How to Achieve Deep, Restorative Sleep Transcript

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Case Study Introduction and Privacy Note

Hey, guys, welcome back for another case study. So in case you haven't seen the previous case, studies are is going to repeat something. Which is that in order to protect patient confidentiality, we're showing you actual patient case studies and how they were able to resolve a major issue at the root cause.

But we're going to use my report to make sure that their name and data isn't shared. So we have permission to tell people stories. We do not have permission to share their data.

So we're going to use my report. And we tried to find people. We have thousands of clients and we tried to find people that have a similar genomic profile to me in certain areas so I can actually share my data and show you what they look like.

So just a little caveat there. So in this particular case, we're looking at sleep.

Sleep Problems and Metabolic Red Flags

We were dealing with a lady who was, I would say in her late thirties, early forties, who had sleep issues. So she said, I can't sleep at night. And that statement is usually too general.

We need to get a lot more specific about what does that mean? Does it mean you can't fall asleep, you can't stay asleep, you sleep through the night, but you wake up feeling not arrested like you didn't get quality sleep?

What's going on? So the two things that stood out for this person, we looked at their various systems and we saw that their food response, their metabolic pathway was off and they were struggling.

So what was going on here? Big red flag. If I scroll down, you'll see that their ability to convert starches so bread, rice, pasta into glucose, which is the fuel you used, was the worst possible there.

AMY1 gene, they had the AA version, which means that they're highly inefficient, utilizing starches as fuel. They also had the worst possible insulin response.

So not only do they struggle converting rice, bread, pasta, sugar into fuel, they also had a dysregulated incident response to that input of the starch.

So this led to massive metabolic unrest, right. Led to a massive metabolic challenges where if they were eating within 3 hours of going to sleep, their body at the time when it's supposed to be resting and recovering is struggling with metabolic hell.

Let's call it right. They were they were in this challenged state because it took them so much longer to plow through this stuff as fuel. So it required a couple of things.

But diet, change, like understanding what the body was actually able to work on, but also eating windows like what time was the appropriate time for them.

And so that one thing where we were able to track, you know, we use the ordering and we used glucose monitoring, continuous glucose monitoring to understand what was going on with them.

Stress Response, Serotonin, and Sleep Disruption

And we showed the empirical data to them like here's what's actually happening and why you were struggling. So

that was one. They also had a second issue.

Their second issue was their stress response. And so what was going on with them is these two genes here. So to is your body's ability to regulate your adrenaline response and therefore how you react to imprinted negative stimulus.

That adrenaline rush that happens when a problem occurs, you know, correct that and some problematic email and it's shocking and it causes the adrenaline rush.

Some people are much more likely to imprint that feeling. Serotonin. Serotonin is your your brain's ability to manage and prioritize stimulus and manage mood as appropriate for whatever is going on.

So now this person was dysregulated in both of these areas. So the challenge is twofold for them that we were able to resolve this through supplementation and coaching.

First of all, awareness of them even understanding how they think and perceive and potentially how their peers and family perceive them, how they behave.

So the first one, the biggest problem we see when it comes to sleep isn't so much I can't fall asleep, which this person would have had with the metabolic struggle which got resolved.

It's more that I can't stay asleep. This is actually the biggest sort of bucket of people that say I have sleep problems when your serotonin is dysregulated, it means that your brain can prioritize stimulus.

And serotonin is the chemical or hormone, we should say, that is supposed to wake you up. So we know that melatonin is a supplement we can take to put us to sleep.

Your brain, you bind it and you utilize it and it puts you into that sleep state. Serotonin is meant to be bound and triggered when that first glimmer of sunlight comes through the window, which is the trigger your brain is waiting for that trigger to by and serotonin wake up when your serotonin is regulated.

The challenge is that every stimulus in that second half of sleep when you know at some point your body knows it's going to have to wake up at some point in the second half.

Every stimulus, it's too hot. It's too cold. My hubby's photos to call to touch me, she, she or he pulled on the blanket. There's a weird there's a coyote howling outside like whatever's going on, that's a stimulus of any sort.

And that second half of the brain is confused and trying to understand, is this the thing, the sunlight that I'm supposed to respond to? Oh, no, it's not.

I'm going back to sleep and you're in and out dreaming, awake, dreaming awake, dreaming awake. The challenges that this is the time that's second half asleep when you're also making serotonin.

So serotonin is made in your gut during this time when you're supposed to be sleeping, but you're being challenged because your serotonin is dysregulated. So it becomes a vicious cycle.

It was not dealt with properly. So there's a couple of solutions. First of all, five HTP is a supplement that manages serotonin levels. But more importantly, this person needed that ideal sleep cocoon.

So we got them a weighted blanket.

Sleep Environment Fixes and Journaling

Sounds simple, but the science behind it is complex. We still are wired like our ancestors. We're still wired to be aware of sleeping in a cave and not being eaten by a wolf while your sleep.

Like that's literally what our brain is waiting for. And so the safety that sensorial your organ, the skin organ is head to toe. So it's constantly sensing what's going on.

And if you are cuddled in that heavy weighted blanket, it signals safety. You know, it signals that you're in an environment that you don't need to worry and respond to every little stimulus in the brain or certain things down, you tend to overheat in that condition.

So you need a cooling a mattress cooler. And so there's there's products you can buy like chili sleep that allows you to manage the temperature of your actual mattress.

And then you have this weighted sensorial like safety. You have the cooling from underneath you and of course, zero light leakage. This is the signal and we no longer sleep in countries and cities where we have this perfect, you know, light call it a schedule that's mirrored to our circadian rhythm, our genetic circadian rhythm.

We live all over the world. And if you're in North America, you know what it looks like in July versus what it looks like in December, two very different clocks.

And so the body's constantly adjusting to all the stuff. So it's it's managing all the stimulus and going back to adapt to be, which we didn't speak of yet, managing the stress response.

So managing how do I deal with trauma, pain, stimulus, and how do I resolve those things before going to bed? So it's very important to not bring your trauma, pain and problems with you to bed because the brain the brain tends to ruminate and think and spin.

And when you wake up in the middle of the night at 3 a.m. to use the washroom, the first thing you're to think about is your problems, and then you can't get back to sleep.

So before getting to sleep, we taught this person to just journal, to take whatever their problems are, log them and say, Here's the legal letter that I got yesterday.

It's not resolved yet, but I'm going to schedule at 10 a.m. tomorrow a time to actually work on this. And the brain receives that as resolution. It's not closed, but it's resolved.

Recovery and Ongoing Maintenance

I don't need to ruminate and think about this thing anymore. I've now parked it and it's resolved, but at 10 a.m. tomorrow I'm working on it. So there was a mixture of metabolic unrest, some behavioral coaching that was required, some supplementation.

So adding of some call it biohacking tools like we did sorry, cooling mattress, cooling weighted blanket, things like that. And all of a sudden this person who struggle with sleep for so long issues resolved and they were able to sleep properly ongoing, they had to be careful.

There's still a sensitivity level and there's maintenance required, but they finally were getting good sleep, which means everything else got better.