fragile steps, including your level of stomach acid, intrinsic factor, and a healthy terminal ilium.

Sublingual B12 bypasses those bottlenecks by absorbing directly through the oral mucosa, making delivery far more reliable, particularly in older adults and anyone with digestive or absorption challenges.

If you browse vitalitynutrition.com or come into our store, you'll notice that we don't even offer B-12 in capsule form, only sublingal, and that is for this reason.

Now, that's not to say that B 12 is ineffective in pill form. depending on your system, it can be quite effective if those three factors are doing okay.

And so we have it in Ultimate Vitality Multi because a lot of people are going to be able to absorb it and utilize it pretty effectively in the Multi.

In Jen's case, the amount that's in Multi seems to a pretty good balance. You don't tend to ever struggle with that. If we could make the multi and a sublingual, that wouldn't taste absolutely awful.

Uh, you know, we put the whole thing that way, but if you're looking to buy B12 on its own, You always, always always want the one that you going to put under your tongue in the mouth and you gonna want to place it under tongue, let it dissolve slowly.

That's a really important factor. You're wanting to give as much access to that mucosal lining as possible. Don't just chew it up and swallow it. Also, one of the cool things about sublingual tablets, if you're in experimentation mode, like Jen has been, is you can often bite them in half or cut them half, or even quarters.

It makes it much easier to experiment with your dosage, that kind of thing, because both the form and the dose matter in a very big way. And when it comes to B12, One thing that we've really learned lately is the consistency beats mega dosing, especially when you are beginning and testing things out for yourself.

All right. So vitamin B6. is essential for completing the methylation cycle. It helps convert homocysteine into cystein, which supports glutathione production.

it also plays a role in neurotransmitter synthesis and regulation. Without adequate B6, B12 and folate can't finish the job. Most supplements use pyridoxine HCl, which must be converted to be active.

Think of this the way you would think of folic acid and cyanocobalamin. It's not bad, but it's the least efficient option and the most common one used in supplements.

P5P or pyridoxal 5-phosphate is the active form. It works immediately and is generally better tolerated neurologically. And that's why the ultimate vitality multi contains 25 milligrams of B6 as the P-5-P form, it's enough to support pathways without overstimulation.

And we do believe in most cases that the Ultimate Vitality Multi with the 25 milligrams of P5P is sufficient. So you can experiment with B12 and the methylfolate or the folic acid.

You don't typically need to add additional P 5P in that experimenting if you're already on the ultimate vitality multi just for what that's worth. Okay, let's get into wrapping up the show, hoping that we've delivered this information in a way that's usable for you.

And we're actually going to have a blog article for on our website that breaks a lot of this stuff down because we recognize that there's a LOT here and we want to make sure it's as usable as possible.

But this last section of the Show will be us trying to distill all this down into actionable content for YOU. All right, so as far as the practical options and the real world application for this, I already mentioned the Ultimate Vitality Multi has the P5P.

We mentioned above in the show that it has 200 micrograms of folate as methylfolate and 250 micro grams of

methylcobalamin, along with a full B complex working together.

Now, for a lot of people, that combination is just right. It's enough. Enough to support methylation, energy and neurotransmitter balance without overwhelming the system.

For people with known or suspected MTHFR variants, it's often not enough on its own, but it is still a good foundation. And as we talked about, we experimented with gin being on it, off of it.

and she's doing quite well on it with the added hydroxylcobalamin. So again, something you need to experiment with, but it's a really good foundational tool.

And I think for most people without the MTHFR concern, it is a sufficient dose of these nutrients. We carry a wide range of B12 options that you can look at and experiment with the hydroxylcobalamin, the one that Jen's currently using.

Very gentle, very steady, methylcobilamin which is fantastic for direct methylation support, helping with detoxification and all of that sort of thing.

But again, this one has to be a little bit more, you have to experiment a bit with it, particularly if you are dealing with MTHFR. And then adenosylcobalamin is a great one to look at and experiment with if you're looking primarily for the energy benefits of vitamin B12.

We also carry some very thoughtful combinations of these. I already mentioned before the thousand micrograms of adenosyl cobalamin with a thousand microns of methiclobalamine.

B12 Forms, B6, and Practical Supplement Guidance

That's what's called a Cal Active Melt. that active melt is fantastic for sublingual absorption. You drop it in your mouth, it dissolves pretty much immediately, tastes delicious.

They taste pretty good too. Real easy to use and that's one of our most popular forms. People love that combination of a thousand of each. We also have a really cool combination also from Cal that has 2500 methylcobalamin and three milligrams of P5P in there for just support and then 400 micrograms of methylfolate.

That's also a very, very popular one and works really well for a lot of people. And then we have all of these independently as well. We have multiple different forms of methylfolate and we also have the folinic acid.

What we don't carry is straight folic and that's intentional. At this point, we just don' think it makes sense for anyone to supplement with folac acid, the vast majority of us are getting way too much anyway and it's not particularly useful.

We will link to all of these options in the show description so you can explore them at your own pace. And like I say, we'll have a blog on this as well, which will be linked in this show.

Description for you. If you have MTHFR or even suspect that you might slow methodical experimentation is crucial. We had two crashes over the last couple of months.

with you, honey. And one was way too much B12 from the B-12 shot. One was making too rash of a judgment or a correction, so to speak, right? Dropping you off of what was working actually relatively well to try something else.

Neither of them were fun. So slow, steady, methodical experiment, pay attention to what's happening. The form matters, the dose matters. And one change at a time is a really, really good idea.

If you don't have MTHFR, or the level of precision is far less critical, but it's still smart. And when it comes to folic acid, our stance is consistent.

We encourage removing it with or without MTHFR. Eliminating folate acid is one of the cleanest, safest experiments that you can do. It often provides valuable information all by itself.

If symptoms improve once it's removed, that's a strong clue that methylation or foliate processing may be a big part of your health picture. And practically speaking, ditching the foods that contain folic acid, including fortified grains, refined products, boxed foods, orange juice, canned beverages, and especially energy drinks, even the so-called clean ones.

And sports drinks too, pre-workouts. I'm telling you, it's a lot of places are often fortify with folate acid and cyanocobalamin. we just feel like it's always a net positive for you and your family to get rid of those things.

This requires label reading. It requires an understanding that not all organic food is free of folic acid, although most of it is. You're still going to find it in some organic foods.

So you have to be aware. it Is legally required to Be listed if it present. That's folate acid. Is required To be on the package. All you Have to do is look and you'll know if It is or isn't.

Anything that they have fortified and enriched. That would be, you know, when you see niacin, riboflavin, folic acid, those types of things. Yeah. And so it is the law.

So you can look at the label, but it does require reading the labels. Again, just because it's organic doesn't mean it isn't fortified, although most organic flowers are not.

Now, unfortunately, the government, as you could imagine, and probably already know by now, does not care about your health. And the government of California, which is especially good at not caring about their citizens' health, has just passed a law that requires that corn products be fortified.

And we don't know how that'll impact the rest of the country, but oftentimes because California's population is so big, a lot of rest the of country pays a price for what happens in California.

So we'll have to keep an eye on corn because currently corn chips and things like that are not fortify with folic acid, But it's very possible that you'll start to see that a So better food quality equals less metabolic noise equals clearer signals.

And that really is the goal here. All right. So as we wrap up this episode, I hope we haven't confused you too much. This episode is about restoring some clarity and not adding too many complexity.

B12, folate, and B6 are absolutely foundational, but they are also pretty personal. But for now, this will give you the tools that you can start experimenting with in a smart, intelligent way.

And thank you for listening to Vitality Radio. We appreciate you. Your support for us has been just fantastic and we appreciate Hello, everyone. I hope you enjoyed this week's episode of Vitality Radio.

Just a reminder that this podcast is for educational purposes only. This podcast has not been evaluated by the FDA. Thank you.