Introduction to Regenerative Menopause

– Well, Dr. Sharon Stills. I'm so excited to have you on this segment of Regenerative Medicine Summit. I mean how much more Regenerative can be than to talk about what we're going to talk about. – I'm excited to be here.

I I love the topic, I think it's a under discussed topic in the body has such regenerative capabilities like our cells and our organs and so I'm so glad you're bringing like light to this topic in a big way. – Fun, fun.

So Dr. Sharon Stills is going to read, you know, tell how amazing you are. Dr. Sharon Stills is a naturopathic medical doctor who helps perimenopausal and menopausal women to pause and evaluate life so they can live the second act of their story stronger, healthier and sexier while aging backwards.

That's the way we like it using her 20 plus years of experience and extensive training and background in European biologic medicine, anti aging therapies and bioidentical hormone replacement. She has successfully helped thousands of women transition gently through the different stages of their lives with all natural methods.

Dr. Stills is passionate about spreading the word about her signature red hot sexy men o pause program, The philosophy she developed for you to reinvent your health, explore your spirit and discover your sexy so that you too can create and live there at the life you desire and deserve. She founded and ran one of the largest and most successful naturopathic clinics in the country for a decade and is the host of the science of self healing podcast. She is an expert physician for women's health network and she educates other physicians as a co lead north american lecturer for the Parasols Academy in Switzerland, patients work with Dr. Stills in a variety of ways through telemedicine consoles and her life changing retreats for individuals or small groups and healing and rejuvenating locations around the world.

Some patients will even fly out to see her or fly her and just fly her in just to get the chance to work with her one on one. Well how cool this is gonna be awesome.

– And I just have to I have changed my bio, I haven't changed it everywhere around yet but I'm into pro aging. Not anti aging. I feel like anti aging such a buzzword but it's really speaks the opposite of what we're talking about because we're all aging, it's inevitable, we're all headed in that direction.

But if we can do it in a graceful and elegant and healthy manner, that's what I'm really about. So I gotta make sure that's changed. – I like that. I like That angle because yeah it's not like we're fighting aging, we want we want to because we still like the wisdom and the knowledge. I mean I don't want to be a 20 year old.

I mean I remember you know I've learned my lessons so many lessons. I don't want to relearn those lessons, you know? But we want to feel good and we want to be kind of excited about life. We want to have that, be able to have Those intimate relationships and all those things that that brings, you know, increase oxytocin in our brain, all the happy, happy neurotransmitters and hormones, you know, we want to have that and we deserve that and we can have that right? – Exactly. One of the things that I just find personally now that I'm 54 I just often just sit and dwell in this blissful peace knowing that like I have gone through the twenties, the thirties, even the forties, and I used to be a total drama queen back then and now I'm just, you know, wisdom, you really do age and get wiser and now I have such peace that I can just feel coursing through my body and I feel in my life externally and internally.

Reframing Aging as Pro-Aging

And so yes, not looking to go back to being 20, I think it's just we all have to go through this learning process that's part of being human, but when as we age and we get to really know ourselves and be comfortable in our own skin, there's just such a wonderful experience that happens and I really believe it puts you into the parasympathetic and it really helps you with your healing process. – Yeah, I love that, I love that. So tell me, I mean you work with

people, women mostly that's going through menopause, I'm sure you're working with men as well, but I mean this this is like your baby, you know, really helping women go through the stage in their life, you know, so that they can really do it in a great way.

So tell me a little bit, you know, women that come to you for for help. I mean, what are explain to me what menopause looks like for them? – Well, for someone who's really struggling menopausal symptoms can start even 10, 15 years before the actual date of when they haven't had their period for 12 months.

And so it can look like anything from urinary tract infection. Sleepless nights, low libido, hair, falling out, weight gain hot flashes, joint pain, Brain fog a lot of emotional.

So one of the things I'll commonly here is of course anxiety or depression or mood swings, but also this, I just don't feel like myself. I feel like I'm going crazy where my moods are. So just out of control.

I don't even know who I am anymore. So there's a laundry list of symptoms that go along with this and it really is just the bodies sacred way of saying things are out of balance here and hello, you need to pay attention to me.

And so symptoms can give me a clue as to, oh, what hormone is dropping or what organs out of balance or detox not occurring and so forth. But I feel like, and I write menopause with the parentheses around pause because I feel like this is a time a lot of times, especially women, we're just so busy taking care of everyone else. We're raising families where maybe we have aging parents were taken care of. We have a job and a career of our own.

In addition to all the stuff we're doing in the house and we just kind of like push through, we we take an Advil if we have a headache or we we drink some caffeine if we're tired or we take a sleeping pill and we don't really go seek help.

We don't really go to the doctor to seek help. But when menopause comes and the symptoms become so dramatic and you're waking up in the middle of the night drenched.

I feel like that's when women will actually say, okay, I got to do something now. And so to me, it's this beautiful opening, this opportunity to actually pause and really evaluate your life where you've been, where you are currently, where you want to go, what's working, what's not working?

What dreams and aspirations have you stepped into? What have you like, totally not paid attention to, but it's really important to you. So I use this time, it's like, oh good. You're having hot flashes.

We can balance those out really easily. But let's really now use this as an opportunity to do the deep work. And because we live as a species so much longer, we can live two thirds of our life postmenopausal.

And so we want to make sure that we're vibrant and healthy and that we are really changing the mindset of this is a two time where I'm just useless. I'm not going to be sexy anymore. I'm not going to want to have sex anymore, I'm going to get fat, I'm going to be in pain. Like these are all things that are just so false and don't have to be part of your experience.

– And that's kind of how women women come into my center as well. I mean that it's kind of their scenario where they're they're just, well this is the face in life, you know, I just have to accept this, you know, this is what I'm going through and it's kind of repeating the story, their their worthiness story, you know, because I mean, like you're mentioning a lot of women, they're just used to pushing through, they I'm in pain, you know, but I can't really take care of myself, I got all these other things that have to take care of and so I just kind of pushed through and even then when things get bad, like you're saying, some women wake up, which is great because they have to because they can't live in that situation, but many just think that this is menopause and this is what I have to go through and I have to suffer and they don't, Right? – No, they don't and I do a lot of work like you do with patients dealing with cancer.

Menopause Symptoms and the Pause Opportunity

And I find that that's also this opportunity for patients to really dig in. So like I dream of a day where patients wake up and they're feeling good and they're like, I'm gonna call dr still's because I feel so good and I want to keep feeling good. So let me figure out what I need to keep doing.

But we we don't operate that way. We we operate from fear. We operate from pain. I mean, I've been Practicing over 20 years now and I think I can count on one hand maybe like I can get another finger and count to six patients who have actually come in just saying I feel good and I just want to do prevention, we don't really see that very often. And that's really the key.

So when I talk about menopause, I talk about like, this is important for for any woman and at any stage in your life, you can be paying attention to your health.

So when you get to this quote dreaded menopausal transition, it can be a regenerative time for you. It doesn't have to be this downfall. It can really be. I mean, I personally, and I see it in all my patients and I always slap myself, I'm like why didn't I do before and after pictures.

But I see patients just feeling better being more vibrant in their sixties and seventies than when they were in their fifties or forties when they first came to see me?

And I personally, my health at 54 there's nothing to even discuss as to how I felt when I was in my twenties or thirties. I am so much healthier now. I feel like every year you have this opportunity to get healthier and healthier and healthier – And so what can you paint a picture of what the aging, what what the pro aging should look like? I mean, what what is the carrot that they can kind of try to move towards, you know, when they're not feeling well so that they have an image of what true menopause can look like that, the red hot, sexy menopause. Right?

– Yes. So from a do you mean from a physical perspective – From emotional, physical, just the experience of what should it if it was the ultimate experience, you know, that they, what should it look like?

– So from, I'll start with emotional, from an emotional perspective, we have to really get clear in ourselves about, first of all, we just have to take a moment and pause and think about what are our beliefs because beliefs come to us from our childhood, from our spiritual leaders, from our teachers, from our parents, from people on the grocery store line, from the media and so like we have to really stop and just weed through all that and be like, okay, what do I believe about menopause and then like, is that true? Do I really believe that?

Is that my belief or is that just something I've been taught or maybe even witnessed because we have to remember. And I always say this, your mother's menopause does not have to be your menopause.

And so I know, so we use, oh, what age did your mother go into menopause because that can give us a predictor of when you will and there's truth to that.

But if your mother suffered or had to have a hysterectomy, chances are she wasn't working with a doctor like you or I who knows how to get to the underlying causes and do the emotional work and all of these things. So you can't really judge just like when we say genetics loads the gun, but the lifestyle pulls the trigger.

And so you really have to think emotionally, you know, what are actually my beliefs. And if you do have beliefs then you have to, and you know, this can, this might not be something that you're just listening and you go, oh, I have this belief that aging is scary and now I don't have it anymore.

Like sometimes we have to do, you know, I'm just giving you the, the lead, but then you have to do the work. You know, maybe working with the professional or whatever it is that you're doing to kind of start to pull out those weeds and get new beliefs in because it's hard sometimes our subconscious is like running the show. You know I think 5% of our thoughts every day are conscious and the rest is our subconscious and that can be from when we were Children.

Like before the age of seven we kind of get this viewpoint of what the world looks like. And so we can go in with the

M. D. R. With family constellation therapy with journal E. Journaling with plant medicine with somatic therapies. I mean there's lots of different ways you know talk therapy can take you so far but a lot of times these things In our tissues and we need something a little deeper than just talk therapy.

But we have to start believing it and stepping in and thinking about what we want and looking for role models because there is proof out there that you can age gracefully that you can be rocking it at 80 that you can be starting a new career at 75.

I mean you just so you have to start shifting your mindset and emotionally thinking about you know what does this mean to you and how can you embrace aging Because when we think about aging we think about dying and other than public speaking dying is is the biggest fear and so we have to come to terms with that. So it's it's a lot of things and I often tell women as like a practical exercise to figure out what you wanted to look like.

Think about how you would like to be eulogized at your funeral. What would you like people to remember you for? What would you like your legacy to be?

What would you like to be known for? And you know, it can be anything from, you know, traveling the world and creating world peace to just having a warm home and making the best paleo banana bread ever.

I mean there's no judgment on what you desire, but really thinking about that. And then thinking about if my eulogy was today, am I actually living into that?

Am I taking steps to do that? I did this for myself and to me dances medicine and I love dancing and I was like, I talk about dancing all the time and I'm like, I have not been in a dance class for the last year.

I'm signing up for a dance class. So it really helps you get clear on what you want to do and to make an action plan for it. So that's a little bit about emotional.

But we can always regenerate our thought processes. We can always, another thing I didn't mention, but I love is tapping E. F. T. Tapping is something that's so simple.

I like go on you Youtube in the morning. I have a I have an E. F. T. Youtube crush on brad Yates. He's like this tapping guy and I love him and I just tap with him and it really resets your nervous system. It's managing um your your tapping on acupuncture points. And it's so simple.

It's free. There's a gazillion resources out there and it really makes a big difference. So it's something you have to like be conscious about and you have to make an effort. You can't just say yeah I think that aging is scary and I'm gonna work on changing that. You actually have to like put your feet in the dirt and do the work and then – And at that time in your life also it it tends to coincide with, you know if you've had if you have Children it tends to be kind of where they're on their own and and you're you're having to rewrite your story and because you've been there in one role and just supporting and taking care.

Mindset, Identity, and Emotional Renewal

But now it's in finding that sense of self and finding your purpose and finding who am I to find, you know what what is what is my worth as an individual?

You know versus you know worth of what I'm giving to all these other people and it and I love, you know that like you're saying the eulogy if I would write it, what would I wanted to say, who am I? And it's finding that place and the impact that that has on your whole endocrine system and hormonal system.

– And that's so true. It really is If you've been married, it's really a time to reevaluate and look at your relationship. Because if your kids are leaving the nest, who have you become in relationship to each other.

And if you're a single parent, like I was it's like, oh my God. I mean, I remember when I dropped my first son off and

at college. This is years ago, My other son was with me and I like collapsed in the we're in the parking garage of Ut Austin. And I just like lost it.

Like my son had to like pick me up. I was like hysterical cause I was like, oh my God. Like who am I now if I'm not your mother. And so it's definitely this time of really reevaluating.

I think life is always about reevaluating. I feel like I look at life as chapters and I've kind of just decided that every chapter is a decade. And so I think it's important to really reevaluate and think about about what you're doing and who you're doing it with and what you want to be doing.

Because life is so short. You know, in some ways it goes by in a flash. And so it's up to us to really be the masters and the co creators of our lives and decide what we want them to be about. And I personally travel is just like That's my thing. And I you know, changed my whole life around.

I really blew it up. I closed my clinic that I had and I just changed everything because I wanted to be able to travel and extended period of times and have this experience that my soul was yearning for. And so it's okay to blow our lives up and step into another version of ourselves. And sometimes I think we're we're afraid and and the truth is we just need to go inward because we're the ones who know where our destiny and what we desire, we can't ask outward.

We have to always remember to come inward and that's why I'm such a fan of mindfulness as medicine because I truly believe that all the answers lie in the silence and we just have to tap into it and connect to it. – So when a patient comes to you then they you know you described kind of what it looks like for me many of these patients that come to you, how do you unravel that? I mean what what are some of the what are some of the directions that you start to look at? I mean you mentioned like mindfulness and E.

F. T. L. A. B. F. T. That's a fantastic tool? How do you kind of drive them in the direction they need to go? Do you do certain tests to figure it out? Do you do what what what do you do, what your people kind of look at.

– So the first thing I do with the patient is I do a very extensive intake for about an hour and a lot of it is just talking and getting their story and getting a sense because I believe and that's kind of why I created red because the R.

Is for reinventing your health and the E. Is for exploring your spirit and then the D. Is for discovering your sexy and like your passions. And so it's kind of my my take on the mind body complex and I believe that the mind body complex is married and we have to always address both.

And so it's kind of my job as the physician to decide what takes priority here. And so and also kind of seeing where patients at because I feel like patients are either really in the mind camp and like they're totally into using their mind to change things or they're really in the body camp and they want to swallow 20 supplements.

And so I like to you know kind of help harness people where they're already have energy and where they're excited about and so I talk with them and kind of just make a plan and let them know that we're gonna be approaching all of these things.

And often I'll kind of do the our first I'll do the physical body first because it's hard to do like releasing anger and rage if you have really bad muscle pains and could the muscle pain be from past lives or emotional stuff.

Yes, but can we are physical beings and so can being dehydrated or being deficient in magnesium or not having good thyroid function or whatever it is play a role in that.

Yes. So I kind of like to balance the Body and the vessel and just see where that puts us. Does that put us a little higher up on the playing field. Is there a little relief?

Was there some physical stuff? And then we can kind of deal with the emotional things after that once the body is kind of settled. So I do extensive testing from looking at like vials of blood. Work to really see what's going on and

to evaluate it from a more biological regulatory perspective, I do thermography scans on patients to see their regulation. I do heart rate variability.

Sometimes we're putting blood under the microscope. I'm looking at their douches. I'm doing a lot of like stool analysis and saliva testing for cortisol in 24 hour urine testing and mold testing and lime testing. And I just like to really rule it in or rule it out like let's see is this an issue because there are pathogens like lime and the co infections and mold and these can be driving things.

So if you don't just find out if it's an issue or not, you can be working really hard to balance the body and missing it. So I look at toxicity levels. I look at heavy metals and and then of course, you know, even before that I'm just looking from a bio regulatory perspective, so making sure that scars are cleared doing a lot of work on the teeth.

So my my patients no, they're very often getting booted out of my office very early to go get their their teeth taken care of. I just learned that at a very young doctor age from working over in Europe and Germany and Dr. Berman from Austria that like you have to handle the teeth that like so many focal infections and blockages to healing aren't hanging out right here in the mouth.

And like before I learned that I just thought like a lot of us think that the teeth are just about get a cleaning once a year and make sure I don't have any cavities and if I do get them filled. And so I have since learned that you know from root canals to amalgam fillings to galvanic currents decapitations, that a lot of what ails us physically starts here.

So I always clean up the teeth and I get all the amongst Aries open. So I'm very big into making sure the body knows how to drain because if we just go in and start doing detox, well then we'll just kind of moving toxins from one place to the other.

So you have to make sure your lymphatic system is moving that the extra cellular matrix. So we're all very concerned about the health of the cells in the mitochondria and that's fine and dandy. And I like that too.

You need good mitochondria for hormone function for example.

Testing, Root Causes, and Bio-Regulatory Assessment

But you have to think about the home that the cells live in and that's the extra cellular matrix, The fascia, the lymph is flowing through there. So I make sure that is opened up. We have to make sure the liver is moving and the bile. I think we focus a lot on the liver and we forget about the bile and the bio is super important.

And looking at the microbiome and looking at genetics, just so you have an idea where someone may be a little weaker and need a little more support. So it's I was talking to someone other colleague before and we were talking about the myth of the magic pill and I was like, I wish there was a magic pill, make my job so much easier, because it always, it always has intrigued me for the last 20 plus years that, like, so many times patients will come in and I'm sure you see this too.

And they're like, oh, the doctor said, there's nothing I can do. I just have to suffer live with this. I can take this pill to suppress the symptoms. And I'm thinking, oh my God, there's like, 7000 things we can do.

You know, it's my job to kind of weed through it and figure out what's primary and what's important. But there's always, I mean, you if you're like listening and you're not getting the help you need, like don't give up.

There's sometimes we have to jump like really way out of the box, but we do, if we need to like, you know, everyone needs a different method for how they're going to hell and but it always exists and that's why me as a physician, I know you like, we're constantly going to conferences constantly learning constantly.

You know, I'm like, like women like to shop, you know, but I'm like, like the doctor version woman, you know, I like to go to conferences and buy new toys and new healing modalities and I'm like, you know my kids, they're like, oh

my God, you just can't stop buying things.

But I'm like, yeah, but this can really help people. – Yeah. And so when you get to that age, I mean, what happens a lot? I mean, you have the adrenals, you have, you have your whole hormonal system, You have the adrenals, you know, they are the ones that help you deal with stressors and all these infections and chemicals and have metals and all these become stressors.

And so now you have, you go into where hormones are produced at, at a slower rate than from your ovaries. So now the adrenals are having to take on that function in addition to all these other stressors.

So you know like you're saying it's so such a key to resolve these stressors that you might have been able to handle when you had that additional hormonal support but now you're having less. So that's why you have to look at the individual as a whole and to clear all of that junk out in addition to supporting it hormonally. – So what I will say is yes like theoretically we travel through menopause and our hormones pick up the slack and start producing our hormones for us. But that just doesn't happen because let's face it we're human.

You know if you're from the states listening to this even if you're not like we all have stress, it's getting crazy out there. The last few years have been really not.

So and you know it just seems to be continuing on that trajectory. We're not getting rid of the toxins the E. M. F. So all these things and so are our bodies are stressed. And so by the time we get to the menopausal transition, our adrenals are typically shot and we tend to think there's a lot of people talk about high cortisol and that's why I have belly fat and it could be but my experience in testing um you know hundreds and thousands of women is that um a lot of times their adrenals are just bottom line like they've been through the high cortisol period, and now they actually could use a little cortisol.

And so I'll use bio identical cortisol with them just to kind of tell their adrenals. You can go lay in a hammock in Hawaii for a little while we got you.

We don't use milligram doses that will shut down the adrenals, which is sub physiological to support the adrenals. And yes, so we have to work on our adrenals and then the other big misconception I think with regeneration is that, well, I'll take some herbs to stimulate my hormones and I can tell you that too. After all, my experience typically doesn't work.

And by the time they get to my office and I'm like, look, let's just put you on bio identical hormones like their natural to that's what your body actually lost. It didn't lose an herb, it lost its hormones.

And so we're gonna give you what your body naturally produced in a safe form. You know, I compound them all and have no fillers in my creams and soap for the acidophilus and my progesterone capsules. And so, you know, why not give your body back what it's lacking and what's causing so much havoc.

And when we do this and we do it wisely and were monitored and urine and we're not overdosed then it's like your body just goes, it's like, thank you and your brain comes back on and your lower your risk of alzheimer's and your bones get stronger and you lower your risk of osteoporosis and your breasts get healthier and you actually lower your risk of breast cancer.

Your heart gets healthier. You lower your risk of heart attacks. And cardiovascular disease is actually the number one cause of death in women. I think a lot of times we think it's breast cancer, but it's actually cardiovascular disease and not having proper hormones puts you at a much higher risk for cardiovascular disease. And so, you know, it strengthens your immune so system. I mean it just does so much good on top of like making your skin healthy and helping if you have extra weight gain and giving you a libido and helping you sleep and all these other important things.

So to me and in my practice it's not just done in a vacuum because I think you can go to hormone clinics and get hormones and yes, typically when you take hormones and they're given to you in the right form and the right

dosage, you're like, you're gonna notice something, it's a big deal. But I'm, you know, as trained as a bio regulatory physician, like I'm like, no, you gotta do the whole gestalt and we don't give you your hormone refills if you're not like actively making sure you're sweating and moving your lymphatic system and moving your bile in your liver and all of these other things and living a happy lifestyle.

So eating properly hydrating, sleeping, moving, communicating, Getting out in nature harnessing the power of the sun and so to me it's like it's a whole thing that you have to do. But having the hormones in there is such a game changer. So I'm really on this mission because I can't tell you how many women I see suffering they're told you can't have hormones because someone had breast cancer, you had breast cancer or your risk or no hormones are not like they're told all this stuff that's just not true and when they can get the hormones I mean it just gives them their lives back – And the key is like you're saying I mean yes you can just get on hormones and you you feel I mean you'll feel the change but you you do also want to work on the things that have drained your hormones you know that are you want to seal up the holes in the boat. You know at the same time as you are then supporting yourself with those hormones and that's why it's important to work on both at the same time. – Yeah if you take you know if you take your biased and your progesterone and your around your oxytocin D.

H. A. All the good stuff but you are like not sleeping and angry and in horrible relationships and not eating right and always stressed out and not paying attention to detoxifying and all these things then they're not gonna work is good and you're you're still going to end up sick.

It really has to be the whole, you know, the whole banana. – And in your experience because there's so many different ways that you can then take hormones.

You have creams, you have pellets, you have injections, you have oral things you can take. I mean are there ways that are better than others? And are there tests that are more accurate and others in order to be able to monitor what's going on?

– Yes, I have there very strong opinions about so creams. So I'm talking about for women. So for women like biased creams, testosterone cream, you can use progesterone cream.

I also use progesterone in a capsule. I give women bolts because they have different mechanisms of action in the body. And the capsule actually will hit and like act like a Gabba, it hits the cabaret so it's more relaxing, helps with sleep.

But when you give it by cream it actually has a more systemic effect as what I found. So I'll do both. Dhe a pregnant alone. I actually do lipo somo dewdrops. I used to do creams and sometimes I still do but I found a lot of women didn't absorb it as well as the lipo.

Soma one's oxytocin we do through a nasal spray, melatonin liposome aly thyroid can just be, you know, like a net like a nature thyroid natural pill, adrenal support. Like I said sometimes I use bioidentical cortisol that's in a capsule. Or I use herbs and other things to support the adrenals. As far as like men can have testosterone shots and then I, you know, we all have all the hormones, they're just in different proportions.

So like sometimes I give men progesterone too, you know, sometimes they really need it. And so I am not a fan. So definitely you've heard me talk before, you hear me say this a lot. But no oral estrogen.

Like if someone tries to give you oral estrogen, you gotta run far out away from them because they haven't been properly trained and there are a lot of people who want to dabble in things and they mean well hopefully, but dabbling can get you into trouble.

Oral estrogen is known to increase cardiovascular issues.

Hormone Therapy, Delivery Methods, and Monitoring

It raises your c reactive protein. So that's a big no, no, you only want bioidentical, none of the synthetic like that is

dangerous. I know at least cancer. So you want to stay away from that.

As far as so that pellets not a fan of pellets, maybe there are people out there who actually understand how to do pellets, but my experience, I used to work in a clinic here and everyone who came in was on pellets and they were all whacked out. No one felt good, they were all way overdosed on testosterone, It was just such a nightmare had to detox them all out and rebalance them. So it's really hard with pellets because a lot of times you get like a big burst and then it drops off and and I don't see the need to have to implant anything in you that never like you know, I don't see why you would want to do that. So I'm not a fan of pellets.

And so I think that's kind of like how to as far as monitoring Oh and applications. This is a huge one. Application of creams. So like john lee like from years ago wrote the book what doctor didn't tell you about progesterone.

He was awesome and like brought so much knowledge but he had everyone like rubbing creams in different spots and what ends up happening is you'll get like a dermal fatigue where it starts to get stuck in the fat tissue. So I apply have my patients apply the creams to the external labia. It's new coastal tissue, you don't get that thermal fatigue, you get better absorption.

So typically you can use less of the hormone and still get as big a bang. And then as far as monitoring 24 hour hormone. Your ins when someone is on hormones is an absolute must, it's the way to see how the hormones are metabolizing.

And if any of the metabolites are pushing towards proliferation or D. N. A damage, you can modulate that you can you know give a supplement here a certain thing and you can change the way they're metabolizing that's really important. I'm not a huge fan of blood for estrogen and progesterone. I think it's very inaccurate.

Especially if you're on it and in the blood they don't really check est real and estradiol and they certainly don't check the metabolites. I do like blood.

I do think it can be pretty accurate for testosterone certainly for men. And I'll look at it for women too. I think it's a good way to check your D. H. T. Um And for men estradiol so and DHT is di hydro testosterone which is a metabolite of testosterone which you want to make sure you're watching because if you're converting that way and you're having hair loss that's probably the reason. I love blood for thyroid.

I like saliva for cortisol. To see the diurnal rhythm. I'll also get like levels in the 24 hour urine just to see like your stores in your cortisol versus your cortisone.

Did I forget anything? I know that? – I think you did great. So I mean of course you did great. I just want to reiterate again. So like you said you know women they put it here here here here you know belly button inside thigh and all these kind of they circulate. But so what you're saying is that you get the tissue fatigue in those areas and it kind of accumulates in those areas.

So if you do it on the outer labia, you you don't get that tissue fatigue and it still distributes throughout the whole body. – Yes, because it's, I mean, you can also do it on your anal mucosa, but most women would rather do it on their vaginal, but like when, when they do their 24 hour urine testing, so we don't get contamination, I have them apply it to the anus because that's also mucosal tissue. So it's moist, it's that tissue outside your vaginal canal, that's moist. And so, yes, it's much better absorption.

I learned this years and years ago from Dr Jonathan Wright, who I consider like, the father bioidentical hormone replacement. I think he wrote the first script. And so I, you know, I always figure out who's the best in the field and I go learn from them.

So I can be the best too. And so I studied with him to figure out what he was doing and I use his lab meridian Valley, that's where I run my 24 hour urine test.

I know there's a lot of people doing dried spot urine test, but my experience is that the 24 hour urine is more

accurate. So I use that and then I just want to say, like, if you're on hormones and someone's checking you in saliva or blood, you're gonna see, like, falsely elevated, I see this happen. A lot of patients come in, they're like, well, I was taking off my hormones because I have this?

You know, so once you're on them, you really can't trust saliva. It'll mislead you, and even blood can mislead you. So, I just find monitoring symptoms and 24 hour urine is like the optimal way and then if I need to spot check anything, I can um, the 24 hour urine also does thyroid hormones. But I find that I do trust blood work. But I also think if you have great levels in your blood and they've ran all the thyroid levels, you need run that we're all individuals.

And just because you're in range doesn't mean that's the range for you. So I encourage everyone, you know, with your doctor, make sure you're working with a doctor who's looking at labs. But most importantly, looking at you and, you know, if your labs look great, but you're still the poster child for hypothyroidism, then you probably need some thyroid support.

Don't let I see too many women and men to write who are told, oh, no, it's not your thyroid, it's fine. I checked your levels and, you know, and typical, like mainstream doctors, just check the TSH.

But even in the alternative world, when they check all the levels and they don't realize that we're individuals and what's good for you may not be what's good for me and you know, who are they? Who are they getting these?

You know, these optimal ranges from anyway, right? Like a lot of patients I see, you know, they're certainly outside the bell curve. – And so with the metabolites of if they do then the blood test, you know, it shows elevated when they do. Then the urine test at 24 hour urine test.

It is and that just shows the metabolites, right? So it it will then reflect more accurately as to what's going on in the system. – Yes. So the blood won't show the metabolites, but the 24 hour urine will show it'll show the levels but it will also show metabolites.

So you can see, you know, we all talk about, oh estrogen causes cancer which it doesn't. But certain estrogen metabolites or certain ratios of E one, E two, E three can be more proliferated and can potentially be contributing.

And so by looking at the 24 hour urine, we can really see, oh you have the protective metabolites or oh we need to shift this. You don't. So there's like something called an estrogen quotation which is, oh gosh, now I have to do math.

It's it's the comparison of E. Two and E. One to E. Three and E three is est real which is very cancer protective and so you want to have more rest real than E.

One and E. Two. And so this can look at it and they've shown like anything above a one and higher shows you're more protected against breast cancer. So I mean I've been working with patients for 20 plus years have a huge population of women dealing with breast cancer have always used bio identical hormones for prevention for treatment to prevent recurrence. It scares me when women aren't doing hormones because I know that is a causative factor and I don't think, you know, there's never just one reason you develop cancer, it's multi factorial and cancer doesn't develop typically in you know, a weekend. It's it's the culmination of years of choices that are not supporting your body in the right direction.

– And kind of going back to where we talk about, you know, it's kind of the vision of who we are living in life that we don't want to be in. You know, those are in addition to all the toxins, chemicals, five G all these things, I mean all these things fill up the bucket that later on becomes things like cancer. – Yeah. And I'm sure you hear this all the time.

But I I love I know we're like we're getting there, we've turned the corner when patients are grateful for the cancer right? Because it really just like I'm trying to use menopause is this opportunity to pause and stop you in your tracks and redefine the habits you have and what you think about health and how you're gonna live your day to day life

cancer makes you do that. And so it often wakes up patients and they really grow and learn from it and they have gratitude for the experience.

And I know that might sound really weird to some people listening. But it's really a different way of looking at our relationship with our body and when our body is out of balance and it speaks to us or screams to us, how are we going to respond to it? And, you know, old school traditional medicine has you just want to suppress, get rid of it, get rid of it, don't deal with it.

And the way we look at medicine is no, like, come on, show your face, let's hear what you have to say. We're gonna go, we're gonna dance together, we're gonna figure this out.

So it's a very opposite way of thinking about things – Yeah and it's honoring your body, giving your body a voice and and listening to it because your body is trying to connect you with what is out of balance. And if you keep making, you know, putting duct tape over that voice, you're never going to resolve anything and it's gonna start to scream louder and louder and louder until you have no other choice.

– Yeah so this this being human and, you know, being a part of actively regenerating your body and choosing health, like it's, you know, we're sitting here talking about it, but it's it's a commitment, It's something you have to really, you know, be engaged with, its, you know, it it's a challenge to be human, right, and it's easy to just be swept up and stress and bad food and bad choices and just kinda roll along with the life and so you have to really like empower yourself and say I'm, you know, I'm choosing health, I'm choosing, you know, I spend time as I'm sure you do right? Like, you know, I have created a life where this is important to me and so food choices and detoxing and spending time in nature and taking my supplements and doing my testing and all of these things. I just had my blood drawn and the lady came to my house to do the, she's like, you're the doctor, why are you doing this?

She's like, are you okay? And I'm like, yeah, I'm okay.

Whole-Body Regeneration and Closing Thoughts

I'm like, I just, you know, if I ask a patient to do it and it's something I can do. I do it too. You know, I'm we are a different kind of doctor, we are, you know, I I don't know about you, but like, I was very sick.

I mean, I was a disaster growing up, I was a hormonal disaster in my teens and my twenties like really bad and so I have learned how to take care of myself and made it a priority because feeling good, there's nothing more important, your health is your wealth and there's nothing more important than feeling good And maybe there are some people out there who like they got these really great strong constitutions and good genes and they can, you know, they can just Mcdonald's and live to 120 be fine, but that is the minority. And so the majority of us have to put some time and effort and attention into, into, you know, having a healthy body.

And so I'm personally grateful for my health challenges that I had because they have, you know, they have put me on a path to healthy living and to really being in touch with my body and making wise choices. You know, gone are the days of my twenties where I was like, I get a gold star because I can get by on four hours of sleep now. I'm like, you know, don't even talk to me unless I've had at least eight hours for sweet, – Get a gold star because I had my sleep, I meditation, I did my detox, I did my coffee and um I did my whatever.

All that is – Exactly, exactly. And I think, you know, you can, you can get overwhelmed. So I always tell patients like start slowly pick one thing integrated, you know, change it up because like rigidity does not lead to healthy aging. So have lots of different things you can be doing. It's just like, you wouldn't want to eat the same food every day, like a lot of times we find, oh, oatmeal and blueberries is healthy and then a piece of chicken with broccoli is healthy on my salad and when we eat the same thing every day one we can create sensitivities to those foods but to we were not giving our body a wide array of nutrients and so our body can start to react and it can be missing things. So mix it up, be curious and have lots of different ways. You can detox, move your body meditation, all that kind of stuff.

– I love it. I love it well and and they they can, I mean you consult with people all over the world and you also have

programs, you know, you have these kind of master classes, you know, you can people can go through and how to, you know what to look at and explore to kind of go into that face of their life where they can have a red hot sexy mental pause. – I love how not everyone says it, you say it, I appreciate that. But yes, you know, I mean obviously not everyone can work with me personally, but there's so many things as you know that we can teach people to do in their lifestyles or even just you know, we're talking about today, just things you can take back to your own physician or be armed with to go find a physician and so you know, I love teaching, I love educating, I love sharing because I really believe the more we get this thought process out there, the more we can actually change the health and individually our lives and then collectively. And so I'm very passionate about spreading the word. – Wonderful. I love it.

Well, Dr. Stills thank you so much for spending the time with me and sharing your brilliance on this subject. – Thank you. Bye everyone.