Introduction and guest background

Everyone. Dr. Tom Moorcroft here, and I'm back with you with this episode of The Healing from Lyme Disease Summit, and this is a really special interview for me.

I'm here with my near dear friend Ritamarie Loscalzo. And when I go back to the time where I was like in Lyme and I was going, oh my gosh, this is like so big and so many people are suffering and I'm on this planet to make the leap to the next level to really get all this information out.

Ritamarie was the person who was there standing behind me, in front of me and on side of me saying, Tom, you can do this. You have a message that has to get out.

And one of the reasons I train practitioners, one of the reasons we are doing this Lyme summit is actually Dr. Ritamarie Loscalzo. So she is a doctor of chiropractic.

She has a gazillion certifications which may or may not need to get into, but she's the founder of the Institute of Nutritional Endocrinology. And the thing that's really cool about this is Ritamarie is like in all this information that's out there and brought boil the down into a way that we can kind of transform our current, you know, broken disease focus model into a system where we can really, really bring out that self-healing mechanism organism deep within us and look for true healing.

And it's done through food. It's done through things you can do at home. And today, we're going to talk about insulin resistance as an underlying cause of immune system dysfunction.

And you're going to learn all about it. And then, you know, we're going to get some tips on things that you can actually start doing at home right away to help improve your health, decrease inflammation and improve immune function so you can heal from Lyme.

So, Dr. Ritamarie, thank you so much for being here and thank you for being such an inspiration and a support for myself and our mission. Well, thank you.

I love your intro. Thank you so much for the lovely intro as well. Really good. So I'm here to support and like you on a mission to really help people heal and to overcome some of the stuff that they're learning.

Let's just say from Western medicine and also from the food companies and, you know, the stuff that they've been brainwashed to believe that you have to rely on some sort of drug, some sort of surgery, some sort of something out there when really what we have to do is help our own bodies, you know, get back in touch with the immune system because life, the way it is right now is just taking us so far away from having a good immune system.

It really is. And I just think about it. So many people in the line where they're like, what's the best supplement for brain detoxification, for sleep, for immune function?

And I just love how like and know I see your book in the background, you know, Unstoppable Health. And it's like you always talk about going back to the root cause and starting inside.

So really, you know, if we dove right into insulin resistance because that's kind of like your niche in the whole world, what is it and why? Why would we even be talking about that in a life summit and how does it relate to immune system dysfunction?

Yeah, so insulin resistance is when the cells stop being able to accept a signal from insulin which says, hey, open up. I got some, I got some fuel for you, like, oh, okay, they don't do that anymore because the cells have been

number one cell bombarded by insulin and so bombarded by sugar.

They're like, no more, no more, no more. But also because of so many lifestyle choices and so many things in our environment, this they become damaged.

Those receptors become damaged by the hydrogenated oils and the Crisco. And, you know, the things that people think are okay to consume that damaged them by stress by all the stuff that it causes them to become damaged.

And we can't get the insulin. And so what happens or we can't get the sugar in. What happens is we sit there with high blood sugar and we have high insulin in the cells or in the blood.

And people are like, well, that's not a problem. We have high insulin as long as the sugar gets into the cells. Wrong, wrong, wrong. It's totally a problem. Right.

And we need to keep the insulin in a tight range. We need to keep the blood sugar in a tight range so that the cells can detoxify and do their function.

Can't do it when we can't get the sugar and the fuel in there. But also the damage to those cell memories doesn't don't allow the toxins to come out. And so it's a problem that is widespread in our in our world.

What insulin resistance is and why it matters

It's very widespread. And I believe it's the underlying cause of almost every disease out there. Right. If we really trace it back, if we don't get the insulin under control, we don't reverse the insulin resistance.

You can't heal from heart disease. The blood pressure is going to be high. All kinds of things like immune dysfunction. Right. We've been dealing with immune dysfunction for a long time, the last few years.

And people are like, oh, just eat this and just don't do that and just take this drug. It doesn't work that way. So it doesn't. It really doesn't. So you have to understand how your body works.

If you're a practitioner, you have to understand how your patients and clients bodies are working so that you can give good advice, sound advice. And yeah, medicines are useful sometimes, you know that.

But not as the first line of defense. Well, right. And you know, it's interesting, because I just heard you say something that I really think we should dove into is you need to get sugar into the cells.

And so there's this misnomer that sugar is bad for you and that you can actually live without sugar or you should try to not have any sugar. And I know we'll dove into diet itself a bit at some point here, but what?

Why do we need some sugar to detoxify? And what is sort of this role in health and healing? So glucose we're talking glucose. We're not talking sucrose, we're not talking refined table sugar, we're not talking high fructose corn sirup or all the other kinds of sugars that are in the processed foods that most people are consuming multiple times a day. We're talking glucose.

And guess what? Everything you eat gets broken down to glucose. You eat broccoli, it gets broken down. And there's glucose that enters the bloodstream.

You eat lettuce, you know, not as much maybe, but there are things that get broken down and they create fuel for the body. Right. And the fuel is what drives the mitochondria need glucose.

Mitochondria, which is our powerhouses in every cell that make energy, can't do it, can't make energy without glucose. So it's fuel. But we're not, like I said, talking about the stuff that most people are eating all day long.

Right? Yeah, I think it's important because in in the wine world, people are like, oh, minimize those simple process

sugars because they might feed lyme.

I don't know that that's actually accurate, but certainly we know that it suppresses immune function and it certainly will drive up inflammation. And you know what? What is the rule?

How does things like do things like glucose and insulin lead to things like inflammation and subsequently kind of like tissue breakdown and stuff of that nature? Absolutely.

So glue and insulin is inflammatory. We know that. We know that we have high levels of C-reactive protein, which is an inflammatory marker that's commonly measured in the blood that goes up when we have high levels of insulin in the blood.

Right. Sugars. What is sugars? Do they damage? They cause glycation of cells. So we have when we have excess sugar in the blood because the insulin can't get it into the cells, we have the risk of of retinopathy.

Right. That the high is the retinas of the eyes are going to be damaged. Neuropathy, right. The feet, the hands, the nerves that supply them, they get inflamed and then they can't work properly.

And kidney problems nephropathy is the technical name for that. We have these things and I call them the bad side effects of excess sugar in the blood blindness, amputation and dialysis.

Nobody wants those three things, right? None of the. Things that happen when you leave this unchecked. So it's really important. And you said just a bit ago, you said how it affects the immune system, right?

How excess sugar in the blood excess insulin affects the immune system. So when we have all that extra sugar in the blood and there's debates as to what the ideal amount is, but I think it's much more conservative and lower than what medicine allows it to be.

You know, you probably learned in medical school that, oh, as long as the person has their two hour postprandial, meaning after eating glucose of 140 or less, then they're in good shape.

That's what they teach. You may forget because it's been so long, that's what they're still teaching. Teaching, right? 140. That's one retinopathy. There's studies that show this retinopathy and and neuropathies.

They start at those levels, right? They start actually at 120 and guess what, 2 hours after you eat your blood sugar, if you're functioning properly, should be back down to whatever it was before you started eating.

What's interesting, have you noticed? I mean, obviously you've noticed, but like as people have gotten less healthy as we we as a society, I've noticed that the glucose range has gone up like the low.

Like I mean, I get people who have a 60 or a 59 fasting glucose and they're like they're saying, no bad, it's too low. And everybody go, Oh my God, I got to get it higher.

I'm like, No, that's because we're changing the range because people are less healthy. I mean, if we talk, yeah. So if we talk like fasting glucose, I mean, is what I was taught 60 to 100, which I think is ridiculous, but where should we be?

Look at if we actually want to have good health. 60 can be good. It depends on what the person's eating. If the person's eating Twinkies and their glucose is 60 in the morning, it's not what you'd expect.

Right. So we have to look at what else is happening throughout the day. What's the postprandial, what's the peak that that the glucose goes to? Somebody can be at 60 in the morning and be hypoglycemic, right?

Somebody can be 60 in the morning. I strive to be 60 in the morning. Right. And be totally healthy. 65, actually, 65 to 70 is my favorite for me personally.

And that's where I feel the best, where should it be?

Glucose, inflammation, and immune dysfunction

I think, you know, somewhere in the low eighties, I don't think it should go above 85 fasting glucose because once it does, once it goes over 90, there are studies that show that there's four times the risk of cardiovascular disease once your fasting glucose goes above 90, not once, but consistently, and they say 100 over 100 is called insulin resistance.

So 99, you're okay. You're perfectly fine. That's the fallacy of the kind of medicine that doesn't look at function. It just looks at right there. You started getting sick, you started getting diabetes.

When you're hit your blood sugar, fasting got to 120. No, you started getting diabetes long before that. Long, long before that. Which is why I don't think fasting glucose is a good measure.

I think yeah, we want to know it, but you want to know what is your postprandial after eating? What happens after you eat a meal? Right. And you can see that reflected in a blood marker called hemoglobin A1 C, but also insulin.

Where's your insulin? If somebody has a fasting insulin at 60, they're in big trouble. Even if they're glucose. My God. They're in big trouble. And I've seen it. I've seen studies.

So you all this person had a 60 their range in the on the medical test is like I think it's like 2 to 20. It should be 2 to 5 at the most once you go right that insulin to fat storage hormone insulin inflammatory hormone insulin damages the blood vessel linings it makes them stiffer and not able to react when you run through the bus.

Great. There's so many problems with elevated insulin that medicine is just not acknowledging. It's kind of crazy. And I mean, certainly some of us in the functional medicine world are starting to look at this.

You've you've mentioned. Well, I want to point out one thing a lot of us talk about, like cardiovascular disease and insulin and sugar. Right. And then like the Lyme folks are like, well, if lyme affected my heart, okay.

But a lot of us are also worried about like cardiovascular disease doesn't. It's cardio is the heart vascular, the rest of all the blood vessels, everybody's looking at circulation.

Everybody's looking at their eyes or looking at their brain for the detoxification. Maybe they're rain, Audie, and they've got the cold fingers and toes and such.

These are the small cardiovascular vascular vessels that we're talking about here, guys. So remember if your heart the reason what we're concerned about your heart isn't the big ventricle in terms of like, you know, the vessels getting it getting clogged up.

It's the micro things, the same things that Lyme and co-infections might be affecting. They're in other places. And I think it's important to to point out, because I'm always trying to bring this back to Ritamarie, like I want to bring it in front of everyone.

Why all of this? All this stuff that you can work on, on your own, at home and take control of is so important because you mentioned neuropathy. You know, nephropathy and retinopathy.

And so whether I've got numbness and tingling in extremities or some of us in our faces, whether I've got weird kidney stuff, I might even just have frequent urination, which is kind of a common thing or I mean, retinopathy, this is stuff Bartonella can cause.

Lyme can cause. And I want you to understand that if you start at a stronger baseline, maybe these things aren't going to happen or if you want to heal them.

So I just really want to thank you for pointing that out. I just want to wrap that in sort of for the the infection folks out there of how we need to know this.

You mentioned monitoring of this and we could do an A1 C, we could do it fasting, insulin. What is your preferred way to do it? And are there any other ways that you might be doing this other than just getting a fasting glucose on a metabolic panel?

Absolutely. I think measuring postprandial glucose, I'll keep saying that word until everybody has it memorized. What measuring the glucose after your meals.

Measure the glucose after your exercise, after you get stressed out and start, you know, doing road rage on the road that all is going to affect your glucose.

So I like to have people either get a little meter 15 bucks at Walmart. I mean, it's very common to be able to get that and start testing what is your glucose happens?

What's happening after you eat broccoli? What happens after you eat pasta? What happens after you eat Christmas cookies? Right. What happens right when you eat these things?

Yeah, yeah. There's a what's happening? You know what I mean? So we have to measure that. And you can do that with this little simple device. It's about $15.

There's strips that you have to buy, but you can get them where they cost, like 100 of them for 15, $20. So it's not super expensive compared to the cost of getting line treatment.

Oh, my gosh. The all the things that they may have to do. So it's really important. But the other way is what's called a continuous glucose meter. And more and more of the people I work with are choosing that even though it's a more expensive option because you don't have to be poking your finger and then you go, Oh, I missed, I missed the peak.

It's now coming down again. I missed that, you know, 30 to 45 minutes, which is usual, sometimes a little longer, sometimes a little shorter. I missed it.

Oh, my God. You know, I had to go to the next meal and start poking my finger all day. Not to say you can't do it. I mean, 12 years ago, when I had my first online Glucose Insulin Resistance program, that's what we did.

That's we didn't have a choice of doing anything else. And we got great results. I mean, people literally reverse diabetes in like 2 to 4 weeks. I reversed it like 220 as their fasting glucose down to 85 as their fasting glucose.

Right. And other things, autoimmune disease, which is inflammatory, just like we have with Lyme and other infections. And so they turn this stuff around quickly and it's work, right?

Everything is work right. If you want to be healthy, you have to do the work. You can't just sit back and listen to these YouTube videos that tell you, don't worry about it.

You don't want to restrict yourself. Just eat whatever you want. Just take this fancy supplement from the Amazon, right? It doesn't work that way. It just doesn't work that way.

So we need to really look at the work that we have to do. Right. I know you're dedicated. You you exercise, you meditate, you eat. Well, I do the same because it's so worth it.

Right. And then if I were to be bitten by a tick, I mean, I have a mild reaction, I believe, versus a really severe reaction because I'm starting with a higher baseline of immune system.

How, if you're your baseline is way down here, you can't even see it anymore. But so low you can't see it. You can't

see my hand. And instead of up here, you're going to react to anything better, whether it's it's an infection like a viral infection, a tick bite, you know, whatever it might be, fungus, etc..

You're going to have a much better starting point if your immune system stronger. So one of the things that it's interesting because I always tell people to become the world's worst viral host, you know, referring to the the recent pandemic.

How to test blood sugar and insulin

But it's like, yeah, like Lyme like be at the top of your game before you get it. And if you get it, don't worry about where you were when you started.

Just get as high as you can now. But, but it's kind of interesting because I think that a lot of people one of the things I was thinking about, I hear a lot about like with the keto movement and and paleo and all this kind of stuff people talk about like fat adaptation and, and metabolic resilience and flexibility.

If, if I'm working kind of hard and then something comes up and there's a birthday or a holiday or something, or I just kind of give in and I've got my, I don't know, my cookie or my, you know, my OJ or my soda or something.

And I trash brains. Like, what does that do? And I mean, can I get to a point where I have some flexibility or do I need to kind of be really super tight all the time?

It's a great question and I get that all the time. And I would say the answer is, like I say to everything, it depends, right? It depends on where you're starting from.

It depends on your genetics. It depends on whether, like me, you ate Eminem's and Kool aid the first 25 years of your life. Right? How right and how much resilience you have and how much flexibility, how long you ate that poor diet compared to starting on a healthier diet.

So, you know, it's like, why bother putting stuff that's really bad for you? Would you want to go out to a party and everybody's doing cocaine and grab the cocaine and do that?

You know what I mean? It's like if everybody's drinking motor oil because they said it's the latest and the greatest, are you going to do that? Right.

I don't want to put things in my body that are bad. Now, going back to the resilience question, right. So if you have a really high baseline and you don't have all these genetic factors, it's not going to be a big deal.

And if it happens once, what's the big deal? Right. But here's what happens when people who have, you know, insulin resistance go and eat the cookie. It's never one cookie.

It's never one glass of OJ, it's never one. Because what happens is when the insulin levels rise, the appetite gets out of control and we want more and we want more and we want more.

So it's better not to. If you do it, you get right back on the wagon. But that's the hard part, right? You get right back on the wagon, you can take some herbs and you can eat certain foods.

I have a whole chart of like, I don't know, it's like seven or eight pages of different foods, like real foods. I'm not talking like expensive herbs, I'm talking real foods.

And how they impact or influence in a positive way, the resistance to insulin. And when you do that, my talking mushroom is one of my favorites. You can take my talking mushroom, which is really an right and it can help you regulate your blood sugar.

So if you go to the party and yet eat really badly, go home and have somebody talk to you. Mushroom, whether it's

a tincture or I dried because we don't always get them fresh, you know, depending on the time of year.

So I have some dried my talking mushrooms right then boil some water, put it in there, and only takes about 15, 20 minutes, you know, add some Ginger and Djuric and other things that are anti-inflammatory and you make this amazing soup and you drink it. Right.

Better yet, if you know you're going to a party make you did it, then sneak a roll. In and it's. Just like but it's not an excuse for making bad choices.

Right? So but there are things you can do to help. But if you do it consistently, nothing's going to really help. You've got to change the diet. You've got to change the lifestyle.

So I want to spend a little time talking about the kinds of foods that really are best for people, not just like, you know, your late night hangover helper type of thing.

Although it's sounds like I should have that soup every day, but before we dove into like those actual foods that people should be putting in their diet and maybe some they should be removing.

But I think everybody kind of already has gotten that so far. But there's this kind of I wonder if we could touch for a moment on reactive hypoglycemia.

It's a thing that we see a lot of because I see that we have not everybody with Lyme disease has type two diabetes and is obese. Some of these people are very active and they start with a fairly high baseline.

But there is this sort of subgroup of people who consistently get reactive hypoglycemia and then they're like they kind of have feel this like almost like they have pot, you know, the, the, the, the partial orthostatic tachycardia syndrome for anyone not familiar with the acronym, but they're getting dizzy and lightheaded.

They, they feel like they're going to pass out all the time and people, you know, so everybody, again, like, like the retinopathy, neuropathy and your kidneys shit in the bed.

A part of that could be sugar in your lifestyle and part of it could be your infection. So let's do take care of the things we can. So what's going on with reactive hypoglycemia and how can we kind of address it?

Usually nothing's 100% perfectly. It's because you're over your hyperinsulinemia you're producing too much insulin as a result of, you know, over time you're just like, okay, too much insulin, too much insulin, lots of starches, lots of flour products, lots of sugary things.

And so your body's producing so much insulin and it's oftentimes it comes before the resistance phase. So I would definitely test for insulin. It's a $35 test at any lab you can go to direct labs or your lab work or any of these direct access labs, pay 35 bucks and get the test right gassing insulin.

So if the body is producing too much, if if I see that somebody has a symptoms and we test their fasting insulin, it's not you know, it's not high. Then I also do a postprandial after eating.

You're going to get that word by the time we finish postprandial insulin. So I have them go and eat their highest glycemic. I don't have them go drink glucose sirup like those those tests that they do.

Like, wait, you're pregnant? Like when you're pregnant and stuff, it's like, Oh, what a great idea. Just shoot at the kid. You know, and all this stuff.

But you can do it. Like I'll say to somebody, what are the highest glycemic foods? Well, I'm really like, I don't know, pineapple or this or that or whatever it might be.

And I'll tell them, Go get your insulin tested, go out to your car, have your highest glycemic meal healthy, hopefully

if they've already changed their diet and then go back and have it tested again.

We want to see how it reacts. If it goes way up high, then most likely they're dealing with the reactive. Hypoglycemia is the hyper insulin. Most of the time you don't have to do the the postprandial.

Most of the time you'll see it in the fasting insulin. If only doctors would just start testing that on every person alive right? Right. Yes, no need.

But every person alive should have their baseline insulin tested and so their sugar goes up and their insulin goes whack and it says, Oh wow, we have a well-functioning pancreas because you're producing plenty of insulin and guess what?

It crashes down and then the hunger, the irritability, the crankiness and some of that lightheadedness and dizziness comes from the sugar crashing down.

And then our adrenals get the message. Emergency, emergency, emergency. Right. Produce a whole bunch of adrenaline and cortisol. And what does that do?

You know, adrenaline is like it revs up. And if you're not having to lift a car off, your child's right because your adrenaline's high, that's going to make you revved up.

So you'll see the heart palpitations and things like that. But I think it's interesting too, because we talked I feel like in this community we talk a lot about adrenal fatigue.

Reactive hypoglycemia and blood sugar crashes

And if I talked to a similar sort of, you know, cortisol and cortisol receptor conversation, people have this all day long, but that reactive hypoglycemia and the the actual impact and of insulin and how it works.

So I mean glucose doesn't even I mean the insulin's binding with the glucose and it goes through an insulin receptor, not a glucose receptor. So I was just thinking like as a kid, as you're talking about this, I used to get like really nasty, reactive hypoglycemia and they had no idea what was going on, but it was like we ate the flour, we ate the starch.

You know, I, I was an athlete, so like, my brothers need all the candy, but I just did like pasta affari and, you know, and it was like, boom. And it was like it was really painful.

And then I remember cleaning it up. I figured out some of the stuff. And then when I got Lyme, like, I have similar symptoms, I'm like, Well, is my diet crap or is it really from the linemen?

You know, for a lot of people I think it's both. But again, guys, you know, part of this, the whole core of why we're having this conversation in particular and we're doing the entire summit is not only to give you the best information out there to recover from Lyme and live your longest, healthiest, most amazing life, because you're all here to give this amazing gift to the planet.

And we want you to do that right? We don't want you to be 50 years from now going to shit. I wish I had actually done what I'm here to do. We want you to live your best life.

But what? Also, it's like you can actually take control of this and start to heal some of this stuff that a lot of people are like, Oh, the sugar feeds the lyme.

No, the sugar inflames your body and knocks down your immune system, which then hits it. So just like dark Darina Marie keeps talking to you about, you know, postprandial glucose, I'm going to keep saying that you have control over this.

And it's we're not we're you're feeding no one else and nothing else other than yourself. So be really cautious of what you put in your mouth. Not because of lyme.

Lyme? Lyme is the visitor that's now leaving. What you're doing is taking care of your entire system. And when you support your immune system and you balance out your insulin levels, you're also supporting your mental, physical, emotional and spiritual health at the same time. So that's my soapbox.

That's good. That's good. And I want to just throw in there. A lot of people say, well, how does how does sugar how does sugar and insulin affect the immune system?

And here's what happens. The red, white blood cells, which are your infection, fighting part of your body? It's part of your your cell, your blood. They require vitamin C to function optimally.

And when we have high blood sugar, in fact, some of the studies say the blood sugar goes above 120. We displace the vitamin C in those cells with glucose because we know that vitamin C and glucose are really similar.

If you look at chemically. Right, there's just a couple of molecules that shifted. That's why we can't make vitamin C because we can't convert glucose into vitamin C and other animals can.

So we have to look at what is happening in there. Well, we're displacing right above 120 that most people get that every day. Most people get that every day.

So they will problem with that. And we have we have an issue. And you said sugar doesn't feed line. No, it doesn't. Sugar doesn't feed it. Sugar depresses the body's ability to fight it.

And kill it and get rid of it. And so then we got what's the latest in the greatest antiviral? What's the latest in the greatest antibiotic? Now, what we need to do with those great antibiotics exist in you, but depending on how long you've had poor insulin, glucose control, poor diet, poor stress control, not enough sleep, all those things that's going to dictate how well your body can fight off whatever that pathogen comes in.

It's so key because there's so many misnomers out there and we're so close to the truth. And like you just clarified it. Right. And you know what? We find out at some point, a little extra magnesium might help.

A biofilm. Yeah, a little extra coke. You ten may help the bees. Sure, maybe sugar. Maybe. Maybe lyme has a sweet tooth too, but 99.9% of what we know right now is that it's your body.

Like our antibiotics. Do not even sterilize you. Your antibiotics, whether they're an herb or a prescription medicine, do not get rid of all the infection.

Ask any doctor you know what happens in a pneumonia. We bring down the level of infection until such time that your body can do it on its own. So when like in Murray, when you were saying like you got to get started at the highest level possible and then we were saying, hey, even if you're down here, let's just start working your way up.

Like at the beginning of this recent pandemic thing, if everybody just stopped worrying about fat shaming and they just said, Hey, look, high insulin is not a good thing.

Now you're trapped at home. Maybe now's the time that as as a world, as an entire globe learn about insulin and glucose, because then we've got the world's strongest anti-viral immune boosting system ever created.

Your body. Your body, right. We can't duplicate or replicate that with a drug that's synthesized in the lab. We just can't. And the sad part is that once pandemic started, people are home, they're sitting in front of the TV, eating Cheetos and drinking wine and gaining weight.

That is not going to protect you. And we found that the people who had the worst outcome, people who were insulin resistant, and because we're not measuring it properly to catch it early, those people who say, well, I was an

insulin resistance, I bet you are.

I call it pre insulin resistance. It's before that diagnosis can happen because your blood sugar and fasting is not above 100. So they go, Oh, you're A-1 C, they don't even test it unless you're diabetic and you're A1 C isn't above 5.7.

You should be five. Let me just tell you, it should be five. The fasting glucose should be 80. Low eighties or below, you know, and and again, if it's too low, we want to investigate to see why we need to look at those things.

And we didn't we didn't look at those things and people were getting worse and more susceptible. Well, what's interesting is so many of us who treat chronic Lyme disease and work like you work, we had a leg up.

Our patients did a lot better because we knew what to look at. And I'm used to like dealing with chronic infections and immune dysregulation from life as well as an infection on top of it.

And I'm used to using drugs as a support when the body needs the support, but I prefer it not to be the sole piece. So we had an opportunity, but we saw that we knew so much from treating chronic Lyme.

Foods that support insulin sensitivity

So now let's flip it on its head guys and let's look at it and say what we know now from COVID because we were able to help treat that our patients from what we learned from Lyme.

Now let's learn from COVID and say, Hey, look, this immune system hyperinsulinemia, you know, insulin resistance thing is real and it suppresses your immune system.

And now Dr. Ritamarie is helping us learn how to turn that around, because I remember reading really I was in a residency and we had a physician com an endocrinologist specializes in diabetes specialists and he came in and he blew my mind because it was a fire.

It was we had to go to we were required. It was great. We went to a residency where the residents lobbied to not have pharmaceutical reps come because they thought we were being bought off.

And so I was like, it was so good. But we were required as part of the not seeing them almost ever to go to at least five events per year because or somewhere around that number, but because they wanted us to know what it would be like when we were on our own so that we would have someone to talk to when we were experiencing this new thing who'd been through it before. So I thought that was kind of cool.

But we go to this dinner and this right and this endocrinologist is talking and he said something really interesting as most people diagnosed with diabetes have diabetes for a minimum of eight years before the diagnosis.

And our system is so broken, we just called it We don't want to call you. They didn't even want to call it pre-diabetes and they were calling it impaired fasting glucose.

And so what you just said to me was so just it really just reminded me that and struck me was that people have like impaired fasting insulin, which is probably more important than in favor of fasting glucose because impaired fasting glucose is because of the insulin and that the insulin is a place.

Is that all you providers listening today can start to look tomorrow and every patient can just ask, hey, you know what, my diet's not always the best.

Could you check my, my, my insulin for me? And whether they order it fasting or not go fasting. Yeah. So but if you go after your like two. Hours after a meal.

Orange juice, it's going to be way off the charts. Right. So that's it. You made important point there. And eight

years, 30 years, you start testing insulin, you start testing hemoglobin, a1c and you start testing postprandial and glucose.

You're going to catch people decades before the real thing happens because the fasting insulin, guess what, it's one of the last things. In fact, it could be the last thing to change in somebody with diabetes.

So you're going to go, why do I wait until they're diabetic before I tell them that they're diabetic? Why don't I do these other tests and tell them decades before that you're heading there?

Mm hmm. Well, how much power is it? Because it's like for me, like, I always tell people, if you're going to lose weight, lose a quarter to a pound a week.

Right? Because that means in a month, you know, be great. You lose 1 to £4 at the end of the year. Hey, guess what? That's 12 £48. And that's a lifestyle change.

And if we can hit this early and think about it, how many people listening, how many of you have had Lyme disease for more than three years? I would be willing to bet that there's a significant number of people that either are listening and or the people listening know all you guys know what I'm talking about.

You're like, Hey, I'm now my sixth doctor. I have this and that and that. And then everybody's just telling you, you know, you know, no simple sugars, get off the dairy, get off the glute and all this other stuff.

Like, why don't we get a little more scientific about it? And I always tell people to look at what they need. So if we do something like maybe a continuous glucose monitor or we're getting a fasting insulin or a postprandial glucose or insulin or whatever. Ritamarie and I and our numbers are off, or maybe we don't even have the opportunity to test and we just want to go gung ho with we're going to modify our insulin levels because we know it's healthy for us.

What are the best foods? I mean, because like I just said, like throw away everything that everybody thinks tastes good just now. So what should we really be eating?

You Should be eating things that taste good. Okay. And when you learn to make them in a way that is healthy, so lots of green leafy vegetables are good, sprouts are good seed vegetables are good mushrooms.

A lot of different kinds of mushrooms, not just the my talking, but other kinds of mushrooms and medicinal mushrooms, as well as culinary mushrooms, herbs like ginger and turmeric.

Carob. Carob is actually good for insulin receptors, right? There's a particular mechanism, various and sundry. I mean, a lot of herbs, basil and oregano and all these things that we know are good for immune support are also good for insulin support.

And I have like I don't know, I don't know if it's three pages or eight pages. I forget, but document that I put it together and has pictures of the herb and then it has a little description of why it's so good for insulin control.

So those are the things broccoli, cruciferous vegetables, those kind of things. Again, you go with your own tolerances. Some people have a lot of food allergies, but there's so many foods there that you just throw away the ones you can't do.

At least now because you're going to be healing your gut and then you're going to be able to tolerate those. Oh, huh? We're going to hit you guys. Okay.

So we have massage activation syndrome that you need to treat the mold before you treat the bartonella and then the bartonella before you treat the line.

But sometimes you got to treat the bartonella. And then whenever you treat any of those things, really, we always

go back to where we're healing leaky gut in some form or another.

So a lot of us are very sensitive here. We just heard another little real like a real pearl. We can start to heal leaky gut by bringing down our fasting or, you know, are our fasting insulin levels too?

Yeah, yeah, yeah. And I think that those are the two key that everybody if you're trying to treat anything, really getting the insulin glucose levels under control and got, you know, you have to have good microbiome and all that and high levels of glucose obviously are going to contribute to leaky gut.

So if you don't address those, you're just going to keep spinning your wheels and taking this food out and going to get more and more sensitive because you're not healing.

The real problem is those antigens getting into the bloodstream. Let's keep them from getting into the bloodstream. Yeah. And one other thing, you said, Ritamarie that I love you to touch on is that these things taste good because I know when you say broccoli and brussel sprouts and any kind of sprouts and some people, even ginger and turmeric, they're like, yuck. So I would agree with you wholeheartedly that when you eat these and you introduce them, basically they do taste really good.

But I remember in the beginning, not so much. So what's what's going on here and how can we overcome that? So yeah, taste buds. I mean, your tongue needs to be re acclimated, but what if you could use these foods in recipes to make things that resemble your favorites?

So I use I make a pizza crust with cauliflower, zucchini and cabbage sometimes and a bunch of herbs and spices and, you know, chia, whatever other things you tolerate.

And it makes this amazing crust that people go, Oh, that's cauliflower. I mean, you see it now. Cauliflower has been like the prime food for the last couple of years because it's being used in everything.

I saw Facebook post once that said, okay, cauliflower is being used for everything in its brother. What about Reese's Pieces? Peanut butter cups? I want to.

I went, okay, let me try. And so I made up. Oh, no way I did. I did it was instead of peanuts, because peanuts are high in aflatoxin and definitely they have one. You should not be eating them.

But I used pecans. I can use walnuts. I could have used anything else, but I chose to use pecans and I made the filling with pecans and cauliflower. And then the chocolate.

Chocolate is a good food for insulin resistance and restoring insulin sensitivity. And so I took raw cocoa powder and I added, I think some coconut coconut.

I even remember the exact recipe I making them up on my on the fly and fortunately somebody else writes it down for me because otherwise I forget it. But, you know, a coconut butter, not coconut oil.

So much. It was coconut butter which gave the chocolate this creaminess. And then I put them in these little molds and stuck in in the freezer and we had peanut butter cups.

So and people loved them. What? Yeah. So there's a lot of things like that. The other day I had this, I had I wake up in the middle of the night, sometimes I go, I could try that.

I was doing a class for, my community, and it was on holiday foods, celebration foods. And I have all these great recipes like gingerbread cookies and, you know, various and sundry things like that.

And I said, what if I fortified the cookies with vegetables? So I tried it and I'm very daring and I tried it in front of the community I didn't do it like on my own.

I no time to do it separately and then then introduce it to them. So we're going to put a little of this. I made the base recipe that I'd been making for years.

I split it. I took half of it here and I took the other half and I put cauliflower, zucchini and cabbage and put it all in a food processor and we blended it up.

I added some coconut so it would hold together. And then I formed them into beautiful cookies and I put them in the dehydrator and they came out as these beautiful cookies.

They look like Christmas cookies, right? I could decorate them with greenery and white frosting. And this all kinds of ways we can do it without any sugar.

And I used lotion and I think I use lotion mostly, but you could use lotion or cream. Those are non-greasy sweeteners that are actually real foods. And it really bothers me when I read about people say, oh, the artificial sweeteners and they stevia in with an artificial sweetener.

So I did a Instagram reel and I went out to my garden where I grow stevia and I said, people are saying this is an artificial sweetener.

Sweeteners, recipes, and changing taste buds

Sorry, guys, does this look like an artificial sweetener? It's growing out of my ground. It's green, it's beautiful, and it tastes sweet. So it's not an artificial sweetener.

There are ways that they process it to make it look like white sugar. That's probably not so good. But if you get either fresh stevia and you can grow it a pot in your house, you can grow it in your garden or you get the green, you know, the dehydrated, they dry it and they powder it.

So it's easy for you to use those both these sugar alternatives that actually support better glucose insulin regulation. It's really interesting, too, because stevia has been used for 1500 years as anti microbial.

And one of the things in our family, I don't really like the taste of stevia and Logan's good, but I realize why I tolerate that a little more. And it's because I learned from stevia, just like with just straight up sugar is too much, doesn't taste all that good.

So I've actually found if I use a little itty bitty stevia, a little itty bitty lotion, less than a lot of like even my daughter, she'll put I mean, who's got a bit of a sweet tooth to being a 13 year old and related to my wife and my mother who call themselves dessert queens prior to meeting you at least.

But still, you can your dessert great. Right. But yeah, but it's like it's like she's even like this tastes really good at like one fifth of the recommended sweetener.

Even if it's an artificial sweetener. So it's an acquired taste. And you know, for me, I'm always also trying to educate people, Ritamarie, on what we would do with our kids.

So first and foremost, don't make them change this overnight because they're going to lose their minds. But you need to model it and you need to do it.

And then get them into the cooking, in the baking. And if you guys ever hang out with Ritamarie, she's well known for just like completely like she just said randomly, just like going, well, I have an idea and like making up a new recipe on the fly live.

And so no holds barred. But that's how much she knows the foods that really can combine well. And it's like just practice. The only reason, you know, the foods you like now is are the ones people put in front of.

And you got used to them, the new ones. You know, at one point I was when I first changing my buds and knowing I really want that cookie or cracker or whatever.

And I had a mango and I love mango, it's so good. And I said, okay, I'm going to do this experiment, this taste, but experiment I am going to taste this, whatever it was I was craving, and I'm going to taste this mango and honestly say which one tastes better?

The mango one hands down. Okay, mango one hands down. Now, here's the thing. Nature does not know about the bliss point to make things addictive. And you said if it's too much, it's beyond the bliss point.

And so scientists are hired and paid really good money to figure out the bliss point of processed foods that they're creating these food manufacturers.

And you have to go if you go too low, then people are like, Oh yeah, that's good. And they move on if you go too high, oligopoly too much. If you get right at the lowest point you go, I want more, I want more, I want more.

And they're paid to figure this out, to deceive you into eating more minimums or whatever else. And it's crazy. I heard this thing where sugar is estimated to be eight times more addictive than cocaine.

So true. And it's nuts. It's that big, huge dopamine hit and guys we're getting addicted to. So I really appreciate how you bring all the science and then just kind of just get down to the nuts and bolts of how we get the nitty gritty of how we can bring this into our lives.

Ritamarie because, yeah, I mean, they are we're being manipulated that we're being addicted and you know, and you know it like whenever anybody says to you, Hey, sugar is eight times, eight times more addictive than cocaine.

Most people, even if they've never done cocaine, are like, yeah, I believe that they've had. Sugar and sugar in, you know, how addictive it is. Like when they when they have rats and a little thing and they give them, you know, the total basin's cocaine and sugar, the one that makes them keep coming back is sugar.

They that's their choice. So, yeah, we got to get rid of it. We've got to get off of it. Cool. Well, I want to say thank you so much and I'd love to kind of let you as we kind of land our whole conversation about insulin and its effect on inflammation and the immune system, and then obviously our our little divergence into cocaine and addiction for just a moment.

Okay. How would how would you bring this all together for everybody who's out there, you know, maybe suffering from chronic Lyme? They have a friend who or a child who may be suffering like so that they can maybe integrate some of this into their lives.

Yeah. My into one sentence. Oh, no, no, no, no. You've got time. Okay. Like, huh? So you want to eat real food, right? You want to eat food that's real.

So if you're eating an apple or a mango or whatever, it's got sugar in it. But it doesn't tend to it can be said, sensitizing for people who are insulin resistance already, but or have genetics towards it.

It's very different. Even if there is like ten grams of sugar in the apple versus ten grams of sugar in the cookie. Right. Same exact amount. The sugar the cookie is going to really drive you crazy.

The apple has so many other nutrients in it to help support it. So we have to eat real food. Not this process to be careful about flowers or not starch so much as maybe, you know, a bowl of brown rice.

But brown rice flour. It's flour. It's it's like cocaine. There was one thing I read. Somebody wrote that it's kind of like it's the white powder that's similar to cocaine and has the same addictiveness.

Wow. Right. So we don't want to make flour out of things if we're going to eat grains, eat the whole grain, you know,

steam it up, eat wild rice, eat, you know, things that are not going to shed you into or put you into addiction.

Like if you eat a bowl of rice, do you sit there going, I need more, I need to get to the pill, and then you go, okay, I'm done, right? But what if you ate this bread or this cookie or cracker that's made with the flour from those grains?

It's just this addictive. I've got to go. And it's raising your glucose, raising your insulin and creating similar problems. And the other thing I would say is be careful about the fats you use.

Be careful about using a lot of oil everybody's into like coconut oil is great and olive oil is great. Oil is a processed food just like white flour. Because we take away the fiber, we take away the protein, we take away everything and we just give you the fat.

And that can be problematic as well, especially for some people. And then last thing I'll say is we didn't touch on this much and I'm sure you touch on it in other lectures.

But the omega three six balance and when we eat the coconut are not coconut oil, but canola oil. And when we eat almond oil, when we even overdo on nuts and seeds that are high in omega threes, we're throwing off our immune system.

There's a whole fatty acid cascade that increases inflammation when we have too much omega 6 to 3. So much wisdom. I think we should probably talk for an hour or two or days even on omega three and hour and omega six is.

Key takeaways and where to find Dr. Ritamarie

Yeah, but the take home I'm getting is like eat real foods as close to their natural state as possible and you know, don't beat yourself up if you haven't been doing that or you like.

Both of us obviously were raised completely differently because yeah I remember when like, you know, the recovery snack for sports was in half an orange and Twizzlers because it was sugar and flour.

Oh, you can imagine where I started when I got lyme and had to turn it over. But. But you can and your taste buds will change over time. So give yourself that chance, guys.

And you have that ability to to make these micro changes over time. And the reason I a moment ago I wanted to finish one last thought was the reason I said a lot of you had been sick for two or three or maybe even longer years is if you had started to slowly integrate some of the changes that Dr.

Reed and Marie taught us about today. You would already be much if not already at that point of this optimal insulin, and then that optimizes your immune system's ability to focus on what it really needs to do, not the sugar, but on these infections to get rid of them so that then you can get back to living your amazing life and being the light that you are for this world.

So, Dr. Ritamarie Loscalzo I just want to say thank you so much for being here and sharing your wisdom, and thank you so much for being such a close personal friend and support of myself and my family and kick me in the butt when I need you to get out there and really, you know, do what I'm here to do so that I can inspire others to do the same.

I'm sure you've motivated and inspired so many people who'd want to learn more about your work. If they do want to learn more about what you do, where can they find you?

Well, it's pretty straightforward. DrRitamarie.com is a good place to go. And Dr. Rita marie D-R Ritamarie on every day. If I didn't try to make it fancy so you could find me there.

And then if you are a health practitioner and you're looking for help with how do you like go from, you know,

allopathic to functional kind of medicine?

I have the Institute of Nutritional Endocrinology and you can go to Inemethod.com and learn my. Cool Inemethod.com and Dr. Ritamarie everywhere. Me everywhere. Awesome.

My name is unique enough that I figured, you know, I don't need to come up with any, you know, fancy schmancy stuff. Exactly. No, it's perfect. So, everyone, I want to say thank you from the bottom of my heart for joining myself and our co-host, Dr.

Darin Ingels for this episode of The Healing from Lyme Disease Summit. You are amazing. You're worthy of receiving love and light and healing and just go out there and shine your light on the world and take this information and internalize it, use it to get better, and then share it with others so they can do the same.

And until next time, I can't wait to see you in the next episode.