How To Make Menopause Your B*Tch: Master Menopause With Nutrition, Hormones & Self-Advocacy Transcript

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Introduction and Guest Welcome

– Welcome everyone back to another, I think I always say this every episode, another amazing episode. I'm going to use a different word. Welcome to the next spectacular episode of the Medicine of Mindset Summit.

I'm Janet Danielson. I am your host and with me today is and I'm gonna go to the limb and I'm gonna say a new friend. We connected just a little while ago and it was a Jerry Maguire moment, if you guys have ever watched that movie, she kind of had me at hello with just her authenticity and her expertise in the area of menopause because as a 49 year old woman, you know that we are seeking out as much information as we can just to ensure that that part of our life is as smooth as it can possibly be.

So everyone please join me in welcoming Esther Blum to the medicine of mindset stage. Esther is an integrative dietitian and a menopause expert. She has helped thousands and thousands and thousands of women really master their menopause transition and she does it very specifically with nutrition with hormones, self advocacy and I believe we're going to learn today how she works mindset into that whole experience.

This cool lady has been on the goop podcast with Gwyneth Paltrow, she's been on the Today show, she's been Dr. Oz, like she's a pretty big deal. And so I'm so thankful that Esther you said yes to being a guest on my summit. So welcome to the Medicine of mindset virtual stage.

– Thank you. Thank you. That was quite an intro. Thank you, Jana and yes you had me at hello too so the feeling is mutual. – Well that's fantastic. So okay let's set the stage here.

Everybody kind of got to know a little bit about you through my getting to know you. Why don't you? Everybody has you know their why for how they meander their career and ended up in the you know the area that you have become such an expert in. Let us get to know you a little bit better by helping us understand what that journey was for you.

– I grew up in a really medical family. My father was a dermatologist, my mother was a nurse, my grandfather was the tonsil king of Brooklyn. He was one of the first graduating medical school classes of N.

Y. U. in 1921. He was a very gifted ears, nose and throat surgeon. And his second wife was a dietician who he trained to be the anesthesiologist. So the two of them took out my tonsils in their house in Brooklyn.

They had an O. R. They had a 12 bed pediatric recovery room. I mean it was pretty wild to be like oh yeah I wasn't even in a hospital to like gave birth.

Esther Blumu2019s Career Journey into Menopause Care

So because nanny and poppy took my tonsils out. So I watched my father and my grandfather do house calls on the weekends, do you know grocery aisle consultations, you know just really country doctors.

Not in it for the money really in it for healing and just I love the science, but I didn't want to go to medical school and uh nutrition was a degree.

Clinical nutrition is a pre med track, just less minus the physics really. And I was like sign me up. So I went in it for the academic reasons but thought this can be a great field down the line if I ever want to start a family, you know, it's just really flexible and I envision myself in private practice for a long time. So the first five years of my career was actually spent in a very traditional trajectory in hospitals, in cardiology units. And after having a whopping 10

minutes to give someone diet instruction after they just had a major heart attack and then never seeing them again. No continuity, no follow up, no ability to really impact their life or work on behavioral changes or mindset changes then you know, I said I really need to do something else. And I know as doctors were not particularly respectful on the whole of nutrition.

They just thought nutrition was giving someone a can of ensure which is just all sugar and chemical based. So I got certified in functional medicine and left and never never looked back. So how I got really into menopause, I went just from functional medicine, a very general functional medicine practice of treating you know, everything under the sun on autoimmune conditions, gut issues, skin problems, you name it inflammation, cardiovascular disease. And over time, you know, I started in my twenties, my private practice. So over time my clients really grew with me and more and more women were coming to me for menopause and I was like, oh jeez, I don't I don't even know where to begin with that.

So, you know, when the universe calls on me, I really try to answer. So I decided to take it upon myself to um get trained in treating menopause. And that meant, you know, started running all sorts of tests in my practice, started doing the dutch test.

The G. I. Map started understanding detox pathways in the liver and the gut and started really building a phenomenal network of physicians that I could refer women to who we're not gonna gaslight them, who are gonna give them support through their hormonal trajectories.

And really, to my utter joy and delight, was like, really saw the impact that hormone And exquisite menopause care and lifestyle management and diet and exercise could all have on a woman's menopausal trajectory.

So it's another reason why I wrote, see you later ovulating, which is my next book too, because I was like, I want to give women the tools they need to get through menopause, there's gonna be 1.2 billion women in menopause by 2030 and right now in a conventional medical practice, you will likely either be given a pat on the shoulder and told this is all in your head or this is just menopause.

And this can't possibly be your hormones. Or you will be given a prescription for a birth control pill or advised to have an I. U. D. Place. So that to me is lazy medicine. It's woefully inadequate and we deserve better as menopausal mama's. So here we go.

Let's you know this is how we change the world giving women the tools they need to go to their doctor to self advocate and say I've done the research.

I have the studies because I put a lot of research study in the back of my book. I have the studies. I have the research. I want to start hormones. And if your doctor isn't hip to that or doesn't know what they're doing. There's plenty of doctors who will be more than willing to support you and help you get the job done.

– So let me ask you this. You use the words that it's all in your head right? Like these these symptoms these experiences. And let's kind of flip the script on that a little bit because we are you know we're talking about mindset here. So what have you seen in your practice around?

Like I mean well I want you to touch on you know what happens in a woman's body when she goes through menopause. But I feel like like when I can think back to when I started my period and all those voices in my head, all those thoughts like oh my gosh, how do is this?

Is this how I put on a tap on? Is it kind of hurt like all these things right? And I feel like now that I'm on the other end, that I'm having some of those same voices like is this right? You know, because I'm feeling less connected or more disconnected to my body. So can you touch on what happens to a woman's body when she goes through menopause? And then can we focus on on that mindset piece and how quickly because of those hormonal changes, you can actually feel like you're not yourself or maybe you feel like you're a different of yourselves within like an eight day period touch on that. – Well and really, you know, there is nothing but harmony between us and our bodies as long as we listen.

And so there isn't a woman who comes to me who says, I'm pretty sure it's my hormones who's ever been wrong ever. And we all know our bodies if if you leave today after this interview, just understand like your body keeps the score and um you're never wrong. We know when the wind blows differently.

We know when we're ovulating, We know when we're not ovulating, you know, we know our bodies um but what gets confusing and where we get confounded is that no one is prepping us for why? What to expect.

And one of the biggest changes we see in perimenopause and menopause. And to clarify the symptoms are often the same.

Understanding Menopause Symptoms and Hormonal Changes

It's just that menopause is 12 consecutive months without a period and perimenopause is the 5 to 10 years of window prior to that where your ovarian production of hormones declines your hormone productions, which is over to your adrenal glands.

A voila, you are in menopause at that point. So some of the symptoms that happened with the natural decline in hormones and I should say progesterone really declines first and estrogen can really peak and spike, which is why a lot of doctors don't like to test, but trust me, it's really important to test regardless. So you can experience sleep options are kind of the first signs like the first two weeks or the last two weeks before your period when you're like, I'm not sleeping as deeply. It's not as restful, It can feel like that, but every night you can get hot flashes, you're just feeling really hot at night, having a hard time regulating your temperature, you can absolutely get what I call men your age where you just things just really irritate and inflame, you emotionally. You feel extremely moody or irritable, You can feel breast tenderness, vaginal dryness because the decline in estrogen can lead to atrophy of the vaginal walls, um can experience some weight game lots of sugar cravings, depression and anxiety. Those are a lot of the main symptoms and of course, some of you will go through really heavy, heavy periods because your estrogen is running around unopposed while your progesterone declines. Other women, they just, their periods get really scant and light and they're skipping periods a lot and just missing them.

So all of those symptoms can appear and if you don't know what to expect, you can, you know, we're trained as women often to to dismiss it or write it off, like, well, you're just busy. Well, you've just been really stressed and we are at this time in life where many of us have, you know, kids at home, a lot of them, teenagers ish. And then we have aging parents in between and our careers are simultaneously like taking off after all these years.

So we think, oh, I've just been taking on too much. I'm just too stressed. That may be true in and of itself, but that doesn't mean that your body isn't physically starting to exhibit these symptoms as well.

– And so when you work with women to help educate them and inspire them and what I'm hearing you say, in essence is through the education, you're really giving it a bit about the testing side of things, like you mentioned a few tests already, how do, how does a woman, I always say that clarity creates confidence and confidence creates clarity.

So in this, you know, 10 plus year transition in our life. We may have no confidence and no clarity. And we're looking for information from experts like you are from different tests. So what are some of the tests that can be done to create a little bit of that clarity that can play into the confidence we have as women moving through this phase of our life. – Yes. So there's three types of tests that I run in practice. One is a comprehensive metabolic panel and this includes a full thyroid panel, not just your TSH, but your T three T four reverse teeth.

TSH. I look for thyroid antibodies. You know, you really want to make sure that your thyroid is functioning functioning optimally. Because a lot of women also get thyroid changes during menopause that they don't even know are happening.

And a TSH, that's your thyroid stimulating hormone. That one test is like 1/7 of the puzzle. So you really want to get all of that tested. I look at insulin and glucose fasting insulin and hemoglobin.

A1C to really look at uh you know how you are handling your insulin and your blood sugar because that can also disrupt your sleep um and your energy and your cravings.

I look at your inflammatory markers and your cardiac risk. I look for nutrients like vitamin D. And magnesium and zinc. So I run a really comprehensive panel of blood tests.

I also run the dutch test. That's a dried urine test for comprehensive hormones. This is an at home urine test. You take five urine samples over the course of about 15 hours.

That gives me a really clear window into how your hormones are being produced if they're being produced uh and how they get metabolized and detoxified through your liver. I also look at your cortisol curve.

I can look at your organic acids test and really look at your brain biochemistry. See if you're making serotonin and dopamine and melatonin. See if you have B vitamin deficiency. So all of these are really really important because I want to see a if you are a candidate for introducing some hormones and doing some early intervention but be making sure that your body can actually handle hormones.

If you do decide to introduce them into your um self care and your medical regime. And the third test I do is a G. I map this is a stool test again you can do it at home, it's going to look at your microbiome. So it's going to tell me the integrity of your gut wall. If you're absorbing nutrients.

If you have a leaky gut. If you are re absorbing estrogen into the gut wall. So most people don't realize there's a whole estrogen mediated subset of bacteria in your microbiome it's called the terrible um And so that is a good indicator. The quality of your Esther bowl.

Make sure that you are indeed eliminating estrogen out of your body. So everything that comes in should be excreted and pooped out. So having those three tests done really is like the gold standard before you go on any hormones and then you can also repeat it um after you started.

But it will give you a really clear window to see if you're a candidate for hormones, which hormones you could potentially mean how your body is going to respond to them.

And you really don't have to wait until menopause to start hormones. A strong advocate of starting early and doing early intervention because you will have the best quality of life and the least disruption throughout menopause.

– So how does how do you coach women and advise them on diet? Because one of the things that I feel as I'm in this um in this stage of my life as well is that it can really start to play with your mindset and you know and the sensuality and you know what I'm feeling in my body because like you said you know you can start to experience weight gain, you can start to have like sugar cravings that maybe you didn't have before. And so how do you how do you weave in new and I know as an integrative dietitian, you're not weaving in nutrition.

It is like you know the keystone roman arch. But can you give us a little bit of information around really the key of diet and how that can support support our mindset and how we're going through this stage of our life. – Yeah. So I have three.

I call them my meno laws, Esther's meno laws, for menopause. So, first of all, you want to really optimize your protein intake and the research more.

It's really like such an exciting time with research and dietary protein.

Testing for Hormones, Thyroid, and Gut Health

Because more and more research is coming out to say, not only do we need, you know, a decent amount of protein, like a gram per pound of your ideal body weight, but we we actually need more as we age, not less.

And I grew up hearing messages about, well, when you're older and you slow down, you need to eat a lot less calories. What's happening is there's rampant malnutrition in older adults. And I saw this when I worked in hospitals.

I mean, people would be in bed for three days and completely atrophy. They would need physical therapy. They lost so much muscle. The hospital food was so God awful and certainly not optimal in protein.

So we want to make sure that you're getting a gram per pound of your ideal body weight. If you're not good at calculating math like me, I will tell you try to get at least 30 to 40 g of protein in at a meal. This works out to about five ounces of protein at breakfast, lunch and dinner. Here's the other cool thing is that the research shows that you need a minimum protein threshold of 30 to 40 g per meal at breakfast, lunch and dinner. You're better off having an even distribution of protein throughout the day versus the typical woman.

I see us having a bowl of cereal for breakfast or maybe one egg or avocado toast or bowl of oats. And then lunch. It's like a little, you know, can a small can of tuna fish.

And then dinner is like, you know, a steak or a piece of chicken. We really need to have, you know, an omelet with some turkey or ham in the morning, or a big smoothie with two scoops of protein powder for breakfast, lunch again can be, you know, chicken, fish, meat over a salad and dinner can also be protein and vegetables and and a starch. So, so that's my meno law.

Number one. Number two is I recommend that everyone just for three days, right? Just keep a food log on any app like my fitness pal or chronometer. Just keep write down what you're eating.

Make sure that your protein ratios are higher than your carbs. So, let's say, you're, you know, 140 pounds you're like, all right. And that's your ideal body weight and you're like, I need 140 g of protein.

I'm I should have at least, you know, 100-120 g of carbs. but I certainly don't need that really high level. So it works out to, you know, a cup of fruit at breakfast, big, big gas salad at lunch and then dinner, have a starch at dinner, a cup of some sweet potato or white potato or winter squash or quinoa, something nutrient dense. And you may be thinking, why would I be told to eat carbs at night? Which is my mental law number three.

That is to really help sleep because when you have carbs at night and you get a little bit of an insulin bump, you won't get as much as if you have like a big bowl of pasta because you're gonna be pairing your carbs with protein and fiber for vegetables.

But when you're getting a little insulin bump from those carbs, it's going to tamp down your cortisol. And during menopause, cortisol is often unleashed very high at night. We have all sorts of blood sugar imbalances going on with the decline in hormones.

So, getting those carbs at night will ultimately help you fall asleep and stay asleep. So that's, and I have seen again, time and time again people come to me very high carb, very low protein and when we flip the ratios or when we reverse them and get higher protein, moderate carb. That is when the magic happens with maintaining your bike composition or losing the weight you gained during perimenopause, it's phenomenal.

– So I love your three laws. I think they make such good sense and I bet for many people they flip the script on some of what we've come to believe just with with this car by think carbs are like a swear word for so many of us would have right stayed away from them for probably decades. And so I mean, first of all, thank you for giving, I think giving us permission to look differently at what we're putting in our bodies so that we can fuel these, you know, these processes that we need. I mean, you think about, you know, three or four really unsettled night's sleep.

How are we feeling at the end of that? And you know, that does impact body mind and spirit. So, thank you for that. Now, I want to ask um can you touch on hydration a little bit?

– Sure. I will tell you, most people are running around pretty dehydrated. We're not drinking enough water during

the day and we drink plenty of coffee or alcohol, which are both very dehydrating.

And here's the cool thing is that most people don't realize that sweat. It's not just water. Sweat is actually electrolytes. It's sodium, you're losing potassium through your skin as well.

So I recommend hydrating a couple of ways a I mean, you can certainly do just straight up water. But if you find you're just peeing all the time. Like it's going right through you, add some electrolytes in there, add some you know, there's wonderful electrolyte powders on the market um with a nice amount of sodium and potassium. And some have a little calcium and magnesium.

You could even add straight, you know, a couple of grinds of some pink Himalayan sea salt and some lemon. It tastes like a margarita but without the booze. And that's another great way to really get some sodium in the cells. And some people say I I'm worried about my blood pressure. Only about 10% of people are truly sodium sensitive. And again the amount that's in there is is really minimal, but hydration um is definitely important because when we're dehydrated we can raise our cortisol levels. We can also sleep more poorly.

Have less energy, have brain fog uh And we can also feel artificially hungry when we're not actually hungry. We're actually thirsty. So getting your your fluid in is really key. Your urine should be clear or pale yellow if you're taking a lot of B vitamins. So, – You know what I noticed in my own body which sometimes feels and seems counterintuitive.

Nutrition and Hydration Strategies for Menopause

I and yes, you know, looking for clear and I know there's signs, but for me I can tell when I haven't had enough water because I'll actually get a little puffy and like bloody right in in my, you know, right through my belly area and as soon as I consistently start hydrating again that unless I'm, unless I'm like in, in my ovulation days, that really kind of Brexit itself.

So I'm glad that you touched on that the electoral piece and the Himalayan sea salt because when you think about even, you know nights, it's like you're losing a lot of water in that process. – That is such a brilliant point.

Yes, absolutely. And it really, it makes a huge difference and most of us just aren't getting the fluids that we need during the day at all. – Can you, I want to look back, I don't want to be like a broken record, but I want to look back to the whole mindset piece and you mentioned, in our interview, the… did you call it menopausal rage? Is that what you call? – Yeah.

– Right. And so I am the mom of three boys, right? And my husband, I'm surrounded by these men in my life. And how do you or what do you recommend or how do you coach your clients that you're working with their art times where I feel like I have to just really try and down like downplay it pretend I'm not feeling like I might get. I got, well yesterday I got an email and normally an email like I got yesterday would just like slide off my back like water on a duck, right? But for it just, and I like went into this little tirade and I looked over at my husband and he was just like, like these big guys just like not saying anything but just receiving and I was like, oh, how do we, should I be feeling apologetic for moments like that.

How do I make sure that I'm allowing myself to feel all the feels yet not scare my family or like, you know, you, you must have a way that you coach your women through this. – Oh yeah, So am I allowed to curse on this or no.

Yeah. So I, one of my friends is a jeweler and I had her make me a bracelet that says fucker on it because that's pretty much one of my favorite work and I regularly shaking up my son, like my son saw it, he goes, wow mom, that's, that's like kind of offensive.

I was like, well it's exactly how I feel we are. This is to me the greatest gift of menopause. You know, people are afraid because there are a lot of symptoms like, oh my God, it's downside. And I'm not fertile anymore.

Let's talk about like the upsides of menopause. First of all, there is no greater time, more and more powerful time

than a woman who's really confident in themselves and we need to teach our Children either be leaders for our daughters or teach our sons that a powerful woman is incredibly important to have in the world can be really sexy and um really attractive, you know, societally we're conditioned as women to make ourselves smaller b less heard in the world.

But you know, I regularly, I mean, Covid broke me and I said to my son, like, thank God you're older, I no longer have to pretend I don't swear anymore.

And he said, you know what mom? I said, I don't, I don't know if I'm being a bad example. He said, you know what, it actually makes you so much more relatable, right? And now he's kind of like, oh, he's probably sorry. He said that I'll be like, put your schedule and your fucking phone, but I think we have to, we should express ourselves. We should not have to hide and cover up our feeling and not to the detriment of hurting someone and not to the detriment of, you know, being really offensive. We do have to know our audience.

That's the first rule in comedy, right? But but at the same time, not pretending things are okay when they're not, just being real straight up and be like, you know what, I'm having a really crap tastic day, It's not you, I'm processing some things right now and I'm gonna put myself in a little time out right now and just letting people know around you what to expect or just letting them know how you genuinely feel rather than guessing because if we don't show our family members how we're feeling then if Lord forbid we do express it, they're gonna be shocked and they'll be like, where did this come from? And they're not prepared versus educating them.

They're like, you know what? My sleep is really poor right now. This is not a day you want to mess with me or, you know, just not feeling myself right now. And we do, we need to educate our spouses, we need to educate our on menopause quite frankly.

And you don't necessarily need to educate your kids a ton. But my, my son definitely, you know, he calls me the vagina doctor. He said his friends all do, He's like, are you gonna talk about, he'll see my books. He's like, are you gonna talk about vaginas again? I'm like, probably. Yeah.

So, you know, just starting to help normalize the process of menopause and saying no. So that you're really, I don't know too many women who have a problem doing this at this point in life, I don't know how you feel about john, but like, just say no.

When you really don't want to do something, you don't want to go to a party. You don't want to see people. I mean, I feel like Covid really gave us permission to say no. It was like every introverts dream.

But I think just like really saying, you know what? It's not gonna work for me. One of my favorite books that talks about this is a year of yes by Shonda Rhimes, but she has a big chunk in there about saying no, and like setting boundaries and it's it's important because if we don't, they will get sick our throat chakra houses are thyroid.

So I see a lot of autoimmune thyroid condition from women who have suffered with trauma or just held in their truth and not spoken, um, and be we'll just be really resentful of ourselves, and every time we say yes to something, we are saying no to something else.

So, really pausing and believe me, I grew up a people pleaser, my mother's hardcore diet, people please our and, you know, you get to the age where you're like, I actually, I'm gonna be really pissed and unhappy if I go to this thing, I don't want to do it, so I'm gonna say no, thank you, I really appreciate it.

And those I think are really important mindset shifts that do need to happen in menopause is reclaiming your power by being very conscious about what you say yes to and how you interact with people and how you express yourself.

– So, like that, that was beautifully packaged. And so I have two more questions for you in your area of expertise. What do you think is not being talked about enough? – Well, first of all, menopause care, obviously. And I think, you know, are it's very interesting as we record this, you know, in the States, we're coming up on elections soon,

and, you know, I don't think women are, we're going very backwards with rights to our own bodies.

And the fact that our rights are being revoked so regularly. And it's so interesting to me, I mean, most women do not agree with the laws that are being made and limitations being put on our own bodies.

So I think the whole subject of women's health care as a whole is is really not talked about enough, it's not taught in medical school. Not enough. Clinical research studies are being done on women because it is harder to design research studies on women who have a monthly cycle. So it's kind of calling into question, you know, um, the limiting factors around women and medicine, medical knowledge for women research and women. And I think it's not talked about enough with practitioners of that. They're not listening to their Patients.

And I do believe doctors go into medicine to want to, he'll take care of people. I believe our insurance model sets it up so they have no more of them 15 minutes with with their own patients where I can spend 90 minutes with mine or 30 minutes with mine. So I think if we could all just pause and listen to our women, like that's how we change the world is by listening.

Menopausal Rage, Boundaries, and Self-Advocacy

So that's something that I think absolutely needs a lot more work when it comes to medicine because we've all been gas lit by doctors, all of us. I mean I remember when I was at the height of my insomnia, I didn't know that I had Lyme disease or mold toxicity.

Um but the doctor told me to, he gave me a copy of the Kabbalah and put it and said put this under your pillow and here's a prescription for Xanax. So it's like one of the more egregious uh conversations, but you know, it can really be traumatic to be gas lit and not heard or listened to.

So I think if we can start doing more of that and start saying no, I actually need you to hear what I'm saying, I'm telling you this, I really need you to listen. You know, I think that that's how we'll start to shift that. – So Esther you've given us over the last you know, almost 40 minutes, that's such a great framework for understanding our bodies. I mean we've touched on the different testing, we've touched on the changes in a woman's body. You've touched on some of the mindset shifts that I think are sometimes overlooked.

And so what, you know, I want to get into your head a little bit in this last question and I want to know what are some of the mindset habits hacks or tips that you use in your own life and I would love to have you share them with our audience. – I am so proud of the fact that I have now gone 15 months through great meditation meditating every night.

My doctor who was treating me for Lyme and mold, his name's tom Moorcroft, he is brilliant and he was teaching a meditation course and I was really curious.

I was like, gosh, you know, it's something I always wanted to do. But you know, we always tell ourselves what I hear also from my own clients as well.

I really suck at meditation. I don't know how to do it. I'm not good at it. There's nothing you actually have to be good at if you know how to breathe, you know how to meditate and it's, it's a returning to your breath. And it calms down your nervous system and re wires your brain and it only takes about 56 days to do this, it's less than two months. But for me, the most powerful thing that he taught me was not the right herbs or nutrients to take to kill off the mold and line or the medications to take it was meditation and he said, what you need to do, what you need to start doing is actually envisioning your body already healed with this already behind you so that your, your brain knows where it's going to go or where it wants to go and your body will eventually catch up and that's exactly what happened.

So when I was really sick, you know my cortisol curve was flatlined and I kept saying I can't work out anymore, I'm just crashing, I could walk but I lost the ability to lift weights, I lost the ability to even run you know a quarter mile like my body would just crash.

I would have to sleep for two days. I mean it was awful. So I envision myself lean and strong and lifting weights and within eight months and I started with just Pilates which I shouldn't say just Pilates because let me tell you those workouts alone kicked my ass but Pilates but using body weight after eight months I was able to actually start lifting weights and not crash.

And I got my cortisol curve back which is so freaking cool to me. But the meditation peace has not only changed my physical health but I have scaled my business. I burst a book.

I mean that book poured out of me in eight months while I was working full time, I was writing a book. It gave me I got my my cognitive function back from clearing out the Lyme and mold. So the problem isn't that we're not dreaming, it's that we're not dreaming big enough and that we need to go bigger with our dreams and we need to commit to visualizing those dreams every single day.

It is that to me is what meditation is is going bigger and bigger and bigger with your life and asking yourself what is possible like access consciousness, right, what else is possible and really pushing beyond your wildest imagination.

So to me that has been the mindset piece of healing was the most important thing. There's a great documentary, if you're seeing the documentary Heal? – Yes I have, Amazing.

– Amazing. And they talk about the top 10 or 11 healing modalities in the world and of those, the top one or two in the pecking order are always mindset because you can, you and I were talking about it so you can take all the vitamins in the world, you can eat all the organic foods and if you're miserable all the time or you're creating misery, you're choosing misery every day. Then you're not gonna heal or get better yourselves. No, you're not happy.

So I'm not saying that, you know, everything is unicorns and rainbows in life. Of course we all have challenges, some physical, some emotional, some traumas, but there's always a way through and there's always a choice to see how we're gonna choose to handle a situation or view or perceive a situation who we surround ourselves with the choices to invest in ourselves or our businesses, you know, and grow. So and who you surround yourself with is really a big piece of that too. So yeah, so I chose to surround myself with someone who had healed himself and did it through a lot of mindset work first. That's how Tom started healing too with just doing ashtanga yoga saying wow and really starting to pay attention to how his body felt and how he felt in his body. So that to me is a foundational piece that I teach in my practice too is the meditation and the mindset because yes, I mean and I'm even careful of who I screen who I allow into my practice because I can tell if someone's not committed to really being open to change and receptive to healing, then it never nobody can convince you that you've got to really want it for yourself and believe it's possible. – So thank you for mentioning mentioning Dr. Tom Moorcroft.

Mindset, Meditation, and Healing Through Visualization

He's actually a part of this of this summit as well. So he's going to be you know, gracing us with his with his knowledge as well. And I think you make a very good point in the way that you explained your 15 month, you know, celebration of your meditation practice because it doesn't have to be you know, the roaming or the chanting or you know what we might think we sometimes I think we hear the word meditation and whatever we've seen on a movie or in a and we just think, well no, and we so quickly self select out and I just want to share a quick story. I had a client who we were just moving her body.

We were, you know using Pilates based movement to move her and doing some fashion release and she was, you know using her coach ball. And she was starting to feel better and she just said, I just want to meditate, I just wish I could meditate.

And so I said to her, what is your favorite time of the day? And it was just before the holidays and so she said right now, my favorite time of the day is sitting in the dark with the lights of you know, my decorations on in my house and drinking my coffee, feeling the warmth of my coffee mug, smelling the aroma of the coffee beans. And she said it really is when I'm the most peaceful and I said to her, do you think that could be a way that you're meditating?

And she just like her jaw fell on the floor because it kind of busted, you know, the beliefs of meditation has to be, you know, with your thumb and index finger together or what you know, whatever we and so I want to thank you for helping you know, just redefine that it is connecting to the breath, the amazing neural plasticity of the brain, like 56 days, what you basically said to us was the choices that your current self is making in 56 days are gonna change who your future self is.

And so I love the way that you frame that for us. This has been absolutely amazing Esther now if if someone wants to get a hold of you or learn more about what you do, you know you mentioned, see you later ovulating how can they find you in this World Wide Web? – Yes, so two places, number one please go to Estherblum.com/menopause, that will, will lead you through many gifts and you'll be able to find my book there and actually score a ticket to my V. I. P. Ticket to my virtual event.

This is a $500 value, but it's completely free to you. And then second, my other hangout spot is on Instagram.

Where to Find Esther Blum and Closing Remarks

I am @gorgeousEsther and there's a lot of men who love their and a really, really great community of women who just are curious and want to empower themselves through menopause and just honestly get the straight dope on what to do with their hormones.

– So good, So, so, so good. You are a gift to women really of all ages because I feel like we are the glue that holds our families and our communities and our workplaces together. So you're not only impacting the beating heart of the women, you're connecting with your, you know, permeating out to impact um exponentially more people than that. So thank you for who you are, what you do and for being here with us today on the medicine of mindset summit.

– It's been a privilege and an honor. So thank you for hosting me, Jana. – You're welcome. We'll see you everybody on the next session.