Optimize Hormones With The Keto Green Diet For PCOS Transcript

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Introduction and Guest Welcome

Welcome to this episode of the PCOS SOS Summit. I'm your host, Dr. Felice Gersh. With me now and we've just been chatting up a storm is a dear friend of mine and quite famous.

I think you'll really love her interview. Dr. Anna Cabeca, also known as the Girlfriend Doctor. She has amazing credentials. Triple Board certified in all began in integrative medicine and in anti-aging and regenerative medicine.

She has a great skill set dealing with hormones and diet and lifestyle to help women of all ages to optimize their health. So welcome, Girlfriend Doctor.

Anna thank you so much for joining me. I'm so excited that you could take time out from your busy schedule to help all of our viewers to optimize their life as PCOS women.

I am so glad to be here, Felice, because I know our conversation is going to hit the hearts of many people and there's just so much that we can touch on here and yeah, I'm looking forward to this conversation.

And plus, I love how you're like, I know you're going to love this interview. And we we haven't even started yet. So I love your faith in me. Well, we just were chatting, so you know for sure.

Well, first, I'd like you to tell everyone a little bit about your personal journey. We've talked about it a little in the past and it's really quite an amazing one.

So maybe share a little bit about yourself. Yeah. Thank you. I you know, I always knew I wanted to be a physician and taking care of women and women's health really hit my heart when my mom had her own medical struggles.

And, you know, really, really suffered. And I was in residency when she passed away during a second heart surgery, and she was only 67. She was on 11 medications at that time, and no two of which had ever been studied together, let alone in a post-menopausal woman.

And I kept thinking, what else could we have done? Where did we go wrong? How could this have happened? And I you know, I don't want anyone to suffer this way, let alone let my trajectory follow the same path that she went down.

So that really led me to dig in to understanding root cause medicine. And I really trying to figure out what was the reason that caused all her symptoms to begin with.

Anna Cabeca's Personal Health Journey

And and then I had my own health journey during the middle of that, my own crisis, my early menopause at 39 infertility diagnosis then failed round after round after round of the highest injectable fertility meds and then was diagnosed with early menopause and was told that my only option may be we don't think it's going to work where we could try egg donation.

And as a 39 year old, faced with that and so much stress and grief and compounded by that diagnosis as well as a personal tragedy, I took a sabbatical from my medical practice and another doctor, another began. Dr.

Deborah Shepherd came and took over my practice, and she was a godsend. God answered my prayers and and through a journey around the world, a healing journey.

Because I always joke, I say, you know, that Buddhist saying that says everywhere you go, there you are. And you

heard that saying. I have it's quite true.

It's quite true. I always joke that I went around the world to learn that everywhere you go, there you are. But as a result of that journey and meeting serendipitously amazing healers, from indigenous healers to some of the world's leading intellectual minds of there and of medicine and science, my early menopause reversed naturally.

And then I naturally conceived my daughter, who the child I was told I would never be able to have. And at 41, I gave birth to this beautiful baby girl.

And so that put a whole nother framework of a and this was in 2006 where I was diagnosed in 2008, where I got pregnant and I got pregnant, delivered her.

So it was a whole nother awareness to our medical, you know, approach to taking care of patients. And it's really important that we understand our diagnosis is not our destiny.

Our diagnose, this is not our destiny. We can can reverse some of the most heinous diagnoses that I've seen. And I believe in miracles. And I would say Ava Marie's a miracle and I've seen many more since and and empowered other women to do the same thing through, you know, sadly, through things I don't need to do as a physician, through diet and lifestyle changes and natural interventions for the most part.

So well, it's really an amazing story. It makes me want to turn it into a movie, you know, it's like and with the happy ending, it's, it's sometimes real life is better than, you know, fiction, as they say, too.

And I'm going to give you actually a real patient's story now. And this will help everyone out there, I'm sure, at least pieces of it you'll identify with.

And then we'll see what we can come up with to like how would we approach this patient so I'm going to give her the name Laurie. That's that part is fictitious and she's 25.

She recently finished a graduate school program and she's really excited to go out there and enter the world of business because that's what she wants to do.

And she finally got an interview with a firm that she was really hoping to work with. And she wakes up that morning and she goes into the bathroom and has diarrhea.

She has abdominal pain. She then looks in the mirror and another couple of crops of deep cystic pimple acne has appeared on her chin. It's like bumps and they're really painful.

And she finally, she takes her shower and she runs her shampoo and her hands through her her hair. And it's like there's so little of it, you know, it's, like, so discouraging.

But then she goes to get dressed, and she had gotten this beautiful outfit just for this interview. And she cannot get the zipper closed. I mean, it just so she ends up putting on her old stretchy, elastic waist pants and like a loose over top and she's already feeling like I'm a loser.

This she's thinking my destiny is to be a loser. So, you know, she does the best she can. She puts on some makeup and she goes and has her job interview and she doesn't get it like she did correctly at attribute her feelings to her destiny at that moment.

And then her mom, who was a patient of mine, brought her in to me. And so now we're beginning. Okay, so let's say they brought her in to you. Okay. So here you have Laurie.

She is overweight, by the way, I didn't mention this, but on that same morning of her interview, when she went to the bathroom and had diarrhea, she was also bleeding.

And it was the first so-called period she'd had in three and a half months. So she is about 35 pounds above an optimal weight and unable to lose any of it, even though she's gone on various diets, all kinds of diets, whatever she sees, like the grapefruit juice diet, the celery juice diet, like whatever.

She just tries it and maybe loses a pound or two and then it just fails and she just can't stick with anything. But she tries it for a week or two. She has very irregular cycles.

She has thin hair, androgenic alopecia. She has really difficult to treat cystic acne. She has irritable bowel syndrome, usually with her component is diarrhea, but sometimes it's constipation.

And she feels really down most of the time, low self-esteem. So what are we going to do for Laurie? I mean, she's not unusual in the PCOS world. Not at all.

Not at all, no. And thank you for bringing me this patient, Dr. Gersh. I am very happy to consult here. So the first thing when I see a patient like Laurie or for Laurie is this tell her, you know, likely I mean, this is, you know, first and foremost, I say you don't have fat genes.

You don't have acne genes. What you have are survivor genes, Amazonian genes like Amazon Princess Genetics. I mean, that's what you have. And so when we are and what she's doing so a classic PCOS presentation irregular menstrual cycles acne it's I'm irritable bowel going on contributed to or worsened by a stressful state so you're in this high cortisol high insulin state which is also converting that great, you know, warrior testosterone into the more androgenic the more potent testosterone dihydrotestosterone causing the hair thinning and the cystic acne and and some of the weight gain, the mass buildup, the benefits are like.

So you can't get the genes at that, you know, as the negative side in our modern American lifestyle, that in our modern American diet, the sad diet we are experiencing, the weight gain, weight loss resistance, the acne, the hair loss and the bloating that that's contributing to this.

And then, you know, like, what image does that give you? Your genes are working against your environment instead of with it. So the contrary is the good thing is when we there are some things we can do to modify our genes, but we can definitely modify our lifestyle in our environment.

So to know first how powerful she is because she's got these amazing warrior genetics.

Laurie's PCOS Symptoms and Case Overview

And so she's very powerful in that way and that this makes her more able to build muscle, ideally more intelligent, more about endurance and strength, you know, character.

Like she has all these gift ings that we want to bring to the service and take away this negative self imagery as well as the negative consequences of the environment that she's been living in, stress, school, studying, you know, carbs, American diet, late night time eating and all these all these other things.

So for her, certainly I'm going to coach on Madden and talk about I always do a hormone questionnaire. It's in my first book, all the questionnaires in my first book, The Hormone Facts.

Do all those questionnaires draw some lab work and look at her labs, her thyroid, her sex hormones, and that includes dihydrotestosterone sex hormone binding globulin, which tends to be low in these patients because they have more free tests circulating testosterone.

So looking at these these factors and of course, vitamin D level because designed to be living outside in the sun and you ideally need elevated levels or optimal levels of vitamin D.

And so I would look at fasting, insulin and even a two hour glucose, two insulin challenge test, not just a glucose challenge test, but glucose to insulin to see how it is.

How does glucose and insulin look at time? Zero time, 30 minutes times, one hour times, 2 hours times, 3 hours, even. So we can look at these things again, not just a glucose, but insulin, too.

And that gives her, you know, the understanding that, you know, what's happening to her body. And then we would start immediately. For me, it's the keto green lifestyle, so it's intermittent fasting at least 13 to 16 hours between dinner, eating before 7 p.m.

and breaking fast around 10 a.m.. Ideally, then, you know, one or two, you know, two meals a day, essentially one or two more meals a day after you break fast around 10 a.m.

or so. And that should be keto green. So no more snacking, no more late night eating or drinking and making sure getting enough of the good greens and fiber rich foods that help feed healthy gut bacteria for hormone detoxification so that cruciferous vegetables, the broccoli sprouts, the kimchi, the sauerkraut, making sure that we're adding those into her diet, too, and taking away dairy and grains, because when we're insulin resistance that can dairy can definitely affect acne and it's additional hormones we don't need.

And the grains, of course, increase our increased carbs and increase inflammation. So we want to reduce inflammation, optimize, create until, you know, optimize glucose, create insulin sensitivity and and and then I would put her on a detoxification program like in my book, The Hormone Fix the start with the ten day to Green Detox and supplement with additional adaptogens and detox the fires to help clean up her receptor sites so her body's able to process and detoxify her hormones in a healthier way.

So when I see a patient who has classic PCOS, I always first and foremost want to instill in them that they have these amazing survival genes, that they are designed to be leaders and like and strong and use their muscles and use their brain to, you know, the survival of our species.

And instead of often how we can look at ourselves and say, I have these fat genes, you know, these in fertility genes, these acne genes. Well, I love helping to build the self self-esteem, as you talked about, that you can turn it on its head.

Right. The genes that created the best of everything and survival a few thousand years ago in our current environment with our current diet and lifestyle have been turned like inside out in terms of now creating more tendency towards weight gain and infertility and so forth.

And you talked about Quito Green, so let's do a deep dove into what that means because like my patient Laurie, she was trying to do the right thing. She would like listen to, you know, Instagram influencers and such, and they would promote some diet over a different diet and so on.

And even when people are trying to do the right thing, sometimes they don't, you know, because they get wrong information from what they thought was a trusted but maybe wasn't such a trusted source.

So tell us about your particular take on the Keto Green Diet. I think you named it that. So like explain what it is and how that can help in more detail.

Women with PCOS. Yes, yeah. Happy to. And I think there is there's you know, you hear keto keto diets, there's a very you know, you think when you are we've been trained to think when we hear keto it's the butter and bacon diet, you know.

I mean I go terribly unhealthier, you know, the burger patty diet, you know, and, and guys can get away with that. Guys have ten times as much testosterone and they're pretty good at getting that.

But what are we tell Lorri, first of all, often because she's coming at a state of physiologic disadvantage, because her body is insulin resistant and is likely left and resistant to meaning hungry all the time.

Cravings all the time. Willpower is physiologic first and foremost. So when we get into a state, when we condition it

takes some time. It's like, you know, you don't just go and run a marathon, right?

You train for it. The same is true with Keto Green approach you. We want to train for it and we want to work ourselves into an intermittent fasting interval of 13 to 16 hours.

That is so freeing. Worker and our PCOS there's work ourselves into a two mile a day lifestyle. It is so freeing but we know are you know, we have to do it slowly.

And the big thing is because when we get into ketosis, when we're eating more healthy fats and high quality protein and we've got that fiber on board from the greens, the alkaline eyes and greens, then we're not hungry, we're not hungry.

PCOS Root Causes and Lab Evaluation

We run a stable blood sugar so we're not getting the ups and downs and blood sugar swings that make us crave food, and especially if we eliminate the grains and eliminate the dairy or if there's any other food sensitivity in there, eliminate that the cravings will go away.

And honestly, it's like usually within within a few days. Within a few days. So you think, okay, if I have the genetics to be an endurance, whatever, I can make it through these cravings for three or four days, but the way to conquer that initially too, when you're having that willpower issues, is often times it's to add the mineral salts and to add, you know, the fat to our tea or coffee in the morning like MCT oil in the morning or and purified ghee to blend that in.

So we're getting that healthy fat that will help stabilize our hunger, stabilize our blood sugar so we don't have those cravings. So then we can intermittent fast, longer, add the minerals to our water in between our meals so our bodies more satiated and also more alkaline, also feeling nourished and hydrated because when we get into ketosis, we can dehydrate very quickly, more fasting, we dehydrate very quickly.

So again, making sure that we are well, well hydrated and that will make a difference too. But if we've been fatty acid deficient for a long time, if we've been eating that oatmeal breakfast bagel or bagel and lox breakfast and, you know, sandwich for lunch and bread with dinner, then what what I usually have my patients do is it's my quick craving cure.

Felice And so it sounds terrible what it is, but I make my clients fast for 15 hours, like they've got these craving, like Dr. Anna I still crave food so fast for 15 hours, then drink four ounces of, like, Nordic naturals, cod liver oil or sorry.

Yeah, Nordic naturals. Cod liver oil. The orange or lemon flavor put it in the fridge overnight. Then, you know, you can squirt some lemon in there. It cuts a, you know, fat a little bit and adds more lemon.

So it makes it more palatable and just just chug it down. I mean, if you've ever had to chug anything down, just chug that down. Wait an hour and then eat a green leafy salad with some olive oil and vinegar on it.

And let me tell you, because your body is not craving the sugar, not craving the carbs, it's really craving the fat, the fatty acid. So you've given your body this dosage of fatty acids?

I have I have a video on this. It's my carb craving cure. But you just drink that. And honest to God, your cravings are, you know, squelch. They're gone and that makes a difference.

Then follow that this keto green lifestyle so a day and we have a kino calculator so you can kind of customize for yourself. What a day being keto green looks like for you.

My books do a good job of it to but in general like say for example we break fast with a keto green breakfast that looks like, say, a smoked salmon with capers, some red onions on a bed of arugula drizzled with olive oil, perfectly keto green.

You can make a keto green smoothie. You're adding protein shake. Look for ones that are like my keto green protein shake, which has zero grams of sugar.

Zero grams of sugar is really important and low inflammatory and good nutrients in it because you don't want anything that spikes your blood sugar in the morning.

You're going to be behind all day as far as you'll be craving your blood sugar will be on stable. And so the first meal of your day is really the most important meal to set that blood sugar stability sets you up for success.

So that's how we typically start the day. Well, that sounds like a delicious breakfast to me. I always talk about what I labeled the breakfast salad, and that's kind of what you created there with the arugula.

And I happen to love a I like that little bite. So I think that's such an important message that I think out of the box, I forget those conventional breakfast foods, right?

You know, like what's wrong with having breakfast salad and then putting these really amazingly healthy foods into it? But I want to get back to the word green, because does green just mean plants or the color green?

And what about other colored vegetables and what about fruit? You know, so I want to get a little more the nitty gritty here. Yeah. So for Green, initially I called it the keto alkaline Plan because but not many people understood what alkaline meant.

And so I'll talk about that. So the green part really means alkaline, nicer, so low glycemic fruits, the cruciferous vegetables, all your vegetables and minerals and sprouted foods are so good and and so like, you know, the broccoli sprouts, their cauliflower, the cabbage and the broccoli that, you know, I mean, these are the kale.

Oh, my gosh. These are so good for giving your body. I mean, they're rich in minerals, grains and and antioxidants that help your body detox your hormones, especially estrogen, to excess estrogens.

So we want those on board. The key component here is that they're helping to their alkaline ices in our diet. So they're helping to balance. Now, I'm not talking about our blood page.

Our blood page is very, very stable. Our body will rob Peter will steal from the bone and muscle to keep that blood stable. But at a cellular level, on a physiologic level, we do we get acid shifts and alkaline shift in an easy measure.

And this is something I have all my patients measure is their urine page. I have them measure urine ketones and on my strips I added uric acid because extended fasters are going to build more, more uric acid.

And those of us who have PCOS are more inclined to increase uric acid again because that's a survival. That's a survival mechanism to store food too, survive longer in the desert anyway.

So I have the measure back to the page and then measure their urine page because when it is acidic, their bodies then is going to be in a more inflamed state.

When it's alkaline, it's in a more rested, grounded state. And so it's not just the foods we eat, as I discovered when I when I started doing this way back in 2014 and what I call my second perimenopause, my second perimenopause journey, and I was gaining the weight without doing anything different.

And that was like the straw that broke the camel's back. But my memory was off. My mood was off. I mean, I was a wreck. I was I was stressed, depressed, and my hormones were a wreck.

Keto Green Lifestyle Basics

So I then went straight keto, but I was feeling very inflamed right away. I didn't like how I felt, checked my urine. I was as acidic as the urine paper read.

What did that mean? It meant I was peeing acid. For me, that was quite an eye opener because like, no wonder I'm not feeling good. Men have ten times as much testosterone.

They're going to stay in an anabolic state and not get into the catabolic state that women will get into. So I started adding all those grains and minerals and checking my urine every time I went to the bathroom, just figuring out what's working for me and what's not working for me.

And then I started doing my I recognized that the days I did my gratitude journaling or I went for a walk outside, my urine was more alkaline each day.

That was a huge aha moment for me because that made me realize that when we are stressed, cortisol is the most acidifying hormone. So when we start our day with that cup of coffee be gone, you know, hitting the ground and we're off running.

We're in a high cortisol state with the best green smoothie. You're going to be in that high acidic state. But if you start the day with gratitude, practice, with journaling, with a positive mindset, with a smile, you know, and then hit the ground running, we start that day that way and do a meditation and your physiology is going to prove cortisol goes down and oxytocin goes up.

In contrast to cortisol, oxytocin is the most outgoing, amazing hormone in your body. So in that case, you know, and you can measure you can measure what's happening in your cortisol increases hydrogen ion secretion across the renal tubules, creating that acidic urine and acidic urine for a long time.

Urinary incontinence issues, bladder, irritability, urging continence issues, interstitial cystitis in the long haul and etc., etc. So so that's it. But it's an important way to measure.

And for me that was just so eye opening in the discovery of what's working for me and what's working against me. Same thing I can be eating as Quito Green, but dairy is a food sensitivity.

A little bit of parmesan got on my in my pesto and and eating out and and I was acidic and recognizing that food sensitivity created that inflammatory response.

So checking your urine page, that's the outlets where you want the to be seven or greater seven is neutral, but seven are greater in the page, is associated with better blood pressures, less heart disease, less cancer.

It's preventative against osteoporosis. Since all of these things are, you know, the page greater than seven is a favorable indicator. Well, that is such wonderful advice.

And I'm always talking to patients as well about trying to have a more alkaline approach to their diet, because that, like you mentioned, is very great for bone health.

It's great for everything. So, you know, I love this. And it let's talk a little bit more about some of the other foods that you haven't mentioned to see if that's part or not part of Akito Green diet, for example, nuts and seeds.

What what's your take on them? So I love nuts and seeds. I love nuts and seeds. If you don't have an autoimmune condition, if you have an autoimmune condition, I take out nuts and seeds.

So in my third book, Menopause, it's about magic happens in the positive in life. It's the five different diet plans that each has something. So in that case my category an extreme is very autoimmune.

It's more of a takes and dresses, some of the autoimmune inflammatory foods. So we avoid those the nuts and seeds and nightshades are part of that, that group.

But in general, I love nuts. I love nuts and seeds. I think we should do two Brazil nuts a day to get that good selenium for our thyroid and sleep and all that good stuff.

And how about root vegetables? What what do you think about them? You know, all the the underground vegetables. So, again, I do not like they're very few foods that are grown in nature that I think are taboo completely.

But in general, a little bit goes a long way. Root vegetables tend to be higher in in carbohydrates and have a higher glycemic load. Some of my favorites are sweet potatoes Mocha.

Mocha is one of my favorite superfoods and medicinal foods, and I use that in my formula memory marketplace for many reasons. But but sweet potatoes are good.

I like, you know, I mean all the different ones, but carrots in their beautiful rich colors and the variety and beets and they all have benefits. But again, we want to walk a little bit goes a long way.

A little bit goes a long way. And how about beans and lentils? What's what what role might they play in the Keto Green Diet? Well, again, like, they're very they are cultures that have thrived on these foods for many, many millennia.

And from the you know, my mom was from the Middle East. And so Hamas is a really like favorite. So chickpeas are one of our favorite foods and lentils.

Lentil soup is rich in protein. They have to be cooked. And traditionally, they you know, the lentils are cooked for a long, slow time and that breaks down the lectins.

So and we add cumin on to that to take away the gas that went, you know, beans can increase gas. So, you know, a a spice you can use to get rid of that.

The gas is is cumin, which is so interesting. But again, a little bit goes a long way, I would say maybe like, you know, you know, once every month, you know, very rarely will I have some beans or legume.

But, you know, yeah, once a week to once a month. I guess the real takeaway is that the foundational foods are the healthy fats and then all the vegetables, the greens, the organizers, and then everyone is unique.

So you can really make this the diet that suits you, right? So it's really not of greatly exclusive, restrictive diet at all. Not at all. And in my book, Many Pies, I talk about, you know, menopause around the world and and the different foods that cultures have evolved to and, you know, enjoy.

Alkaline Foods, Food Sensitivities, and Hydration

And some of the medicinal benefits of those foods. And I always think, you know, as physicians, as you and I are physicians sitting here, the traditional physicians prepared the food to the kings.

So like the position to the king way back to the Ottoman Empire, prepared their food. And this is something to remember. Food is medicine. And and it is the first medicine.

And it is the whole food, traditional food, what's grown locally, what's as fresh as we can get it. What's, you know, for us, when we're so removed from we're so industrially sized, what does even fresh food look like?

You know, when I do with my foundation that I created in honor of my son who passed away, it's a garib Evan's foundation. We did, you know, education to schools and and different things.

And one of the things I remember bringing in, like making a smoothie day for a second grade class, and I brought in mango and, you know, papaya and, you know, all different kinds of fruits, fresh foods, even raspberries, berries, you know, everything.

My daughter was, you know, used to all of this and not one knew what the mango was or, you know, the papaya or the raspberry. It was very interesting because we take it for granted what's fresh, what's common and for us versus

what's uncommon.

But looking at what does real food look like? And if it doesn't look like real food, we don't need to be eating habits processed, you know, I don't know, chemically treated all that other GMO stuff.

I just can't logically be be the best thing for us. And what happens if we if we go without it? Generally, we feel a heck of a lot better when we avoid the processed foods and the non-organic foods and the, you know, big mass produced chickens and things like that, because those are hormones and antibiotics that disrupt our own body's hormones and antibiotics.

But around the world, you know, they're they're cultures that are vegetarian. There are cultures that are, you know, predominately, you know, carnivore.

So it really does kind of go down to what is best for you at this time and why I wrote menopause is because when we get stuck in a certain way, like we're all kind of green and we're key catering for years, then when you're doing something so long, it can stop working.

So what do you need to shift? You need to you need to shift, you need to flex. You need to make a change in order to challenge your body again. So maybe then it's it's eliminating the the nuts and seeds and nightshades for a week or it's, you know, going carnivore for a week or it's going vegan for a week and or doing a cleanse for a week.

It can be or carving up for a week. My accolades. Sometimes I have to give them more of those root vegetables, more those carbs and and for a while to get them optimized.

So I think it definitely also comes in once we've cleaned up our diet as we reintroduce food. What yeah. How does that feel for us? Does our body like it or not like it.

And really being in tune when we clear off the brain far from the heart, you know, our high carb, high processed food and all the chemical that are attached to that, we clear our cognition, our intuition is even more potent.

Well, absolutely. And 100% women with PCOS do not thrive in a chemical world. And chemical food is not does not agree with them or anyone, but especially that group.

And you touched on another area I'd like to come back to, which is the topic of hydration, because I think that's so neglected. And you mentioned like minerals, maybe you could just talk a little bit about what are some good choices for hydration and what did you mean about minerals in the water?

Yeah, thank you. I like to qualify hydration because often what's happened in America, you get these big large drinks with your, you know, large soda with your meal or unlimited refills and things like that, though, you know, we should not be drinking with our meals.

First and foremost, we should not drink with our meals. So no more than four ounces. And that's just basic chemistry. If we have a piece of meat and we pour acid on it.

So you eat a piece of meat, you pour acid on is what your stomach is supposed to do that's going to dissolve that meat. But if you eat that meat, pour the acid, pour a whole glass of beer or a whole glass of water or soda on that, you're going to dilute that stomach acid and not break down that food.

You're not going to get the same the nutritious, the nutritional benefit from. And in fact, you're going to create a small intestinal bowel overgrowth of bacteria as you push food through, partially digested.

So I always tell clients, I want you to hydrate first thing in the morning when you get up a nice good room, temperature glass of water can put a little lemon juice in it if you want, but hydrate first thing when you get up and when you break, you know, and until you about 20 minutes before you eat and then begin an hour, 2 hours after you eat, you really want to give your body 2 hours to digest that meal.

And without diluting those stomach enzymes, in fact, adding additional digestive enzymes, because as we get older, our digestive enzymes deplete. But doing that alone has helped so many people with IBS and, you know, and constipation and all these other things. So that's with the hydration.

So in between, you know, in between your meals, not with your meals, no more than four ounces. And and to really pay attention to that, pay attention to chewing your foods.

So that's that you know, that saliva is, you know, is designed to be the first point of digestion for your food place. So you're not going to be thirsty if you're really chewing your food so so then with mineral salts in between to add those electrolytes in like magnesium, sodium, I mean, those are potassium, these great minerals to add.

And there are a few different ones that I like to add. There's biolight, there's Elementea and there's my favorite is by Emerson EcoLogic. It's the tri salts.

It's very flavorless. So it's, you know, there's no other chemicals or flavors or anything else in there. And that's a really pure form of salts.

Where to Learn More and Closing

But also you can just have like a glass of water, purified water, add in some Himalayan sea salt. I like to add a squirt of lemon or lime with that. I like it in sparkling water.

Stir that up and that's super hydrating. When you're hydrated again, your cravings will go away. So that's another thing. If you're experiencing cravings, drink some mineral salts with a nice tall glass of water in between your meals.

Well, that's great advice. I give it similarly because so many times people have cravings and they don't realize what they really do need is exactly what you described.

You know, some mineral based liquids to actually rehydrate using, you know, the salts that are so needed for the bodies for so many different purposes.

And so I just love that. Now everyone out there heard a little teeny bit about all the different books that you've written and all that you're doing. So everyone out there who's basically a Laurie look alike, you know, that story is not unique for women with PCOS and for all of you who can resonate with Laurie's story, who want to have the happy ending that we all want to have, and they want to take a lot of the control upon themselves.

You know, everyone needs doctors, everyone needs tests. Like you said, you can't do all this on your own. But there's a lot that you can take charge of on your own, like what you shop for, what you eat, and so on.

So how can they follow you? What? How can they obtain and, you know, purchase your books and learn more about these wonderful ideas that you promote to help women with PCOS and all their friends who don't have PCOS, perhaps to really optimize their health.

Now I think you definitely come to my website dranna.com I have thousands of articles that I've written on there and the products that I've created as well as programs to kind of take you through step by step.

So D R A N N A.com, dranna.com and on Social media @thegirlfrienddoctor. So, yeah, please come visit me there too. Well, that's great. Well, I know that I'm going to come visit tonight because I've read so many of the things that you've written, but I know there's more out there, and you and I have collaborated on various projects, and I cannot thank you enough for joining me.

And everyone out there really take advantage of everything that was just promoted here, you know, offered to you because there's so much information that you can utilize yourself to improve your own health status.

So thank you again for joining me and for taking your time to share how to help Laurie.