Introduction and Guest Background

Welcome back to the reversing mast cell activation and histamine intolerance summit. I'm your host, Beth O'Hara of Mast cell 360. And I have with us today a really special guest.

Not only my dear friend and colleague Magdalena was a Lockey, but also the founder of Hormones Balance community and Willian of Products. These are supplements made by women for women.

And I want to tell you a little bit about her. And then we're going to be talking about a really important area estrogen dominance. And I see that affecting so many people dealing with mast cell activation and particularly muscle toxins, because some of those are highly estrogenic.

I want to share a little bit more about Magdalena and then we'll bring her on. So her online platform and products are dedicated to helping women balance hormones naturally.

And Magdalena is a hormone nutrition expert, certified herbalist. And that's one of our favorite things to geek out on. Speaker, educator, and a published author with a long history of her own hormonal challenges, which included both Graves and Hashimoto's, two different types of thyroid autoimmune conditions as well as estrogen dominance.

But today, fortunately, she's in full remission, and while sailing through perimenopause, she teaches women how to make this so much easier for themselves.

Welcome, Magdalena. It's so good to have you with us. Thank you very much. And thank you for thinking of us. Hormones when it comes to histamine issues and mouse cell activation.

Absolutely. It's a big one. It's one that we look at for nearly all the women that come through our practice. And I know you have your own story. Can you share with with people in our community about just kind of what happened in your own health and how you got into this because you didn't start in the health field?

Yeah. So, you know, the thyroid wasn't as much of a choice. I mean, my thyroid just collapsed and I had to figure out what the heck is going on and how do I reverse it.

Right. So in my late 20s, I had I most likely had graves, I had hypothyroidism, I was put on beta blockers and was told that everything was going to be dandy.

Seven years later, I've got another autoimmune disease this time around, Hashimoto's. So graves makes you hyper thyroid. Hashimoto's makes you hypo, meaning it slows down the thyroid function.

And so, you know, I needed to figure out what what do I do to start feeling like myself again. And so that was the first, the first thing. And then as I got my thyroid on there and that autoimmune component actually, because the thyroid is really the secondary right to the I mean, disease is really treating immunity.

That's more important in the case of Hashimoto's or Graves disease. And when I got that on there, pretty good control. I still felt like my hormones were not very balanced.

And in my specific case, I still had hell, I was going out, you know, going on at the same time. My thyroid isn't it wasn't a really good place. My antibodies were very low.

So I was really puzzled of what was going on. And I was really lucky to find a physician who said, you know, let's test your, your estrogen and so metabolites of estrogen.

And she concluded, I had estrogen dominance. And, and that was causing my hair loss. And suddenly everything started making sense because then I realized, oh my gosh, not only have I had that my entire life.

Things like terrible PMS and you know, too, I mean, a lot of girls have, you know, PMS, right? But it's a different story when, you know, when you can't go to school for a day or two, when you are in fetal position at home, you know, with a hot water bottle and painkillers on your side of the bed and telling your parents you really got a terrible PMS and they don't know whether you're trying to skip school or like, are you truly, you know, haven't you are in terrible pain.

Later I started having things like thyroid nodules, which is also one of the symptoms of estrogen dominance. And the worst one was started finding lumps around my breast.

Estrogen Dominance Symptoms

And I think for any woman who finds a lump on her breast, it's one of the scariest moments, right? Because you just you, I mean, you just your whole world starts going wild.

Is a cancer. Feelings of fear and guilt and then confusion about how do you get it properly diagnosed. And, but beyond all of that, when I started looking at all my family issues, you know, I don't have an aunt who passes the age of 50 who would not have had a hysterectomy.

And so we have an appointment. History of, also of cancer, specifically uterine ovarian cancers and breast cancers and both sides of my family. And guess what?

Later when I did my genetic testing, turns out that my terrible estrogen metabolize, which explains why I'm much more predisposed towards estrogen dominance.

And both sides of my family have seen women dying of estrogen and cancers. And so, you know, so that's really what piqued my interest of, why are we really not, first of all, why is it so normal to have estrogen dominance?

Why are we not addressing that? And then also the realization, I remember, you know, reading the statistics that most of our most breast cancers in developed countries are due to estrogen, estrogen receptor positive or progesterone receptor positive.

And yet it's completely preventable. It's totally manageable. And yet we say we don't know the causes. And we kind of accept estrogen dominance in women, even pre-cancer to be normal.

And I thought it was a normal and that wasn't okay and there wasn't enough conversation around it. And so that's the reason why I really started pivoting and focusing my entire attention on estrogen dominance.

In my practice. And, you know, with the stuff that we do and unfortunately, you're doing so well today, I know that you're on this fun cross-country trip.

And I got to see you a few months ago. And, so I know you wanted to share why you're in your camper van here. I know. Well, I just wanted people to know.

People go like, what is this weird setup with these dogs in the background? Like, where is she? Sometimes when I get on the call, people go, like, is this a screensaver?

Or are you like on a flight or something? And, you know, like private jet, like, no, I'm not that level yet, but, yeah. So we met at the Botanical Medicine conference right in Asheville, outside of Asheville. In May.

So that was very fun. And I just decided that to drive there from Colorado. And then I'm just doing I'm going all the way up, you know, East Coast. And I'm in Vermont right now.

I'm going to see the change of seasons here, and then I'm going to be heading down back to Colorado. So it's a five month trip, you know, as an herbalist, too.

And, and I love botany. Colorado is somewhat limited because of the elevation we on a high desert. So the kind of botany that we get to see on the East Coast fascinates me.

So it's partly exploration, partly just my nomadic nature. And I'm living out of my camper van. I'm working out of my camper van. So yeah, it's been it's been great overall.

And I just love that your health is at a point now that you can do this big adventure and and, it's so inspiring, I think, to see people get their health back and then do these dream kind of things that they wanted to do for so long.

Well, I know we're going to dive more into estrogen dominance. Why don't we just I know a lot of you heard that phrase, but why don't we just start by defining it and then what are the symptoms that people should really be looking for?

And I know men can be estrogen dominant. Yeah. Yeah. Let's talk about that. So yeah so let's start off with symptoms. So estrogen dominance can manifest in the most common ways for women who are still menstruating will be having terrible PMS is Pmdd, you know, having but also also some period irregularity.

So if you're talking about having too heavy of a period, having irregular periods, having having a lack of periods, having terribly painful periods, right.

That all can be all of that is, a lot of the time connected to estrogen dominance. Women with and do mattresses. However, endometriosis also has a inflammatory and autoimmune component to it. But estrogen?

Well guess what? Estrogen also fuels inflammation. You know, women having a lot of our breast health is correlated with levels of estrogen. So for example having cysts on the breast having five persisting breast having you know, some women get so enlarged and so painful, has such painful breasts that kind of been put on a bra or do any sports doing, when they're, when you're cycling.

And so before their periods, other things, you know, interestingly, like where we store fat in our body can be indicative of what kind of a hormonal imbalance we have.

So women who are typical pear shapes, and I'm certainly one of them, if I put on weight is all going to go with my butt in my thighs. And that's your typical estrogenic kind of a woman with a predisposition to be estrogen dominant.

We store a lot of fat in the thighs, butts and, you know, largely there, versus women who have more of a metabolic issues, right, with blood sugar imbalance or having too much succession.

All of that goes into their belly. So they are more of the apple type. And and that's important to know because, you know, a lot of times women hit up the gym like five, six days a week trying to lose that cellulite or fat around their ties and butts and is just not budging.

And that could be because you're just not resolving estrogen dominance as an underlying cause. You know, thyroid actually, a lot of different cancers are estrogenic.

So thyroid cancer is one in that category as well, but also thyroid nodules, which so many people experience. Also also grow due to estrogen as region is what fuels that growth.

You know, a little things like for example, water retention. So like, you know, you, you have a lot of water retention in your fingers, in your, in your, in your legs.

It's hard to put shoes back on. That can be also, you know, due to our student dominance, mood swings. I mean, that's one of the classical saying things.

Anything to do with mental, emotional health. And so, you know, how many women's relationships are on the line because of having hormonal issues and again, estrogen dominance, it can be fueling that.

And so here we're talking about things like, just super anger, you know, huge anger, huge mood swings. You just you're just not, you know, very well you're not the person who is sometimes showing up as, like, this demon that comes out right?

And it goes away, you know, women with anxiety. We're going to talk about different types of estrogen dominance in just a second. But one of them, the one that is the estrogen progesterone levels, are out of balance, will manifest in the form of like having so many sleeping problems.

You know, you've always been a really great sleeper and then suddenly you just can't sleep anymore. You can't sleep through the night, you can't fall asleep.

You you know, your brain is racing women who are suddenly having a lot of anxiety around things. You know that. And again, it could be due to histamine, right?

I'm going to talk about a histamine estrogen connection. But it goes I mean it can be definitely be fueled by estrogen dominance where you suddenly become like become this warrior as a not what, you know, worrying, but like worrying about things and everything is an issue and a problem.

Right? So you know, so those are those are some of the, I would say most common ones that a lot of. Oh, well, let me not forget fibroids. So speaking of uterine health right.

You know fibroids is one of the classical symptoms as well. And it's really is devastating because about there's about 250,000 surgeries every year where women are having surgery, a surgical procedure done, a full or partial hysterectomy due to fibroids, and most of them are completely preventable.

So that's a, you know, that's another, huge one for estrogen dominance, migraines. A lot of women experience migraines around their cycle. It's good to know whether, you know, the migraine is like showing up just any time because that could be more like food related or some nutrient deficiency related.

Or does it show up around your just before you get your period. Right. That could be that could be that, women who are in perimenopause and are experiencing mid-cycle spotting could be another symptom of, the type of estrogen dominance which is due to low progesterone.

So, you know, you suddenly have this brown discoloration on your panties in the middle of your cycle instead of ovulating. So that's another symptom to look out for, as you can see.

I mean, hair loss, what I mentioned about my stuff. Right.

Mast Cell Activation and Histamine Connection

And the cancer is let me just conclude by saying the estrogenic cancers are lung cancers in nonsmokers. I mentioned thyroid cancer, but also the classical ones will be estrogen receptor positive breast cancer, which is the majority of cancers in the United States.

Ovarian and uterine cancer is all fueled by, by estrogen. Lastly, you mentioned men and almost every woman. There is some combat in some form or another, you know, around us.

So interestingly, breast cancer in men that's actually on the rise. And men can also get breast cancer, because they do have breasts. And, and then prostate issues in men go to just an large prostate as well as prostate cancer, also fueled by estrogen.

So, as you can see, even as a woman, when you make certain changes to, to, you know, the products that you use

in the, in a house or, just how you eating that will not just help the woman in the family.

Right. But it also will effect the guy as well. And most men sleep also way better when they when they follow the protocol too. So yes, so many symptoms.

People don't normally think about that. You're talking about the hair loss, the the thyroid nodules and the thyroid issues, the thyroid cancers, all of these types of things.

So we know that estrogen can also trigger I want to bring it to our our specialty here which is the mast cell activation the histamine intolerance. Estrogen dominance is a really big deal in this population.

And so many women will get into think, oh well, I'm in menopause. I can't have estrogen dominance. Let's just talk briefly about that issue, specifically estrogen dominant and Marcel and histamine issues.

Yeah, yeah, sure. So they are in you know, in that in a sort of, unhealthy relationship, right, with each other. So what happens is muscle activation.

I'll put it this way. When there's, when there's acts as estrogen, we're going to talk later. How how that can happen. Right. And so high estrogen will, will basically, create muscle, no noise.

The muscle cells are is the muscle cells that that will release histamine. Histamine also stimulates ovaries to produce more estrogen. Right. But also when you're high in estrogen, you're also creating more, histamine.

And so, so there is this constant relationship with each other. And the question is chicken or egg, what do you fix first? And the cool thing about what you and I do is, is there's a lot of similarities in what we do.

And by addressing the muscle activation, you're also addressing estrogen dominance at the same time. So you don't really need to do too many things. You know, there are very different from each other, but it's good to know that which one will help. Yeah.

And really that that downward spiral that you're talking about where the mast cells have these estrogen receptors. So if we're estrogen dominant we only have to be a high estrogen.

We can just be estrogen dominance. Estrogen tends to be massive. Triggering progesterone from a lot of people is meso calming. Not everybody but a lot of people.

So we need that that healthy ratio. But when people are flipped, that's going to keep triggering those massage receptors and they're going to release that histamine.

And then they have over a thousand other inflammatory mediators they can release. And then that triggers this more estrogen and so on. But there are different types of estrogen and dominants.

Can we talk about that, how they show up and how people can have low estrogen and still have estrogen. Yeah, sure. So let's talk about the two. I just mean we want to continue to the two different types of estrogen dominance that I'm I think easiest to explain.

So the first one is we alluded to that the balance between estrogen and progesterone needs to be in check. Right. So think of it this way. It's a little bit like, you know, if you like to watch a dance competition.

Right. And and you see the woman being like super flamboyant and like super dress and the guy is like timid and kind of, you know, dressed down, it doesn't look good. Right?

And they're not going to they're not going to win any competition. They look unbalanced. And so estrogen and progesterone exactly like that. They have those two dance partners.

They have, you know, very different roles in the body. Just just as a quick example, it's a little bit like, you know, if you have the grass growing estrogen is what makes the grass grow.

And progesterone is the more that comes and cuts it. Right. So that's what happens in the in the meat trim. And that's why we get our periods right when the progesterone comes in helps to shed it.

So so they have a wonderful relationship with each other. But they have to be there. It has to be a balance between them. So that's the first thing that's going to happen.

And especially for women who are going into menopause and perimenopause, progesterone tends to drop a lot faster than estrogen does. And so that creates an imbalance between those two.

But you don't have to be in perimenopausal menopause to experience that. Even women who are, you know, still cycling, well will show signs of low progesterone.

The way that can happen is that, for example, stress is a huge, you know, is a huge cause for progesterone robbery. Right.

Types of Estrogen Dominance and Menopause

And so when you're, you know, you have a mother hormone called pregnant alone and pregnant is only so much your body is producing. And some of it goes to what's cortisol to help you manage the stress.

And some of it goes towards progesterone to make you fall asleep and get pregnant and you know, and be calm and sleep well. Right. Well guess what? In times of crisis, the body's going to just give everything there is the pregnant alone to cortisol in order to for you to survive and thrive.

And so, not even thrive just survive and get through the stress and so robbing you that way of progesterone. So progesterone deficiency is very common where estrogen deficiency the second type of estrogen dominance which is really important to understand is the way we break out.

Breakout estrogen is really, really key. So estrogen is not just one hormone. It's actually a whole composition of hormones. And what's more important is that in the liver and the gut, the estrogens get broken down to different metabolites.

So, you know, it's a little bit, let's use this analogy. You know, you're standing by I'm in Vermont right now is this is beautiful. Rivers and streams everywhere. Right.

So imagine you're standing by a river and this river is flowing and and it's kind of somewhat of a murky water. And there is a bank in the middle of the, of the riverbed.

And that that bank separates the water to a clean stream and a dirty stream. Right. And so in the human body, it's the liver that separates those clean estrogens to dirty estrogens.

So the term estrogen dominance a little bit unfortunate because we tend to demonize estrogens. A lot of women say, you know, I'm estrogen dominant. And so everything is you know, estrogen is a bad hormone.

Well, the truth is that you and I will not be here sitting and having a cohesive conversation, our brains working and, you know, our skin being, you know, the way it is, right?

And having cycles and all of that without having sufficient levels of estrogen. So we need estrogen. The question is how you break them down is important.

And so the health of the liver and the gut plays huge role in how does estrogens get broken down to metabolites. And what I just for simplicity I just call it a clean up estrogens which are beneficial helpful building versus the dirty

ass traditions that are pathogenic, that tend to be the contributing ones towards all the symptoms we talked about.

You know, the clean estrogens, for example. And now I'm going to be causing breast cancer, you know, is the dirty estrogens that are attaching themselves to cells and do DNA damage, right to, to to cells and cause perforation of of cancer cells.

So I just want to be clear on that. So those are the two types right. Estrogen progesterone balance is one issue. Second one is how you break down those estrogens.

Think about the river. It's the second issue. And so three types of estrogens I think you can go into that with this okay. Yeah sure. So so there is you know another way to measure.

And this was kind of started by the saliva testing companies. And this is, this is a good test to, to establish, through saliva testing. So a number of labs do that and where you can see three different types of estrogens.

Estrogen is is the E1 we call it estradiol, which is the more aggressive prevalent estrogen. It's not a bad estrogen is just we tend to have too much of it.

And then as trial, which is more protective highest in pregnant women, but can also be highly protective for women who are, you know, towards the later stages of life.

So there is a relationship, we call it the estrogen quote in, there is a relationship of the amounts of these estrogens that need to be in place in order for a person to be in a good balance.

And so that's another way of measuring it. I tend not to talk so much about it because you've got to have saliva testing done in order to establish that.

I'm a big fan of the first two that I mentioned, because they can be measured through early if you want to get it to, you know, maybe we can talk about lab testing later.

But yeah, there is there is different labs that can be ordered in order to establish that. So you mentioned that question. You know, something that, a lot of women wonder, hey, I'm in, I'm in menopause or I'm heading for perimenopause.

My estrogen is inevitably low. I can feel it, I know it. I shouldn't even be listening to this talk to this talk. Right? Because there's absolute dominance.

In fact, you know, my book Overcoming Estrogen Dominance, one of my colleagues had it on her on her desk, and her mom came visiting. And her mom is struggling with menopause.

She's struggling with estrogen dominance. She's just had a couple of fibroids removed. And this woman is like in her late 50s, early 60s. And she put she looked at the book and she put it down and and her daughter, my colleague says, mom, you should actually read this book.

This is going to help you a lot of your conditions. She goes, how so? I'm in menopause. I don't have any estrogen. Right. Observation, an assumption. But here's the thing.

First of all, a lot of women say I don't have any estrogen. That's that's incorrect. You would not function and you would not be sitting up straight listening to this talk to you.

If you had no estrogen, we'd have no estrogen. Estrogen? It basically declines. But, you know, going back to the different types of, of estrogens, think of it this way, right?

Like because we are estrogen starts dropping. However, our progesterone starts dropping even faster than that. So the relationship between the estrogen progesterone becomes or the imbalance between them becomes even more

profound and and prominent as we go older.

And this is especially for women 45 and above this is why progesterone starts dropping really quickly. So even though your estrogen in law is low and your progesterone is low, the ratio of those two, right?

It's still very unbalanced. The other really sorry about that, everyone. With Magdalena being on the road, she's having some unpredictable bandwidth, so we just turn the cameras off so we can get better audio for you.

And we really wanted to get this interview for you guys because it's so important. Magdalena, we were just in the middle of talking about how people can be estrogen dominant, even in menopause.

And you had a few thoughts to finish out there. Yeah. So absolutely. So that's a very common question. Right. Because you think like, well, I'm in menopause and my estrogen is taking a nosedive.

There's no way I'm going to be estrogen dominant. That doesn't relate to me. In fact, I had a I have a colleague whose mom picked up my book Overcoming Estrogen Dominance.

And she put it down and and my colleague says to her, no, mom, you should really read it. There's a lot of things in there. That's going to really help.

This book is going to help your your stuff, like your breast issues. And the mom says, no way. I'm in menopause. I don't have an estrogen dominance like I, you know, it's just didn't make any sense to her.

And that's plausible, right? Well, here's the deal. So let me just you remember how we talked about a different types of estrogen. So what is happening even though you're astringent and your progesterone levels are dropping, the three things that are can still be happening in spite of that.

One of them is that even though you have low estrogen and you have low progesterone because you're headed for perimenopause or any menopause post menopause, even the ratio between that progesterone and estrogen is still an issue, meaning that you, even though you have low estrogen, it's still too high compared to progesterone.

And one. But one easy way of fixing this is to, you know, basically get on bioidentical progesterone. The other way that can is still happen and it doesn't have to be one or the other.

By the way, both of them can be happening at the same time. Even though, again, your estrogen is low in menopause, the way you're metabolizing that estrogen.

And to clean and dirty passages that I talked about, it's still you still producing too many dirty estrogens. And that is very common because, you know, our liver plays such a huge role in metabolizing estrogens and breaking them down.

Right. And as we age, old liver is just not as efficient as it used to be. Think about it this way. Like in college, you know, for those of you who are just big partiers and drinkers, you will have three, four, maybe five tequilas and go to lectures the next morning.

Be okay. Try to do it now. You knew what was going to happen. Exactly right. And that's when you know a plausible explanation. Our liver is just not as efficient as it was in our 20s and 30s.

Triggers and Environmental Estrogens

And so really, and if we have that kind of estrogen dominance, then supporting our liver, which is always a great idea anyway, is going to correct estrogen dominance in women in perimenopause and menopause.

And last thing I just want to mention of those baths is this, you know, if you think about it, who are the demographic with the highest number of estrogen receptor positive breast cancers?

Women? 45, especially the 65 and above, is the highest demographic, right. These women, do these women have skyrocketing estrogens? No. Are they just on women who are on some bioidentical hormones?

Estrogen not necessarily. Right. So their estrogen levels are naturally going down yet they get estrogen receptor positive breast cancer. So you can see I think, you know, the breast cancer example just really illustrates how estrogen dominance can be not just present in women in menopause and perimenopause, but it can also be highly detrimental to us at that age too.

And this has been, you know, it's so important both to me and this community. This conversation about estrogen, estrogen dominance and cancer risk. And it's been one of the things, alongside dementia and early onset Alzheimer's or other neural inflammatory conditions, that I've been very on the watch out for myself and protective of because of the extreme amount of triggers that I have had my whole life.

And, one of the most concerning to me is the mold toxin XL known, which has been linked with every kind of estrogen, positive cancer as well as endometriosis, PCOS and yes, it acts like an acid in the body.

Much, much stronger. Dozens of times stronger than E2 estrogen. What are some of the other most common triggers you see for estrogen dominance in people?

Yeah. So, you know, it's I think the easiest thing to do is to really, look at it internal to an external internal external factors. So external factors will be things like consumption of for example, conventional conventionally raised animals.

Right. So you know, those are cows basically that there's meat that's coming from animals has been treated in horrific ways. That that kind of, you know, if you talk about that meat being inflammatory, that's a kind of meat that it's inflammatory.

Yeah. So switching to, you know, switching to like, truly grass fed grass finished, kind of meat reducing meat first of all. And then also, you know, and just getting it from really responsible sources so it doesn't break your bank, is one easy way of, of doing that.

Dairy is a huge source of, of, of estrogens as well. You know, anything that I hear that term conventionally raised, vegetables and, you know, and, and food because there's nothing conventional.

I mean, we made it conventional, but it's just why don't we just call it toxic? You know, there's some the pesticides, right, the right, finger sides and all of that is being used, for fertilizers that are being used in that kind of agriculture.

I mean, they're just screaming. And so again, simple conversion here will be, we'll be doing we'll be doing, you know, organic food as much as possible.

Right. And so, another thing to look at is skincare products. Yeah. Also by for your cleaning product in a house, right. Bathroom, toilet, kitchen, all of that.

And one of the, you know, I mean, there's in my books that I, you know, I detail out all the different chemicals that are found in, you know, these, these kind of products.

But here's the thing, right. Like, you just going to drive yourself crazy looking, going to looking at every single product and trying to analyze the labels.

You know, we don't want that, right? Especially, you know, I was like, I think we have enough, you know, issues with our daily lives. And so how much more do you want to micromanage your life?

But here is my shortcut to all of this, right? Is that just don't buy mainstream brands. When I see mainstream brands like stuff that you see advertised on television, glossy magazines, all these, you know, big brands.

That, that you, you know, we all know just stay away from that stuff. Now other all the organic brands are safe. Not always. There's a lot of greenwashing in our industry.

So what I have personally found is either follow influencers online who you trust and then buy stuff from, you know, online. Or the other option is like, you know, when as I'm on the road, one of the things that I do is I just go to local food co-ops or local health food stores.

And the cool thing is that the buyers there, they have a social and community responsibility to providing the cleanest product possible. That's good for people, good for the earth, right?

Good for our water, for our soil. And so I have found that every time I go to a health food store, like I'm in Vermont right now. But as I was traveling, same thing in North Carolina and in all the different states, the cure rate is products for you, so you don't have to figure it out.

And be looking at every single you eat and, and drive yourself crazy. And by the way, those ingredients also keep changing. So, you know, it's just like you just like a it's like you're playing a cat and mouse game.

Yeah. See, I just mentioned you because I made a post about just recently, I was I watched, dark Water so that, you know, credible movie based on a true story of DuPont.

Right? You know, your kitchen utensils are, I mean, you're just your pots and pans, right? You know, can be a huge source of those what we call, you know, estrogens externally found estrogens in, in other nonstick pans.

And so throw away all the, you know, we don't have Teflon anymore, right? But we have all the PFOA and all that and all the nonstick stuff. You know, substitute that with just really clean options and, and not not those, green pans and caraway seeds and, you know, which basically they're using a different kind of a nonstick ingredients that is that they don't want to disclose and hide behind all sorts of legalities, of, of a secret formula.

But you really trying truly going back to what grandma's used to cook with. And that is cast iron, stainless steel. My personal favorite is carbon steel.

That's something that French restaurant, chefs are using. And you can once you season it, you can just Google it. How to season a pen like that. You do it seven, eight times and is ready to go.

I use only, cast. That is. Sorry. Carbon carbon pans in my kitchen, and they're completely nonstick. Now, once they are seasoned, you know, and also my other favorite for carbs is, is basically, so that's a frying pan, right?

The carbon steel. But the for parts, I would use things like, you know, meat from animal. Sorry. Coated in them. Also I like using a cast iron that's coated in enamel.

Novel is basically glass, right? So there's just, you know, simple things like that. So I would say those are like big, external sources that you can eliminate pretty quickly.

And this can be overwhelming. So one of the things that I suggest to do is like, make it a point that every three months you take care of a different part of the house, right?

You know, one month is going to be like the kitchen three months later, you say about money, just replace all your cleaning products and you just go buy stage so you don't have to do everything in one go.

So let's say that's like, that's a big, you know, part of, of what's going on in young women. We see estrogen dominance because of being on the pill. Right.

So that's, that's still says, synthetic estrogens, hugely problematic. So that's I mean, that's one big, big thing that, you know, what's is definitely recommended to get on birth control pills.

You know, if you talk about internally what's happening, right, we can be, you know, I can live. I'm a good example of that. Where I live, that kind of lifestyle where those external, as you know, estrogens are as limited as I possibly can, but I still tend to be estrogen dominant.

Right. Because that's just how genetically I am. And so so that's what's happening on the inside of your body is how you metabolize these estrogens. Right.

We talked about so that that river with a bank. Right. And that bank being your liver. So supporting the liver is just so, you know, hugely important and incorporating better herbs, better foods, doing castor oil packs, you know, doing, doing the full elimination diet where you just really get rid of all the inflammatory foods is going to support the liver in a huge way.

So, you know, that's really that's that's how we can support the body. And then lastly, you know, doing a bit of, just reducing stress and inflammation, which is so hugely inflammatory, is going to be helping us in a big way to, regain that balance between estrogen and progesterone.

Right. Which is one of the causes of estrogen dominance. So I know it sounds like it's a lot of stuff, but I also know that a lot of this stuff is what you teach as well in your approach.

Right. And so, you know, like what we said at the beginning, you don't have to be doing a lot of things for every single symptom you are experiencing is most likely when you implement the protocols that you teach, you know, you're probably going to cover most of mine with that as well.

When what I love about what you do is just like you're talking about here. You make it practical and you make it manageable and there's some of those things that you're talking about that support the liver and that estrogen goes down.

We have those phase one pathways, and then the phase two pathways, the same major pathways that detoxes small toxins.

Flaxseed, Liver Support, and Resources

And that's one of the triggers we talk about over and over, so that even things like dandelion root tea, I know we had so much fun at the rebel conference is learning about all these uses of dandelion.

And yeah, we're like, chew on it. Yeah. And, other things like xanthan. And I know you have some products for, for supporting these pathways as well. And then to wrap up, Magdalena, there's a question that I know I hear a lot.

I know you hear a whole lot about flax seed, and it's okay for women with estrogen dominance. Yes. And the answer is a resounding yes. So the reason why, in case people are wondering why is it potentially an issue?

So, you know, flax seeds contains natural occurring estrogens, right? We call the phytoestrogens. They're very delicate, very gentle estrogens. And remember, like we said at the beginning, estrogen is not a bad hormone.

And so flaxseed doesn't hurt anybody. The the the issue with it is that the reason why it's so beneficial is that, number one, let's just face the fact that it is just an incredible source of fiber, both soluble in soluble fiber.

Right. And is going to help you move your bowels, which, by the way, constipation is one of the big leading causes of for mono problems and including estrogen dominance because you're recycling the same estrogens instead of pooping them out.

Everything reenters your body weight. So flaxseed is going to as fiber is going to help you regain the bowel movement again. But the second thing is, you know, I don't I, I this is solely my own term.

But I like to see flaxseed, as I call it, the, you know, a real, adaptogen and estrogenic adoption that adaptogen

meaning that if someone is low in estrogen, say, for example, you have hot flushes by adding flaxseed is going to most likely help your hot flushes and raise your estrogen levels.

But if somebody has estrogen dominance, like, for example, terrible PMS, or is having, you know, lumpy breast and sits on their breast, estrogen is actually going to step in and block those receptors for dirty estrogens, those dirty metabolites we talked about and wouldn't let them through to do the damage.

But it will allow the good ass Trojans to attach themselves to the cells so it acts like a real adaptogen depending on what the body needs. It's it basically supports you wet where you need it, allowing access for the good oxygens, blocking access to the dirty ones, which is just such a, you know what a gift from Mother Nature that is, right?

And it'll bind some of those dirty or estrogens. And then one of the things we've been alluding to is that we have a protective estrogen called E3. And I do know that you you're talking about with that adaptogenic response that that E3 is so protective against these kinds of hormone receptor estrogen receptor dominant, cancers.

Well, this has been fascinating. And I always learn so much when I talk with you. And I just want to really thank you for sharing your time and your wisdom, your knowledge with us on the summit.

How can people find you? And I want you to tell them about your book, because it's a mainstay on my desk here, and I refer to it a lot. Yeah. So, if, if you're on social media, we are on Facebook.

Hormones within ask. Hormones balance is the name of the community on Instagram is hormone with obvious just to make things complicated. And the book that you're referencing is called Overcoming Estrogen Dominance, and it's available on Amazon.

And then your website, you have some courses. Oh sorry. Yeah. Yeah. So it's hormones. But then as hormones balance.com is the educational side of our practice.

And well Entercom. Well Lena is the website that has all the supplements including how to address estrogen dominance. So we're going to link to the the book on our summit resources page.

I want to link to your, your line of products. I know some things have some, higher histamine ingredients. So people, you know, just check if your histamine intolerance, but really amazing products.

And one of my favorite is the after bitters, and our low histamine. So we're going to link to those as well over at mast cell three 60.com/summit. Yeah. Thank you.

Well thank you again. So much I really appreciate all the work that you do in the world. And it's just a real pleasure to have you on our summit. Thank you so much for having me.