Opening Banter and Hormone Friendship

So we're just going to start off Dr. Carrie Jones. The first thing I want you to know that of all the people I kid you, not all the people on the planet that I love talking hormones with, you are numero uno like hands down.

It wouldn't be even a question. So I want to say thank you for joining me on this incredible summit. I'm so excited to pick your brain. Oh, my gosh. Woman We joke all the time that if I could just choose my neighbor, you would be my neighbor.

I mean, I would choose you and. Oh, my God, heartbeat. I would choose you for sports to be on my team. I would choose you for a travel partner, and I would choose you for everything because we just have so much fun.

We get together, we've too much fun. We get together. I know a guy. That we forget, like in scenarios like this. Oh, yeah. Other people are listening. Yeah.

But here's what I want everybody to know is like you and I finally met face to face last summer. We went out to dinner. And what do we do? We talk to her about? Yeah, of course.

Of course we did. So I am pretty sure if we live next to each other, we would just be having the conversation everybody is about to hear right now because we would love it.

They would just be what we naturally want to do. Yeah, absolutely. So with that in mind, here is my burning question and this is what I think is really interesting, is that you and I talked about this when I came up with the fasting cycle for women.

I remember like experimenting with it, trying to understand it. And then I was like, I got to go to Carrie and make sure that I'm thinking this through. Right.

And then you sat, you know, together we sat and kind of made a few tweaks. But you were really pivotal in that. So I want to say thank you. But the second conversation, I want you to be pivotal with me now that I don't think is being talked about enough is that after 40, as we lose estrogen, progesterone and, you know, testosterone is is quick to follow.

These are precursors for some pretty key neurotransmitters. Like if we just take estrogen, she actually can help up regulate dopamine and serotonin. So my question to you is, if we lose estrogen, do we do we lose dopamine and serotonin?

And now we're really depressed. Which a lot of people listening will raise their hand and say, yes, that's me. A lot of people I remember when I was in fulltime practice and I had these women who were like, I turned 45 and it all changed.

I turned 45 and my anxiety got worse. I turned 45 and my depression that I thought were headed for control was really pretty significant. And then other neurotransmitter related symptoms such as sleep.

I can't fall asleep. I can't stay asleep. Carrie, you just wait. You just wait until your hater hit your forties. But with estrogen, so the potent estrogen is called estradiol.

And it's like Goldilocks too much or too little can cause a lot of impact in our neurotransmitters, serotonin and dopamine being big ones. But for serotonin is an example we need.

Estradiol to make the enzyme that converts tryptophan into five FPTP. So when we look at how do you even make

a serotonin? How do you make a serotonin in the first place?

What I mean, you can make it in the gut, but when you're in your brain, then you've got tryptophan. So you've eaten tryptophan or you've taken tryptophan, the amino acid, and then it's like, cool.

The next step in my journey of life is to become five htp up here in the brain and estradiol says, I got you. I am going to upregulate what we call m RNA for you to make the enzyme that activates catalyzes that whole response into five htp.

But if you don't have a lot of estradiol or if you're menopausal you feel like you have any estradiol, then you can really struggle to make like that step to happen that like next to happen.

And so oftentimes what will happen is they will go to their primary care doctor or GYN who says, oh my gosh, you sound depressed. Here is an SSRI, a selective serotonin reuptake inhibitor where the issue isn't that you you don't eat it to circulate around longer, which is what a reuptake inhibitor does.

It stops the uptake so it can spin around your brain more. You need to be able to make it in the first place. And so instead of eking out some, we need to give your body a way to make it in the way that you used to on its own.

Exactly. And so obviously, you know, people then go, oh, what about tryptophan? Should I so you're saying I should take tryptophan?

Estrogen Loss and Mood Changes

And I'm like, well, actually, what what a lot of people end up doing is if they're not on an SSRI, then they will skip that step. So if they're not going to go on estrogen, the HRT, hormone replacement therapy, we skip the tryptophan to five step and we actually just jump right to five.

HTP tryptophan is wildly important for a lot of other things. I'm not neglecting that. But in that like teeny tiny little example, this is why some women who on their own or because of the practitioner they're work with will say, Oh my gosh, I went on estrogen, HRT, and my mood is so much better.

Or they'll say, Oh my gosh, I went on five HTP, the supplement with my practitioner, my mood is so much better and I'm like, I know, I know. All the same. It's all the same.

And we have to like still circle it because I said a lot of serotonin is made in your gut and we forget that estradiol plays a massive role in our gut, so we lose estradiol because of menopause.

Our entire microbiome shifts, unfortunately for the negative, I think to the negative. And so now one, we could rely on our gut microbiome, which does, you know, millions of things, one of which is make serotonin.

You don't get that benefit like we used to anymore. Who really when I talk about this all the time, Andy, whoever designed this to designed it, suck it.

You know. Do you know, I actually on my podcast, I asked Dr. Amen this question. I was like, Why? What is the biological reason for us to lose hormones other than the fact that we're not having babies anymore and he his response actually depressed me.

He said because we you weren't meant to live this long. That's what I tell people, too. I think it's like the printer ran out of ink, like, yeah, the body.

Like the body was like, oh, crap. Mindy wants to live that long. Like, evolution hasn't caught up to the fact that we're living till our way on menopause.

Women spend a quarter to a third of their life in menopause, so depending on their lifespan. So we've got this. If

you think about the big picture of this, we've got all these biohackers that are like, I'm going to, you know, live as long as I can.

Most of those are men that are like like I'm going to I'm going to live and all the way until I'm over well over 100. But for a woman, let's say a woman was going to live to 150.

She goes through full menopause. You know, many women are going through full menopause at 45 and 40. Now it's 50, 60 years without those hormones that were supplying neurotransmitters and making her happy.

If and then you go, okay, well, what are the options? We got HRT, we have bioidentical oils, we've got five HTP. We have all these things that we can play with.

But what has your experience been that you pull one tool out and it works for one woman and that same tool doesn't work for the next woman. That's the thing that we're all so individualized and our our background or genetics, our lifestyle, all of our men, our family or the women in our family went through menopause.

How they went through menopause. I mean, all those things really dictate menopause. I mean, there are definitely women who go through menopause. I don't know why they're God's favorite, but they have no symptoms.

They feel amazing, right? They've never gone to the slash and they're just like I went through without a hitch. I don't know what the problem is. I'm like, Well, God bless you, you know, yeah, bless your heart.

But for the majority of my patients that I saw, they would come in saying, what is happening? Everything is changing, my brain is changing, my memory is changing, my mood is changing, my waistline is changing, changing my libido changing.

My tissues are changing. My joints are changing. What, what? What is this change? And you're right, because for some women, HRT, hormone replacement therapy of any kind works great.

And for others, they have such a negative reaction. And then they're like, Well, I don't know what to do. Let's try it. You know, I'm like, Oh, no. Right.

So, so if we know, like that example you just gave, we're okay. We know estradiol is going away. She's she's got she's going. There are some things we can do to slow her that is like HRT.

And we'll talk about that in a moment. But if we know that she does creates all these reactions like you just explained, for serotonin, we could probably walk down the same thing for dopamine, even glutamate.

I know that that she has a big play in glutamate production. So can we do it twofold? Can we say, okay, I'm going to support with HRT or bioidentical, so I'll find my rhythm there and I'm going to come in with other things to support the neurotransmitter system, some of which are supplement s, some of which are nature.

Some of them are very easy things. Would that be the best two pronged approach and how? What's the door in on that? If you don't know, HRT is a big topic which obviously is probably getting addressed but in the summit.

But you remember hormone replacement therapy hormone is generic. And we are oftentimes when women think of HRT, they think of estrogen. But you have a lot of hormones, 50 plus hormones, right.

Even thyroid medication. Thyroid is a hormone because it falls under the umbrella. So when we say HRT, what you and I are talking about is going on estrogen, progesterone, progesterone, testosterone, or adding in some DHEA.

I mean, we're actually we're generally talking more the ovarian, ovarian adrenal type hormones, but do no HRT is a very broad umbrella term, but not everybody is a candidate for HRT, specifically the estrogen form of HRT.

But that doesn't mean your HRT like banned, right? DHEA, testosterone, progesterone. Maybe you do need thyroid

hormone as there are other hormones out there that have.

I have had women who could not do estrogen but just thrived on progesterone and DHEA. So I wanted to start there that even there's a lot of fear around HRT.

It's it's a bigger topic, right? I think what's going on in a lot of people's heads. But yes, I definitely think that diet, lifestyle, sleep, rhythms, alcohol, medications, the our gut health, like all of these impacts, chemicals play a massive role and what we used to be able to get away with in our younger years.

Yes, that's it. So body. Is. Like I have no patience for that anymore. How many of your patients have said to you, I turned 45 and stopped working my diet.

I didn't change my diet. Many I didn't change my exercise. I didn't change anything. It's the same job, same partner, same kids, same exercise, same diet.

And I am a totally different person. I'm like, I know, unfortunately, because the act of perimenopause, which I call reverse puberty and then going into menopause, you are literally like a caterpillar coming into a butterfly.

I show up to be a whole new person. You're in your next stage of life and that we don't get taught that for most of us ever. We maybe watched our mom or grandma aunties go through it, but for a lot of us we didn't.

Or it was kept quiet too. It was downplayed or brushed off. It's all it's all in your head. It's it's just what women go through. Good luck. So when we we really have to look at that whole big lens that you said and it is a two pronged approach.

Yes, absolutely. HRT plays a great role. But if you are on HRT and you have not stopped your alcohol intake, you're still surrounded and using a lot of chemicals.

Your stress is through the roof, you're unhappy with life, you're not sleeping, your diet is crap, etc., etc. Like you're still not going to have a great menopause.

Just as if for some women making all those changes maybe doesn't get them in 100%. I Carrie I gave up wine and I, you know, I changed my diet and I've cut back on my peloton bike that I did every day, seven days a week.

And, you know, I'm better, but not great. And then it's like, well, you might need HRT. So it's like this teeter totter. So everybody's teeter totter is not 5050.

Got it. So and in the balance. So that's what I hope everybody here is, is like after 40 lifestyle has to change. Yes. Yes. And I love what you said. Where what worked doesn't it catches up with you and what worked for you in your thirties unfortunately doesn't work in your forties.

And I think it's really interesting because every year of like my forties, I was like, Oh, it's going to get better, it's going to get better. And every year I was like, I need a new tool.

I need a new tool, you know? And that's what the menopause reset was all about. Like, here are the five that I know worked, and now my brain at 53 is like, Hey, we need some more brain tools because that is like a serious, extreme sport.

So so let me ask you this. If you go through like I've heard and I think it was Lisa Mosconi say that it takes about 10 to 15 years for the brain to recalibrate, to do these declining hormones.

Do you do you think that's accurate? And is there a at what point does the brain go, okay, I'm I'm doing okay now without estradiol? Is it a year after your last period?

Is it two is five? Well well, first of all, I love her. I don't I don't know her personally. So I'm fangirling from afar. But I

have her book x x brain.

I highly recommend it follow her on social. I read her papers before I knew who she was and before she published the book, but yet I have had a lot of patients through the years who've said that to me.

Like I used to memorize everything. I used to be able to multitask with ease. I used to be able to, you know, get through my whole day without issue. And now I'm a list person.

Now I forget. Now I miss place. Now I was just going to do something on my computer or my phone and I have no idea what I'm going to do. I actually I couldn't even think of it if I keep trying.

And so I did. I have found it is very variable in my experience. Anecdotally from my patients and from people who honestly comment in social media, some people to this day comment and they're like, I'm in my seventies and my brain is never recovered.

I still don't feel as sharp as I used to. Is my twenties or thirties and others will say I'm definitely I've had people say menopause was rough, really rough.

But then I bounced out. I'm doing okay. I'm pretty good. I found my new happy medium and brain figured it out. And so I, I find there's a big variation.

And again, it goes back to those two sort of areas that you brought up. Did you go on HRT, specifically? Estrogen is part of it, right. And what did you do in your lifestyle?

What did you do with. That's the biggest the keynotes. Yeah. You know being your healthiest self. Yeah. And maybe changing some things are improving some things.

And that's what I found with people, I would say. So menopause is defined as you have to go 12 months with no period. You can be totally symptomatic, but 12 months of no bleeding at an appropriate age.

Right. So somebody listening is 25 years old with no period. You're not menopausal. Good difference on that. Probably something different. But if you're 45 or 55 and you haven't had a period 12 months on the 13th month, you're considered menopausal.

Now, does that mean mean? Well, who your menopausal your brain flips over? For some people it does. And for a lot of people it doesn't. And so, unfortunately, in remembering, we consciously know these things are happening.

You can look at your fellow group of girlfriends and be like, Oh, I forgot my keys again. Or I totally spaced out or I'm writing lists again and you can all like commiserate and understand and have menopause brain.

But your brain for some reason doesn't know it. You know, like nobody has said to the brain, like, okay, so we're headed into menopause. Yeah, you're right.

And so you're. Ready. To get ready. I'm gonna need you to adapt. Can you adapt, please? Like no one has said to the rest of the body, like, hey, so the ovaries are done?

HRT, Bioidenticals, and Individualized Treatment

Yeah. You pick up the pace I adrenals, thyroid, you know, everything else. Pancreas, brain. Yeah, it's, you know, the ovaries are done. We had a retirement party.

Yeah, we're not rehiring. Unfortunately, we're not backfilling. We just. We're going to spread the work out among everybody if you pick up the pace. So we know this consciously, but none of our glands get this message and I don't know why. Yeah, you know what I.

So I am seven months now without a psych. Oh, I know. It's very. Exciting. So let me tell you what I am going to do. Is that it'll actually be my fifth the month of my 54th birthday.

If I stay on this course, I'm going to have a I'm gonna have a menopause party, a retirement. Party for them. Like a retirement party like. So that's I think that's the other thing that I'm watching so much is so many women are suffering through this.

They're feeling alone. They're feeling like they're not worthy anymore. And I and I then I'm watching a lot of people, a lot of celebrities that are saying we need to celebrate this phase.

And so I think there needs to be it's like I think menopause needs a rebrand. Yes, it does. Mindy, make that happen. It does. And a lot of women fear it.

And I understand why, because you and I obviously are women. We're making it sound awful, but we're not. Nobody really also celebrates. The good. Stuff in the.

Oh, yeah, the better. I have so many women that are like I like myself better. I like my personality better. I found my true authenticity better. I malviya now, but in a good way.

I set boundaries now and I, you know, I'm better off for it. I've my relationships have gotten better. You're just more mature with a peek at her career or their third family is thriving for.

And so they're like, I love this part of the new me. Yes. There's some things over here not that thrilled. Right. Right. So so I agree. And I would say the same thing.

I'm finding myself like saying things that I would have never, ever said before. And then I get off. I get it back when I'm like, Whoa, who is that? I'm like, Oh, that's menopausal me.

I kind of like her. Like, she just says it like it is. So before we leave the HRT topic, what are your feelings for talking a lot about HRT? But what?

Just because it's such a hot topic right now, I know we're relooking at it. I can tell you that I tried it for two weeks and I almost killed everybody around me.

So it was not it. I couldn't find my rhythm. So then I moved to Bioidentical oils and so I'm now experimenting with the different bioidentical. So what's the difference?

And do we need to take into consideration safety one over the other. Yeah. And you know with HRT, so HRT, hormone replacement therapy and then we have B HRT, bioidentical hormone replacement therapy.

So with conventional, the one that started the whole thing, the original OG TBR was basically it's from pregnant Mary Urine, it's an equine estrogen that looks it's a close enough akin that when it can bind to the estrogen receptor in the body and and activate it now the downside is that it because you can for a lot of women you can't just give estrogen by itself.

So they were given progesterone, but they weren't given progesterone. They were given a progestin, which is a synthetic form. Also kind of close spines to progesterone receptors, does the thing, but came with a lot of negative side effects and when you when we studied it, the the Women's Health Initiative is the big study that sort of shut down all HRT, you know, a couple of decades ago and freaked everybody out.

And since that time, a lot of those authors of that W. H. O. trial, a research paper, have come out with their own subsequent research to be like Whoop CS, except they don't say Oops, there's no they they just say, Oh my gosh, HRT hormone replacement therapy helps hot flushes or it helps the brain or it helps whatever it improves bone health or it helps us or it helps that, which is, of course, what they were saying.

It didn't help in in that study that shut everything down. We do know the progestin, the fake progesterone is is the problem, child. It's the one that we really probably for sure should stay away from.

So because of the fear of the dummy, we tried. Then we got into bioidentical hormone replacement. So it should look just like the kind you have in your body.

You take estradiol a is a hormone replacement. It should look like estradiol in your body. Progesterone, progesterone, etc., etc. And so now the field of HRT is exploding.

There are you can get bioidentical hormone replacement therapy at your average everyday pharmacy. Yeah, you can get patches and you can get shots, you can get pills, you can get there's a lot of options out there.

Thankfully and hopefully it continues to grow, although there's controversy or there's compounding pharmacists. So you can have it made for you. So there are options out there.

Don't don't think all the HRT is unattainable to you. It get it at your whatever pharmacy you tend to use. And so what's nice about beach party is that because it is bioidentical when you figure out the right route and dose for you because your body's like, oh, cool, I know what this is.

This is what I have, right? Hopefully that will quote unquote put you into balance and you will feel a whole lot better. So so it's a little bit more you're working more with your natural rhythm as opposed to a synthetic.

So I think and but still, I would say either if you whether you go the more synthetic route or you go the more bioidentical route, what I've discovered, discovered in my own self.

But then also I'm seeing with women in our like our reset academy and our online world is you move the needle on one, so you move the needle on progesterone.

And all of a sudden you're like, Oh, I feel calmer. And then now you're depressed or you're too tired. So then you got to move the needle on estrogen.

So it's like it's a dance you have to play to dial it in. Yeah. Is that pretty common for most women? Unfortunately, it is very common because remember, prior to menopause, we were a cycle, right, in a very controlled up and down rollercoaster that our hormones went on and the body was pretty good for the most part.

Yeah. Most people it controlling that up and down. And then once we get into menopause, we go on some sort of hormone replacement, but we are not mimicking the up down cycle because we're not in our twenties and thirties anymore.

We don't need that up down. So we're a little more we're more consistent. But that's that's not exactly like the body's like, wait, hold on. I'm not exactly sure how to or what to add in.

Just like Goldilocks too much or too little does cause can cause side effects. And like I said earlier, like the root matters, the dose matters. For example, you know, some people may not do well with a topical cream as just as an example, right?

You know, you rub a cream on your arm and for whatever reason, it doesn't absorb very well in you. Your skin doesn't really like it, but you go in something that dissolves in your mouth or you get a patch, a little tiny patch that you stick on like a Band-Aid and like, poof, you're like, Oh, that's what I needed.

I actually just need to switch the route. The hormone was fine. The route of administration was the problem. Or again, dose, like you said, you know, maybe you needed a little more progesterone.

But you're right because you raise progesterone needed to raise estrogen. Maybe somebody went in with a heavy hand and you actually need to lower everything down because you're not in your twenties and thirties anymore.

So you need a more maybe age appropriate dose. And you did mention safety, which I'm I do want everyone to be aware of, you know, all the all the HRT out there or be HRT.

It's, it's not it's not like forever e for everybody I try to think of like I'm like, what's the safest step? Magnesium like fruit. But yeah, magnesium.

It's hard to say. I'm like, Yeah, you're right. And that's a pretty safe point. And so you do have to be aware, but I do want women listening. They estrogen gets vilified a lot.

It gets named as the single bad person. Yes, it is the single cause of cancer. And Patrick did that. I broke my squash. And it's not true. It's not true.

And women will say, oh, my gosh, my aunt would on hormones. And immediately develop breast cancer. And I'm like, wow, I hope now with we so much research we have coming out, we know cancer is extremely complicated.

It is never one single thing. A lot goes in the creation of cancer. It doesn't generally happen overnight within a week of starting hormone replacement therapy and a lot of it is like, oh my gosh, the research on endocrine disrupting chemicals which can act like estrogen is now getting bigger and bigger and scarier and scarier.

And it's its relationship to breast cancer or any, you know, uterine cancer, any kind of estrogen related cancer. And so I just do want women to realize estrogen singlehandedly is not the cause of breast cancer.

It is way more complicated than that. Yeah. Yeah, well said. And the the part of the conversation I want women to grab from this is whatever route you go with a B patient, you're going to have to find your rhythm and B, make sure you change your lifestyle.

Because if you don't change your lifestyle, let's say you put a patch on and all of a sudden it works miracles and your lifestyle is still horrible. What from my lens, when I look at that, I'm like, Even if you're mentally happy, I still want to know how that estrogen is breaking down.

I want to know how your detox pathways are because I'm worried that, you know, breast and ovarian cancers are happened to more post-menopausal women than they do to to pre.

So yeah, you know there's still that lifestyle piece is not being discussed enough. In fact I don't know if you saw Oprah did a whole masterclass last week on this that.

Oh yeah oh my God. It was like she's like, I'm going to demystify menopause. And I was so excited. I was like, Oprah, you go, girl. Like you are the one to start cracking open this conversation.

All they talked about was HRT. That's it. Oh, well, I saw I don't watch Drew Barrymore, but I saw an article that Drew Barrymore had her first hot flash.

Yeah. On screen. And I thought, you know, because Drew Drew and I are about the same age and I was like, fuck, go girl, to do it on screen on her show and be very open about.

I think I'm having my first hot flash. I'm like, This is what we need. It's it. That's what we need is to talk about it. It happens. Yeah, it's I had this hilarious, amazing, amazing, amazing, high level patient.

She was a very high level at a very large, famous company, and she was heading into perimenopause. She said to me one day at a visit, I did it. I did menopause.

And I said, like you did, how did you do it? And she said, Well, I was going to a black tie event. And I had I felt very warm. So I opened the window and got the cool air and cooled down and it went away and that was it.

I did menopause and I was like, Oh, sweetie, oh, god. If only it was that easy. That's right. For some women, I was

like, We need to make some changes in the lifestyle.

Yes. Yeah. And I think that was my big thing. I mean, Oprah started the conversation, but I also feel like we need we can't lose sight of the lifestyle.

So those of you listening, you know, that's why I go to like summarizing everything that we're talking about is one, be patient and find your route. And if you if you see it go like with, you know, testosterone like that was actually the bioidentical my first boyfriend and I started to see some changes, but then you might have to move the needle on the other ones.

And if you put the patch on, you might now have to do some kind of bioidentical progesterone. I mean, you just have to keep playing with it is what I think we're not talking enough about.

Yeah. And then you got to mix that with lifestyle. And with Oprah, too. Again, I don't know the girl we're not we're not besties. She's not my neighbor, you know?

Yeah, but it's. Either. Yeah, not. Yet. But it's also possible, you know, sometimes I find people they're they're their lifestyle and they've already got it under control.

So they forget to talk about that part. Right. Oprah has a good point, has a little bit of money. She's in a different tact tax bracket than me, probably. You.

So in her head, she may not be thinking you need to try to eat organic and you know, like work on stress. And the girl has her own private plane and, you know, she's a lot of people around her.

She's all team glam or not, you know, garden or whatever. And so in her head, like HRT was the lever she needed to pull on because the other side was pretty cool, pretty chilled, pretty.

I mean, I'm not saying Oprah's not busy, but. But yeah, you were saying she has a lot of support and she has a different lifestyle. So I think. Somebody may come to you and, you know, money issues, stress issues, food issues.

Oprah doesn't doesn't seem to have those issues. And think about it. Right? That's what I meet her Alaska. So would you would you want to be where would you run that by now?

So that leads me to my next question, because this is a what I've thought of now that I am, you know, seven months into my menopausal transition, I've thought a lot looking back on my forties and and realized I started with lifestyle.

That was the first thing I started with. That got me another level of like, Oh, this feels good, I'm navigating this. And then I started to think about adding in bioidentical.

So you and I chatted about that, so started adding that in at the same time I started to think about these neurotransmitters and I was like, Okay, well, I'm not getting enough serotonin, dopamine.

I don't want. I felt Gabby's loss from progesterone going away. So what do I know about what I can bring in for these neurotransmitters? Right.

Menopause Brain and Cognitive Changes

So you talked a little bit about five HTP, but let's talk about like things outside of even supplements that we can do for this neurotransmitter system because I see so many women just losing their joy.

And that is that is what breaks my heart is that they may their skin may look good, they may be slowing the process down, but they're joyless. How do we help them with these neurotransmitters?

Well, as I said earlier, a lot of them are made in the gut. And as we go into menopause, our microbiome completely shifts. And so what's so wonderful is that now there's so much research on the microbiome, and there are a lot of things that we know by even like shifting our diet, cutting out alcohol.

And when I say shift our diet, I know a lot of people listening are like, but Carrie, I eat pristinely. I have a really good diet. I'm like, But you probably eat the same eight things every day, right?

Your breakfast is probably the exact same every day. So like start to rotate the in-season stuff, start to rotate the fruits and veggies and salt and try different kinds of meats.

Love that, right? Try different carbs. If you're a carb person, you know, like just if rice is your thing, try quinoa. Switch to sweet potatoes or regular potato.

Like just that shifting really can make a difference to the microbiome because the trial is like, Hey, heck, yeah, what's this? This isn't this is a new vegetable I haven't had in a long time or a new fruit.

Like, that's cool. And then even, you know, how is your gut health? Have you been ignoring the fact that you have heartburn or gas or bloating or constipation?

Know, do we need to do things there? Our gallbladder tends to go to hell in a handbasket as we get older. Effective estrogen, the effect of chemicals, just the effect of stress and autoimmune really plays a role in our gallbladder and which helps us break down fats.

Yeah, really affects our microbiome. So the great thing is people are like, okay, cool diets, looking at alcohol, what medications are you taking are affecting the gut?

How often are you popping that Tylenol or acetaminophen, which is going through the liver and affecting the gut? How often do you pop that antibiotic?

Because you have a sniffle and you're concerned given the virus situation, but like you're completely destroying the bacteria in your gut. Right. Do you ever even address the bacteria in your gut with prebiotics probiotics or post biotics?

So for people who don't know probiotics are the food that feed the probiotics. Probiotics are active living creatures. They poop, and when they poop, they poop out probiotics.

Butyrate is a very common, very famous, very helpful one. But even just the nutrients like vitamin A, super helpful in the gut, right? Like Vitamin C, the way we manage stress affects our gut health.

And then anything happens in our gut goes right to the brain. So we're talking neurotransmitters, right? And there we go. We have we have this nerve, the vagus nerve that goes right to the brain and then affects our mood.

So would you say that eating vegetables at like 49 is a mental health tool compared to 29? Yeah, because I didn't eat. I mean, I ate vegetables at 29, but I didn't know about them like I do now.

Right. Right. Because I can't I actually have been I did this a couple of weeks ago where I was like, okay, I'm doing a massive salad with every meal.

And I called I called it my liver sparked salad because I put a bunch of bitters in it. I put a regular radicchio dandelion greens like it was as bitter as it possibly could get.

So I was like, okay, I'm gonna feed my liver and I'm going to help my gut. I did that salad. I ate it twice a day, every day for seven days. And the first thing that I noticed is all that menopausal bloating went away.

Like that was the first thing. And then the second thing I noticed was just happiness. Like, really a lot had gone up

and I'm somebody who's taken great care of her health over all these years, but to your point, I think we're not talking enough about as each year goes on, those microbes are are changing because the hormones of fact the train inside the gut is that is that what.

I hear 100% and I have it on the board behind me, although it's in reverse. It is healing happens it joy. And you mentioned joy. I mean, even just when you eat the same seven foods every single day, where is the joy in that? Yes, that's easy.

Yes. If you're a macro counter, it allows you to can or macros. Yes, it makes you want to think. But it's also obviously after how long you've been doing it, a decade's boring as heck and so I was on a girls trip a couple of months ago and all of us girls eat about the same.

We're all gluten free. It's very easy for all of us to go as best friends. But my my very best friend, we were at the store shopping and she goes, Oh, let's get her karma.

And I was like, Her karma. When was the last time you ate it? Kim Yeah, it's good. I backed out of it with hummus, of course. And I thought, Oh, I like a little kid.

I had so much joy. Like, I want to hook them on forever. Last summer, when artichokes came out, I had forgotten about artichokes. I was, like I said to my husband, the artichokes.

She was like, artichokes got. I haven't had a artichoke. And I. Love artichokes. Steaming artichokes. I these little like just these little poppins. I'm not saying if you've got the same eight foods that you need to switch them all.

Yeah, but these little Poppins, I mean, who doesn't get excited for blueberries he's an I get really excited. I get unnecessarily excited for blueberry season.

Right. So you do these little things in in, you know, squash when we get towards the fall and the winter and these are microbiome gets the joy as well and they get all excited.

Yeah right. And then they make you excited. They make you joy know. But when we look at all those, you know, serotonin is the biggest neurotransmitter in the gut.

Yeah. So let's look at like dopamine, because that's the other thing that I see is that with and this is watching a lot of women go through this transition is that, you know, they just don't have that motivation to do anything and things like that are novel become so important because that's what dopamine wants.

And so we you know, I have a theory that, you know, I read this statistic the other day that 70% of divorces that happen in the first two couples in their 40 heterosexual couples in the 40 are initiated by the woman.

I yes, I have read that as well. I don't doubt it for a second. And I think she's looking for novelty. I think she's like, this is boring. I've been with the same person.

I've raised these same kids. Like, I mean, I'm not being like if you if if you sat at ladies night out, you'd hear a lot of women, you know, talking about this.

Rebranding Menopause and Finding the New You

But Is that a neurotransmitter issue? Because estrogen is is going down. So it's not stimulating dopamine. So now that now you don't even realize you're looking for something novel to get that dopamine.

RUSH But what are people doing to get the dopamine? RUSH They're scrolling on the right because and now we are so programed to like 30 seconds or less, 15 seconds or less between Instagram reels, between TikTok videos, like if it's much longer than 30 seconds, Americans in particular, like we're over it, we don't have time long written Instagram posts.

People are like, and on top of this, that was way too long because they're so dopamine deplete burnt out. Yep. That they just they're just constant and then then you get the satisfaction of scrolling laughing for a second and keep on scrolling.

And instead of again, like the foods I found, a lot of my patients had the same monotonous life where they didn't do anything new. So I was like, Hey, when was the last we did something new?

You know, I live in the Pacific Northwest and they're like, Well, for spring break, we're going to the beach here, which is what we call the coast, which is very rocky.

It's very cold, very windy. And I'm like, you go every year, right? Can we go somewhere different? Can we can we go to the desert? Can we try something too?

Can you pick up a a sport? Can you can you try needlepoint? Like, can you do something different, write something new, go bowling, go like just trying to workout class versus when we get stuck in that rut, then it's very monotonous.

We're sort of depleted and our openings, our hormones are screwed, but like that, doing something new can really make a big difference. Oh, my gosh. So that that is something that's really been burning on my heart, is that we have to go search for dopamine in the right places, not on this.

And like on the like, it would almost behoove us to be able to just put the phone down for 24 hours, reset your dopamine. I do think I know Huberman is a big fan of when you want to get dopamine down, you just got to spend a day getting bored.

I have a little bit of a problem with that. But again, I'm a recovering dopamine addict, so maybe don't listen to me. But I've done this for my own life.

If, like, sometimes getting out of my routine gives me that happiness back and then I go, Wait a second. It wasn't that I was actually there was a problem with my hormones.

It was that I had to cater to these neurotransmitters a little more. And dopamine is one of them. Yeah. So outside of novelty, what else that behavior is can we do to get more dopamine or are there other I mean, we can talk about supplements, anything else that we can do to really amp up dopamine in a different way since estrogen is not initiating it as much.

Even just support like the act of making dopamine, we need protein. We need adequate protein for comes from tyrosine. It uses certain B vitamins like vitamin B6.

And so just making sure we're not deficient in that in this in this day and age. And I find I was really obvious, of course, listening to Dr. Gabrielle Lyon, who talks a lot about protein.

And she said, you know, a lot of women, as we get into perimenopause and menopause, we're not we're under muscled and under protein. And I just see that all the time.

But when I would talk to patients and I would say, well, what do you what do you eat? And they're like, well, I scrambled to egg whites for breakfast.

Oh, yeah. And then I have a sound, a little bit of chicken on top for lunch. And then I have something for dinner. I have a protein bar, you know, I have a little protein shake.

And that's that was like that was it, you know, God forbid they would eat the yolk or eat any significant protein. So when Dr. Lyon was talking about this, she started really talking about this couple of years ago.

And I was like, You know what? I'm in my forties. I'm going to I'm going to eat the whole cow, I guess, you know, I'm just going to go for it with protein, 30 grams.

And every meal and made a world of difference. Yeah, it's like, all right. What did you notice? What was the biggest. Thing in energy was a big one. I just felt better. Brain power was better.

Energy was better. I was I just gut health was better. I just you know, your proteins are your amino acids. I mean, think of all the things in your body that uses protein muscles being one, but like your immune system cytokines, insulin is a protein.

You know, there's a lot of these parts of our body that come from proteins and we just don't think of it. We're thinking muscle because the trainer bodybuilder group has all taught us that.

Yeah, but we forget that these amino acids that come from protein and and, and I don't if if you're listening to this and you're vegan or vegetarian, I was.

Just going to say one can. Obviously get proteins other ways. And you assuming you are but if you're not getting enough protein, it really makes a big difference if you're under protein, especially as we head into menopause for making this transition out of a cycling woman into a menopausal woman.

Yes, it takes resources. Give it the resources it needs. And I was like, dang it. Dr. Lyons nailed it. Yes. And you know what I've decided now at again at 53 is that the two macros I think about all the time when I go to the to I should even be on macros.

The two food groups I think about when I go to put a meal together is what's my protein? And then I go, okay, can I get enough of that like 30 grams? I know Dr.

Lyons is a big fan of 30 grams of protein and the research on that is really interesting and I would agree. But if you if you're going to make scrambled eggs, you've got to make at least six eggs in that scrambled egg.

So I'm always looking at what's the protein and can I get enough? And then I'm putting a vegetable with it and then thinking about, you know, what kind of car I would have.

So I'm like protein forward with every single meal. I start with that question and I think that is really a big shift that needs to happen as women go into menopause.

That would be the first focus on food, don't you think? 100%. 100%. Because, again, if you've got a little iceberg lettuce salad with a little bit of chicken sprinkled on top, and you think that's you've got this, or even if you've got a very massive arugula based salad and it's all colorful and you're eating the rainbow and you're so proud of yourself, but you've just got a little half of the chicken breast sprinkled on top for a little bit of protein, maybe a little bit of a hard boiled egg chopped up, and that's it.

It's probably 15 grams of protein, maybe. I mean, two eggs alone is 12. That's it. We're trying to get 30. That means you have to add in more protein.

I mean, I have I am not a vegan or vegetarian. I am 100% a meat eater. And I have grass-fed ground beef constantly. Yeah. We in fact, we just bought last year, we just bought into a cow.

And that's part of a local free range ranch. And around me and I said, are you are you do you still have cows? So we sure do. So amazing. Yeah. Yeah. And we did that once.

It's it's really interesting when you eat the meat like four months and again, you realize it's coming from the same animal. There's actually a really interesting level of gratitude that comes with that.

We actually when we bought our first cow and it went in our freezer, we named her. We were and we called her Bessie and we literally. Because she did. Yeah. I mean, I was the only cow. Dave.

I know what the kids were like in middle school at the time and we were like, This is really cool that it was a great

way to explain that this animal gave its life for us.

And every time we pull it out of the freezer, it's that same animal. I think when we go to the market, we're not, we're just buying it. We're not connected to the actual, you know, species that gave their life to us, right?

Yeah. Yeah. Profound. The other interesting thing I have found, too, this is the second time I bought a cow. The first time I'd bought a cow, I remember thinking how it smelled like fish oil until I did some research and learned that grass fed cows grass fed meat has a different omega index than grain fed.

So omega as everyone thinks fish oil, right EPA DG Which made me think then when you're trying to have good brain health or skin health or heart health or anything.

So health is super important and that good fat, your cells have a lipid bilayer around them just like you have walls around your house and a roof picture, a fatty lipid bilayer, lipid being fat.

Hormone Testing and Safety Considerations

So if you're not getting good fats or if you are consuming, are exposed to a lot of chemicals that are screwing up your lipid bilayer, then it is going to be harder to get anything done in that cell because the walls and the roof of your cell are screwed up.

Exactly. So even just things like good quality omegas, you know, good quality food, good quality fats. What's going on with your cellular health overall?

Because it's shifting too. As you get older, you know, age is just a thing. And so we're just like our house. My house is 20 some years old and like the back door, we were sliding back door in the lock, so just fell off like my, my husband's like, well, 23 years, but your house is in.

Better paws to. My house is completely in menopause. And, you know so now is two. Yeah come in. This weekend we did go to Home Depot and buy any slider door and it's the same in your body, you know, it just like and this is why people who follow you and the fasting fast like a girl you were helping to clean up you know autophagy and it really helping to reset the mitochondria and improve those cells and I think that's what's so wonderful because we get taught fasting is a bad thing when in fact as we get older, it is such a great tool to help get a new slider door.

Yeah. Oh, my God. That was a great. You brought it full circle. That was awesome. But I do want to say that that's that is a cool thing about fasting because not only does it regenerate these cells, but the cell, if you stimulated autophagy and the intelligence is like, hey, the cells no good, it will kill the cells.

It's called apoptosis. It's a beautiful way to get rid of it. Yeah. So, you know, while you're listening to all these additions that we're talking about here, it's like fasting is is the best way of, like having it's almost like hiring like a de-clutter of your cell cells.

Then be like that person is like, okay, these go out, this one gets organized better and you don't even have to think about it. So you can start to implement all the other wonderful things.

But if you patch that with a fast now you're getting rid of the ones that you wouldn't even know how to how to select out. Right. So right. So one of the last neurotransmitter that now that we've gone down a lot of analogy.

Is can you see why. That, you know, we would sit on your back porch and we would analyze this for hours. Totally. Let's talk about GABA. So this was the one that really threw me at about mid 40 was I really felt like progesterone just went tanked probably because I'm a Russian woman.

But I also realized that Gabby went with her anxiety. I'd never experienced anxiety in my life before and bam, did I feel it. So what do we have for Gab that we can use to bring gab up?

So young Russian woman, I was like, yep, yep. I'm in that club as well. Yes. Card carrying. Right. For those who don't know, a Russian woman is googling.

You'll. There's a whole book on it. Yeah. So GABA is our column. As you said earlier, it's our call Me. Relaxing. Soothing. Everything's going to be okay hormone.

It's our number one biggest anti hormone really anti neurotransmitter. It's the calming like I said, hormone. And it gets stimulated by progesterone, actually a what we call a metabolite of progesterone called Aloe Aiello, not the plant spelled differently.

And not the yoga. Clothes and not the glute yoga clothes. Aloe. No, right. I know. See, don't get. Casey Don't get confused. Aiello Although yoga can be very calming for some people, so it stimulates GABA and then we get that sort of Zen like effect.

And if we don't enough GABA, you either go the Mindy Route, which is more anxiety, or you go the Carrie route, which is just mad irritation all the time because you are not calm and and then your period starts and you kind of go all over again, start over again, or your period doesn't start because you're skipping months and it keeps going.

So to make GABA beat Vitamin B6 is really, really important. And so I have definitely found adding in again this kind of goes back to the protein thing, but also even to the supplemental things.

As we get older and our house gets older, like we just need some of these structural support to come in and help and be vitamins might be one of them to really help with our GABA.

And then the the other thing to help sort of improve GABA but from like a roundabout way is to reduce called glutamate, glutamate our main excitatory hormone.

And so to reduce and improve glutamate. Again, it's it's all the things we hear about that. It's not sexy and it's not a pill. So we don't want to do it like breathing exercises and, you know, journaling.

What can we do to reduce our stress? Walking in nature, you know, but it's also community and it's also the right pet. Petting your animal and being around people and things and animals that you love, like honestly bring you joy in sometimes when somebody once said to me, Oh, you mean like being around your family?

And I was like, Only if they bring you joy. That means something different. Not everybody brings them joy and so, yeah, that's those are those are those key, cheap, brain, cheap and easy way to help support, get or if you get put on progesterone, progesterone can be helpful.

Or the other hormone is called pregnant alone. Pregnant alone is another option. Pregnant also turns into aloe aloe. And both of those are typical bioidentical.

Yes, yeah. Yeah. And I mean, real actual progesterone. Yes. Right. Yeah, right. Yeah. So I read a really interesting study two weeks ago that showed on days that estrogen and progesterone peak.

And so they they specifically said this is what this what the study said day 712 and 21. So 21 would be progesterone they claim, I don't know, estrogen peaking on day seven.

But this was what the study had done, that when estrogen goes high, glutamate goes low, and when glutamate goes low, it acts in the same way as glutamate going high.

But it's so it's the same anxiety. So in perimenopausal women, what they noticed is because estrogen is going up and down and up and down, glutamate is following.

So it's beyond just GABA. It's like too much glutamate, not enough glutamate too much. And it's that imbalance that can can cause glutamate, too, to really cause the anxiety beyond the loss of GABA.

So, you know what else plays in that cycle? Glucose. Glucose oh helps feed into that whole cycle. And, and Dr. Mascagni talked about this years ago. This is how I first found her.

She was like, Hmm. As women go into perimenopause, they can't utilize glucose in their brain as well as somebody else. They can't pull it in as well as.

Right. You know, men are recycling women. And so they don't get that because you can make GABA from glutamate, believe it or not. And so you can't even get the cycle in the whole first place.

So your Gabbert and glutamate are completely out of whack and as a result your brain is out of whack. In some way you feel either moody or memory or what have you and that glucose utilization, that decrease in glucose utilization.

Now imagine the person who has managed to maybe they they have coping skills for their hangry ness. Right? They're like they're going to be hangry if you don't they don't eat enough.

They're moody, they're irritable, they're tired or whatever, or their blood sugars flipping back and forth. But they've got coping skills and they're still kind of cycling because they're in their late thirties, early forties, and it's fine and then it's not buying anymore.

Right now you're running exactly what happens are worse or up, down like a roller coaster that you can't control or completely gone because you're not menopausal and you haven't changed or addressed the hyper or hypoglycemia, blood sugar issues and you don't have the insulin like you used to because you lost your hormones, the sensitivity, the response, and it just becomes this vicious circle.

Yeah, right. And this is the thing. So this is what I what I, you know, to really kind of sum up again, everything that we're talking about is that I think we should look at, okay, what is our exhaustion?

A source of hormones is going to be is it going to be HRT? Is it going to be bioidentical? Do you still feel like a urine test, a 24 hour urine test or the the way the Dutch does it is the best as opposed to blood.

So I think so. I like both. I love a 24 hour or a Dutch test, which is dry urine so you can get those metabolites you mentioned earlier, you've got estrogen.

Where is it going? I want to see where it's going. So I want to reduce risk if I can. But for some women, they haven't had their hormones tested in forever.

Right? Like ever and ever or budget or their primary care is not going to do a Dutch or 24 hour.

Lifestyle, Gut Health, and Neurotransmitter Support

So you're going to start with bloodwork. It is harder, of course, to do hormone testing of estrogen and progesterone in the perimenopausal woman who is all over the place.

You can absolutely test your other hormones cortisol, DHEA, testosterone, thyroid, all vitamins, minerals, what have. You can still test those, but just know when you're kind of all over the board in perimenopause, those two two key hormones, estrogens and progesterone.

Yeah, they're going to be wonky because that's what's exactly wonky is what's happening in your body at that moment. But if you're consistent, if you're like, well, I still get a period, can I trust my hormones? You can.

And if you're like, Well, I'm menopausal, I'm like, Mindy, I'm seven months, I'm so close or I'm fully 13 months plus. Yeah, go ahead. Go ahead and tell you.

Yeah, yeah. You know. You can you just. You know, so I just recently did blood for the first time. I'm a big fan of the

Dutch tested. You know, I like those break I love all the things that it tells me.

But I decided, okay, I'm just going to go do blood. Because we were trying to figure out where my bioidentical fit in. And I go. I go into the depressing lab and the woman, like, looks at it and she goes, Do you have insurance?

And I'm like, No, I don't have insurance. Like, you know, like I'm I'm going to pay for this for cash. And she look like she looks at me like, well, I mean, I have Kaiser is what I have.

Yeah. They're not going to pay for this. Right. So she looks at me and she's like, Oh, this is going to be expensive. And I looked across at her and I wanted to grab her.

And I want to say, do you know what's expensive? Me going into a massive menopausal rage and right now, my husband, that's going to be more expensive.

So just get me the down blood type. Yes. He's like, oh, sorry. I was a total. Better puzzle woman. I'm like, moment. I was like, Just get me back there.

I want I want to do the blood test. Yeah. But then it came back and we were really able to kind of go, okay, hey, this is estrogens kind of hang where we need her to hang.

Progesterone is really low. We were able to customize that. So, so I think if we're going to go that route, looking at both of those options and then working with a practitioner that can do that.

Anything else you would say on that before I move to lifestyle, in summary? Yeah. Well, the one thing the only thing I would add to that, I agree with everything you said 100%, but I will say that some people get really hung up on the supplement part.

You know, they'll be like, oh, I read I saw I heard that this one supplement helps estrogen detoxification. And, you know, is that going to cure all my ills?

Or I heard this three day fast will help with estrogen detoxification. I just want to remind people that your detoxification, all of it is a 24 seven 365 job like it didn't stop for Christmas, Hanukkah, Easter Sunday, your birthday, my birthday.

Nobody's birth like it always happens. So when you were making those daily choices what you eat, what you drink, what you're around, what you put on your skin, which wash clothes in all the things which you garden with, like those things make an impact on detoxification.

So here, try if you're scared of estrogen, know that there's a lot of things you can do in your life to be proactive, right? Help your body, sweep it out better.

So, yes, even if you're like I can I can only afford bloodwork or my doctor really only run bloodwork. It's totally cool. So cool because it's, you know, now every day what choices you make negatively or positively impact that.

And you can make a lot of changes. Great. Okay, then let's go to lifestyle. So with lifestyle, you know, we've talked about eating the right fats, upping your your greens, upping your protein, looking at some of the supplements you can add in like you might need more B6.

Definitely you're going to need more magnesium. We're just telling you that right now. Anything else you want to manage stress a little bit better. You want to look for some new things, including new foods and new new things.

Don't look for new spouses. That might not be that might that that might be a little more stressful. Anything else lifestyle that we're missing that people should know.

You know it's it's all for the fun things that aren't actually be that fun for your body. So alcohol is a big one which

we've mentioned a couple of times.

I think everybody knows that when you drink alcohol, even though it's very socially accepted and it's you might be thinking yourself, well, Mini just said find things that help you be less stress and wine helps me be less stressed.

It is absolutely impacting the way that your your liver, your gallbladder and your intestines are working. Right. So be very mindful of your alcohol intake and just really be mindful of everything.

Like what medications are you doing on the regular what over-the-counter medications are you popping on the regular thinking it's totally okay because it's over-the-counter, but it may not be.

We we've talked about the chemical aspects and so those are probably my the biggest my my big ones. And then a of people we mention scrolling and in scrolling, we tend to do it at night.

Right. And so we are in bed on our phone, which is a blue light emanating at us, or we're watching Netflix late or on a computer or iPad or something, and we're screwing up our circadian rhythms.

And circadian rhythms get more. They're not as robust as they were when we were younger, just like everything else. So it is important to follow the light.

It is important to, you know, be up with the sun and the sleep and darkness. And again, I fully understand it's not sexy, it's not a pill. Yeah. People are like, go buy a sleep mask.

I'm like, Well, you can get a cute one, you know, like, yes, I'm. Oh, I have a sleep max mask, a weighted blanket, a gel pad. I got plugs in my ears and I now have my sleep dialed in.

I the sleep mask I just added in and it. It's, it rocks. It's really great travel with mine used to make fun of them and I don't make fun of them anymore.

Mine's this, like, very unsexy, massive, great thing that comes around in it. Like cups. Yeah, I love it. I sleep on headphones because only because I train myself to sleep and had found it only like from.

I travel a lot for what I luxury and stuff I do. So I'm always used to headphones on planes. So instead of earplugs I just sleep on headphones and people freak out, you know?

They're always like, Oh my, have a Bluetooth. I'm like, Actually, don't turn it on. I don't I don't need that. I don't need the noise canceling part. The actual headphone enough is enough for me to like, think I'm in a vacuum of sound. And so again, I get it.

It's not a pill and it's not sexy, but it makes a world of difference. These little bitty nuances of, you know, darkness at night, stop scrolling unless you're watching this right now at night.

That's okay. Sleep. Don't scroll just like you. Just listen. Yeah. Wear your blue light blocking glasses, use a sleep mat. It is these little, you know, these nuance things.

Do really help. And we used to get away with everything. We were younger and dang it, we just can't get away. What's got to change? Yeah, it's got to change.

And then the last thing I forgot about is when you be mindful of what you're like, what you're drinking from a like, what is your coffee drink? You know, like, did you you always treat yourself with a heavy caramel full of whip you know, type of with sugary.

The. Super sugary. Yeah. But even like your kombucha drinks like even some of these, quote, health drinks and smoothies, when you actually turn over the label, you're like, holy crap, there's 40 grams of sugar in here.

And this is three and I didn't know that. Yeah. And just be mindful of that because again, you could probably get away with it when you were younger and now your hormones are shifting in your blood.

Sugar insulin are shift like everything shifting and that's not going to shift with it. I'm doing less and less caffeine because I find that it makes me more and more anxious.

Yeah, and so that's a new thing. And I think that's the the gist of the whole conversation is as you go through the your forties, you got your got to get to know yourself in a whole new way and you got to be willing to kind of work with lifestyle and supplements and all these little hacks we're talking about.

So yeah, this is why it's so hard. But what I, what I feel like is it's conversations like this that just at least start it so we can talk about it. Yeah, I call it like a cultural hush.

It seems like we like, like my favorite thing to do. Like when I stand up at a conference is to just shout out, like, all the madness of the menopausal body.

Like, like, if it's hot in the room, I'm like, Excuse me, I got a menopausal woman up here. Like, Can we turn the heat down? Or, you know, if you get a little A. D. D., it's like, hey, chill out.

It's, you know, I'm a menopausal woman up here giving this presentation, but I feel like if we could do that in joke and, and, and and just talk to each other about all these things, like you probably learned about 15 things you aren't doing in this conversation.

If we carry that forward and we talk to other women about it, we, we allow ourselves to be human in this experience. That's how we'll heal. But up until now, it's been very, very quiet and menopausal women have been pushed aside.

That's the truth. And everybody wants to go back, right? Carrie, Mindy. I just want to be the reason I was like, oh, you have, you know, 25, 30, 40 more years.

Let's be the new you, let's be the butterfly. So what habits are you going to let go of and what habits are you going to replace and how are you going to view the new you?

This is this is butterfly 2.0. Let's do it. Oh, my God. I love that. That was a bike drop. Okay. Had people find you because if you guys are listening to Carrie and you're like, wow, I have a lot to learn.

You got to follow. Yo, I love your education. Where's the best place now? I don't even know I follow you on Instagram. Yeah, I think. I think I sent everybody to your Instagram.

I'm pretty sure I built your Instagram. Yeah, I. Well, I single handedly, I guess over the years, Mindy and I've been friends a long time, everyone. So we have a lot of beautiful energy.

But she's in her fifties. I'm in my forties, so. Yeah, I haven't experience on us, but Instagram's a great one. I'm @dr.carriejones. My website is drcarriejones drcarriejones.com And then I actually do have I have a hormones 1a1 e-book for people if they want.

So I am the chief medical officer of a company called Nuethix And so it's Nuethix.com/ flag that's like a girl. So it's flag. Like, I'm like, oh, I can't do this.

Yes, hashtag. You are backslash. Right? So slash flag. So Nuethix.com/flag com slash flag and you will get it's free. Totally free. It's just the hormones one on one.

What are all these hormones which I mean if you've never heard of GABA or estrogen and progesterone, you didn't really quite know how that was related.

This is this is new for you in this summit. I just want to give you a couple of pages on what does this mean? Just the basics. Amazing. Amazing. So we'll leave links for that, because I assume if you listen this far, you're a menopausal woman, so you may have not.

So, you know, we'll leave links for all that. But Carrie, I just yeah, I literally could, like, sit here for hours talking to you, but thank you for everything you're doing for the world as far as really helping hormone literacy, because we are all illiterate and we're suffering at the hands of it.

So I just so happy you're back in the education world. I mean, I'm sorry that the Met the functional testing world last year, but I think this is where you shine and the world needs you there, so.

Oh, well, thank you. I really appreciate you. Super honored to be part of this summit and be here with you. So thank you. Thank you.