Introduction and Dr. Zinkov's Background

Hi everybody. Welcome back for another great episode of the Solving Sexual Dysfunction Summit. I'm your host, Dr. Betsy Greenleaf And we have with us right now Dr. Elena Zinkov of I'm so excited to be talking with her.

So thank you so much, Dr. Elena, for being with us today. I'm so excited to be here. Thank you so much. So, you know, I was looking you have a pretty extensive background and that is your your quest to empower women to be their best health advocates while dispelling myths about hormones and women's wellness.

How did you get into this area of specialty? That's a really common question that I get asked really frequently. So as a woman myself, I struggled with the hormone imbalances most of my life.

Yeah, when I was a teenager and in my early twenties, really the answer for me was antidepressants, anti-anxiety medications and birth control. And that seems to be the same things that women nowadays are commonly prescribed for a lot of the issues that we deal with.

And my undergrad is actually in business and I wasn't very passionate about this. I was really passionate about health, grown up as an athlete. So I went into the naturopathic medicine route where I learned everything from head to toe and how all the systems work together.

And I just grew passionate about women's health, predominantly because I wanted to solve my own health problems. And so that's how I got into the field and fast forward now, I get to have the pleasure of working with so many women and helping them uncover hormone related imbalances.

And that is so incredibly important because I was realizing when you were saying this and I'm like, Oh my gosh, we haven't even had anybody talk about this.

But too often when a woman has a complaint, no matter what the complaint is, the traditional medicine practitioners are very quick to go into their tool bag and grab the antidepressants, which those by themselves can cause low libido and sexual dysfunction.

And so it's like, wait a minute, we're causing more problems with the medicines that we're using to try to fix people. So I wanted to ask you, like, what are some natural ways that we could, you know, boost libido or imbalance hormones and and like, what are the things we should be doing so we don't have to go that route?

Absolutely. Well, whenever we're talking about libido or mood disorders, our first step should not be to jump to hardcore medications, because frequently they can make things worse.

Or just like you said and they can frequently mask the underlying root cause and the underlying issue with a lot of mood disorders, especially in women and low libido, is actually a hormone imbalance.

Natural Foundations for Libido and Hormone Health

And so we have to make sure that even before we start natural or more integrated treatments that combine both natural and traditional medicine, we have to test, we have to task our testosterone, thyroid to dial progesterone, cortisol, DHEA, growth hormone.

Those are the heavy lifters that really impact our mood, our metabolism and sexual desire. And so if I were to just talk about natural therapies, I would start with even nutrition.

We don't want to jump to fancy herbs, you know, other supplements and even medications if we don't have the

foundations in place. So if we're eating processed foods, if we're having trouble sleeping, if we're going to bed late, if we're drinking more than two cups of coffee per day, if we're binge drinking on the weekends, we have to check in with those things first and adjust our diet before we break on anything else.

And of course, the average American, an average global citizen nowadays is not just an average American. We live a really sedentary lifestyle. And so I really encourage people to incorporate more resistance training into the into their daily life, at least 20 to 30 minutes and find activities that are that they look forward to do.

And it could be going on a walk and bringing the weight as best they could be, 3 pounds dumbbells. But you're using them, you know, five days per week, whatever it is, and build on that.

So getting a hormonal baseline, making sure that we're eating plenty of protein, vitamin D, rich foods because vitamin D is really important for testosterone and testosterone is really important for our libido.

And testosterone is also our dominant hormone in the female endocrine system, more so than even estrogen. And I love these like fish oil, cod liver oil, especially around this time of the year that is naturally rich in vitamin D.

But those are the first things that I would start out with. You know, I'm glad you brought up that about vitamin D because I sometimes forget about that.

And I see so many people that are deficient in vitamin D and we don't necessarily always make that connection between D and hormones. And but D is actually vitamin D, even what's called a vitamin is considered a hormone.

So it is. Yeah, it's a kind of it's a chemical messenger. It's really fascinating how vitamin B just affects so many different systems in the body, from our immune system to reproductive health, brain health, cardiovascular health, and even our metabolism, glucose lipid metabolism.

So there's quite a few studies that actually show that low vitamin D levels can be linked to increased risk of cancer, as well as diabetes and obesity.

And of course, if we're diabetic and obese, our libido can suffer as well just due to poor circulation to all the vital organs. And I was going to ask you, since we're talking about testosterone, what is the role of hormones in all of this?

In the use of. Yeah. Yeah. Well, the scary thing is that after the age of 24, we have this pretty much decline in all of our hormones as we get older.

And this is why I'm so passionate about making sure that we've addressed hormones early on in life. We don't have to wait until menopause or post menopause.

You realize, oh, our hormones are low. They've been declining for a while since about your mid twenties. So we shouldn't be surprised that we all of a sudden find ourselves in this sleepless night, low libido kind of state and low energy and testosterone is a really important hormone for women.

I call it the super power hormone for women, because it really helps women stay motivated, energized, and it also help women with that arousal component.

It increases circulation, blood flow to the reproductive organs and can be one of the reasons why women experience declining libido as we age. And I consider libido to be one of the vital signs of health.

You have a good appetite. How's your immune system? Are you sleeping well? How's your blood pressure? How's your libido? Because a declining libido is a sign of a bigger problem.

And on top of that, you know, it's not just the sandstone or estrogen that declines with age. And estrogen is specifically important for women because some women will have painful intercourse and that will make them shy

away from their partner and from being intimate because they're experiencing pain.

But they don't know why they're experience seeing that pain and they don't know that it's due to vaginal atrophy and that there's actually so many different ways, natural ways that we can improve that or with suppositories, hormonal suppositories.

But, you know, declining thyroid levels and low cortisol can make women feel tired. And when you're tired, the last thing you want to do is connect with your partner.

Hormone Decline, Testosterone, and Vaginal Health

You know, and I love I love all the connections you're making. And I love the fact that you've brought up that we really should be looking at some of the basics like lifestyle and diet before we do anything.

Because I know unfortunately, I know we're going have people listening worldwide to this, but I can speak from you know, I'm Americans. A lot of Americans were so like trained to it.

Like, if there's a problem, let's go for the pill or now like, you know, let's go for the herb or the supplement. But let's fast forward and say, like, we've we have the good lifestyle, we're sleeping, we're eating well, we're doing all the things we're supposed to do and we're still going, okay, now we're having some low libido.

Where do we go next with that? Yeah. So again, we've got to test the hormones because even in the context of a great lifestyle and excellent exercise, we just may have low or low normal hormone levels.

And I love that people are so passionate about fixing things naturally. There's just a biological component. We cannot we have not figured out how we can arm wrestle Mother Nature into producing more hormone.

Right. Naturally. And again, after the age 24, as our hormones start to decline, sure, it will start to exercise more and eat more protein. We might boost our own testosterone production by a little bit, but the body usually quickly catches on and you're back to baseline.

And so after a few months, usually people give up and are like, okay, I'll start them at the classroom, for example. And so with women, you know, before we get into some more fancy therapies, one is we have to understand what is the underlying cause?

Is there an underlying cause, perhaps the low testosterone level, is it the vaginal atrophy or low vaginal tone which we can talk about different therapies for?

Or do we need to incorporate peptides which are actually they're more like neuropeptide which stimulate different parts of the brain, not like testosterone, to actually increase arousal and either ability to reach an orgasm.

And so when it comes to testosterone in women, let's just start with that. I really like to operate this awesome cream. We don't need to jump into pellets right away or injections.

And I don't even really recommend injections for women and pellets can be hit or miss. So we want to just incorporate a little bit of testosterone, see how it resonates with your body, and then go from there.

And I have to say that I frequently like to incorporate even testosterone tablets, which can be compounded and inserted, inserted into vaginally, just to get a closer to the source of where we needed to work.

And so you get a little bit of that systemic benefit would benefit, but you also, of course, get that nice improvement in libido as well. And of course, those are inserted after intercourse.

Before intercourse because you don't want your partner to get the benefits of the stone. They might need it, but that's a whole different story. And as far as looking at vaginal atrophy and vaginal tone, because you might have

really healthy testosterone levels now that you started maybe on testosterone therapy, but perhaps we could go and see a specialist to potentially improve the membrane, the vaginal membrane.

This is perhaps we need either to do laser or PRP or or start on a cream and for vaginally just to improve the overall tissue and their arousal in that area.

Right in the vaginal area. And then one other thing, I would say few we briefly touched on this in the beginning have two different thoughts going simultaneously, but is of course, we need to evaluate our medication because a lot of women are on antidepressants, they are on anti-anxiety medication.

And I'm pretty hefty doses and they've been on them for many years. And so one of the things that I ask women is, you know, when did you start on this medication and did you notice your libido decline after that?

You started on this medication because frequently there's no connection that that medication was supposed to help me with my mood. But they're zero correlation with how it impacted the libido.

And so we work in many different ways to help women to improve their anxiety or depression and surprise them about their hormones, their mood improves.

And so that we can, with the help of the physician who put them on the medication in the first place, or another provider, we win them off the medication so that we can see how's your libido?

Do we need to incorporate other fancy things like peptides to stimulate the hypothalamus in order to increase libido and arousal? Or are we okay now that you were off of this medication that's been suppress the libido all along?

And that brings up the question of what are peptides? I love peptides. I can talk about them all day. Peptides are like a little else, you know, they do a lot of behind the scenes work and then one day you wake up feeling so much better.

They're very they're very slow to work. And sometimes, depending on how big the problem is, they can be really fast in terms of how they work. But we produce peptides in our body.

Insulin is a peptide many people don't think about insulin, but it's a hormone peptide and all the peptide is is amino acids and a peptide is usually more than 18 different amino acids branch together.

And so depending on the combination of those amino acids, insulin has its own amino acid combination. There are certain peptides, they have a unique amino acid combination and therefore they affect different tissues and systems.

Peptides, Medications, and Relationship Factors

So what happens as we age and this could also be a genetic component, we just may not produce certain peptides that help us with our libido and sexual arousal.

And there are specific peptides that work on that. And the court system, which there's a lot of receptors in the hypothalamus in our brain, that when those receptors get activated or triggered, they affect not just our sexual health, but they also affect our immune system.

And they have great protective properties and they have cardioprotective properties. So there are so many benefits to them. It's amazing when you pick libido, you fix so many other things or help so many other systems.

And so the frequently peptides that I see getting prescribed that I haven't prescribed in my own practice, Mylanta and one Mylanta tend to those are some of the popular ones.

And yes, some of them are used for canning purposes, marijuana, some one specifically, but Mylanta and two is

actually pretty fascinating when it stimulates the Milan and then receptors or the Milan, it's important receptors in the hypothalamus.

It actually has a positive impact on metabolism as well. So not only does it help us control our blood sugar, our lipid metabolism, but now you have the bonus of increased nitric oxide production which can stimulate libido and arousal.

The other one of my favorite ones, a frequent guest prescribed, is actually called P 141 and this one is also part of the Milans important system. So can we activate this in our brain or stimulate these receptors?

We have positive impact on libido. So those are some like favorite peptides. And how can I forget oxytocin, right? The bonding hormone that makes us feel all snuggly and lovey dovey with our partner frequently release orgasm.

But we kind of needed before intercourse as well. So that when it's frequently actually paired with P 141 so you kind of have this dual effect of oxytocin.

You want to bond and then p 141 makes you desire your partner. So those are some my favorite peptides. You know, I was going to ask you about some of them because I know that with the T 141 they are is available through compounding pharmacies.

There is a prescription version which just didn't really seem to take off very well, unfortunately. Yeah. And I don't know if it's the prescription version.

We see more of this or if it's the compound itself. But I've heard of that. One of the side effects can be nausea with that. And so but my understanding is the more you use it, the less that that happens.

But like, I would think like, oh, you know, what like would that be? Have you seen that? And does it like interrupt people's, you know, sex lives? Because here they're trying to do something to, like, put themselves in the mood.

And then all of a sudden they're like, oh, wait, I'm not feeling so good. I have not seen that. And of course, if you get that through a conventional pharmacy, they could have potential additives or binding agents that can affect the quality of the product, which is why go into compounded route, you will get a more pure version of the compound without all the unnecessary preservatives and fillers and things like that.

I have not seen all the limitations, but I'm also very conservative prescriber, so I don't store them on the highest dose. I don't start them on. Let's say even an injectable.

We can do gummies, but we can do gummies with a 51, 41 or nasal spray. So the interesting thing, right, with the needle spray, well, blood flow straight to your brain, which is where we need it because we need PD 141 As again, as part of that important system and receptor agonist, we needed to go to the hypothalamus and stimulate those receptors.

So the nasal spray to a sure way to get it where we need it to be to do what it needs to do. And so but if there is no result or no negative side effects with the gummies or the choking, as they're called, then we can move on to injection and injections.

We can do start with once a week, twice a week and see where we are three times per week. And of course we're doing all the other things on the side as well, even incorporating psychotherapy, because we have to make sure and I really wanted to make sure I didn't leave this part out, that that low libido is not a result of potentially some sort of relationship issues.

Because when you start when you know, when you're with your partner for a few months, passion, there's nothing at which we have calcium in a pill that you can take.

Right. But it's a constant is something that can wane off over time when you're when you're someone for a long

time, kids and work and stress and all those other things.

And so we want to make sure that as we're working on improving our libido, that we're also working with a qualified sex therapist who can help us build more passion in our life.

And then we can see a synergistic effect when we incorporate the peptide. But nausea, you know, it depends on how you dose. It depends on the formulation.

That's that's a great answer. And and actually it brings up the other thing. When you're talking about with relationships, we always forget to bring the relationship issue into libido.

I've seen so many times where patients have not had much of a libido or specifically pelvic pain and, you know, for whatever reason, they end up divorcing that partner.

And the pelvic pain went away. And I'm going, how how much of that was unfortunately a relationship issue where they were tightening in to splint against some other, you know, psychological relationship issue that they weren't aware of or maybe weren't ready to deal with.

So, you know, you bring up a really good point here. I am talking about trying to make something work in a relationship, but potentially you're in a relationship and you have a low libido and you're having all of these issues in the pelvic floor because you may be with the wrong person or whatever that dynamics are in that relationship.

That's a really excellent point that the flipside of that is you can't work with unworkable, right? Yeah. Yeah. And then I like that and I know I'm going to say like, everybody just go break up with your partner right now.

But like, maybe let's examine if there's other issues that need to be maybe just talked about or other kind of, you know, maybe we need to go to some kind of couples therapy or something along that route.

Well, it's just like if we're looking at cardiovascular disease, for example, we don't want to want to put something on a cluster all or a statin medication and a blood pressure medication.

We also want to look at their diet, their lifestyle, their genetic predisposition. We want to treat the whole person and hormones are really important for cardiovascular disease anyway.

And so same thing with libido. We want to make sure that we're addressing the relationship component because part of having a healthy libido is you got to be related with someone, even if it's with yourself.

Right. And, and as well, like we have to look at the hormones that died and attrition. It's every condition that we ever look at or symptom even such as like low libido.

We need to address it from a whole person and a total body approach. And a lot of people will still want to, of course, understand, well, how can we do this more naturally in terms of what herbal products we can use?

I love Maca for women. I think it's great. It's one of my favorite products is Feminist and Mocha. I'm sure you have your favorite product that you use.

I know a lot of doctors formulate their own products, but Mocha is an excellent starting point. I also like test so gain by Douglas Lab. What I would caution people is to get an, you know, a bottle that says the libido boosting herbs or vitamins and then it has like a laundry list of things, everything from horny goat to pelvic flower to aqua, gone to mocha.

And then you don't know what works and you don't know what's making you worse or nauseous or making you feel more tired. So start with something like one formula, let's say mocha and go from there.

I like that. I think that's a really good advice and that's kind of like how I've looked at things like when people come

in, of course I want to fix things all at once.

But you're right, if I make too many of you make too many changes, you don't know what's working. So, yeah, and it's so funny as well as I do this professionally, my husband always makes fun of me because I'll, I'll pass, I'll find supplements and I'll take like 20 different supplements.

All right. And that'll have something like bothers me or something like that. And he's like, why not? Why aren't you just starting one thing at a time and figuring out what works?

And I'm like, Yeah, you're right. This is what I tell my patients on my. Yeah, absolutely. I'm I'm a I'm a huge proponent of like keeping it simple. You know, there are times when you have to address multiple systems and components all that all at once, and then you'll have hormones and peptides and herbs.

But I really want to make sure that when when I incorporate herbs, I'm, I know which hormones I'm trying to improve. I'm monitoring those levels, but I'm also monitoring how are my patients feeling.

So I don't want to put someone on something and then see them three months later and they're like, Oh, by the way, I only did the couple for like a week because I felt terrible.

And so it's just good to kind of keep it simple because a lot of the herb herbs work, but they can work and not the direction that we want them to work.

And they stimulate many different pathways. So. Vitek for example, if we need to increase their estrogen and progesterone rates, it will do that. But it can also make women a lot more estrogen dominant because it stimulates the release of FH and LH.

Tell your ovaries to produce more estrogen and progesterone, but as nature will have it, there will still be low and estrogen will be high just because the lower estrogen so much.

And so we have to be careful that we know which herbs we are using and we understand what pathways are they're activating. And I think that's so important to really kind of focus on because I see too many times patients come in same thing.

Herbal Support, Stress Management, and Closing Remarks

They'll come in with a big laundry basket full of supplements and they think, Oh, no big deal, it's natural. I can buy it over the counter, but if you're not working with somebody who knows those herbs and knows what you're like, you could be making a whole mess of something.

We're spending your money for nothing. So, yeah, absolutely. And that's one of the things that I think people need to understand is that it's a process.

And safety is also really important. Just because something is available over the counter does not mean that it's safe for you to take. And that's that's why it is so important to invest into working with a profession who can help you figure these things out.

And certainly there are products like a lot of health care providers like you. I mean, we invest so much time into understanding what products have worked over time.

And when we recommend a product, it's because we've seen values of patients who benefited from this, not just some random supplement, but a product that we know has made improvements, whether it's libido, hormones, sleep, mood, and not just a product, but just to go out and blindly buy something, you know, is I think you're just wasting your money at that point.

Oh, my God, this has been wonderful. Is there anything I didn't ask you about libido that you wanted to make sure

that we understood? I think we covered everything from hormones to medications to nutrition, lifestyle, even peptides.

And I know I blasted through the whole peptide section, but if people really listened to this a few times, it will start to sink in. The other thing I would mention is stress management.

That is really important. It feeds into that lifestyle component. But where if we're in a fight or flight situation, we cannot be intimate and into our partner and fight stress at the same time.

So this also feeds into therapy and counseling potentially sex therapy. But what can we do to lower that barrier? What can we do to put us put ourselves out of that sympathetic mode and into that parasympathetic mode when magical things happen?

So I think we covered everything. I love that. I really appreciate you taking the time to be with us and talk to us about all this stuff. Where can people find out more information about you?

Yes, two places is Instagram. I'm on Instagram at Dr. Elena Zinkov and then my website. drelenazinkov.com. Awesome. Everybody, make sure you go check that out.

And once again, thank you so much, Dr. Elena, for taking the time with us today. Thank you. It's been my pleasure. All right, everybody stick around because we got more great sessions coming up.