Re-Exploring Your Femininity Through Breast Cancer Transcript

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Introduction and breast cancer's impact on sexuality

All right, everybody, welcome back to another session of solving sexual dysfunction. On this session, we have the amazing Dr. Jenn Simmons. Thank you, Dr. Jenn, for being with us today.

I'm so happy to be here. Now, so as a breast surgeon and a breast cancer thriving doctor, like you get people back to baseline and doing from a holistic standpoint, you're getting that diagnosis of breast cancer can be really detrimental to one's sex life, especially since we've kind of assigned this, you know, sexuality to the breasts themselves.

So how do you address that with patients when they're dealing with not only the cancer diagnosis, but now or, you know, having difficulty with with sex?

Yeah. So, you know, this is a huge problem that starts at the time of diagnosis and is only compounded along the way. So, yes, we do we do associate breast cancer with sexual dysfunction because it is a sexual organ for most women.

And one of the things that really sucks about breast cancer is you kind of can't do it privately. Right. Because the breast is an external organ. So any time you have surgery on your breast, any time you have your breast removed, anything that that deals with the breast, it's an external organ.

So it's kind of out there for all the world to see. And there are lots of people who are super private about their diagnosis and don't want to discuss it with the world, don't want to share it with the world.

How breast cancer treatment affects hormones and sexual function

And unfortunately, because of the location of the breast, they are so often forced to and it changes intimacy significantly. If you have a surgery on your breast, it's going to change the function of the breast.

It's for a lot of people that, you know, if you are still young and of childbearing age, they're wondering, you know, what kind of function the breast will have afterwards.

Lots of people. The breast is an important part of their sexual relationship with their significant other. And they want to know, will they have sensation and and what will it feel like?

And certainly if you have your breast removed, then you have to like suffer the loss of an organ. And so that part has a tremendous impact. Not to mention that you are also at the same time that you're being confronted with your sexuality, you're also being confronted with fear of losing life.

So I know most people would readily choose their the loss of their breasts over loss of their life. But the truth is that most people with breast cancer, the vast, vast majority of people who get breast cancer, they're going to live they're going to live for a very long time.

And unfortunately, the way that we're treating breast cancer right now, they're going to live a long time with a lot of dysfunction. So surgery creates a lot of dysfunction.

Radiation creates a lot of dysfunction, firmness, fibrosis, pain. But what all of the treatments for breast cancer ultimately do is really change our hormone profile.

And it's very hard, nearly impossible to be to have normal sexuality, normal feelings, normal urges, normal pleasure, normal engagement. It's hard to have all of those things when your hormones are tanked.

And that is one of the main approaches to the treatment of breast cancer. So you can't take someone's estrogen away and have them have normal sexual function.

It just doesn't happen. And in addition to that, when you take estrogen the way you change the brain and the way that you perceive things and your mood and your memory and your feelings and the way you sleep and you change the function of the heart, you give them fatigue and you have vaginal atrophy.

So you're going to have pain, you're going to have a lack of lubrication. So what we're doing to people in the course of treatment is actually creating tremendous problems for people down the road.

And there are many people that though they are alive because of these hormonal changes that we had imposed on them. They're alive, but barely. They're alive, but they're not living.

And this is a huge problem. And I think we've done a really big disservice to women because we've basically scared them away from hormones, especially when the Women's Health Initiative study came out.

I mean, I can't tell you. I mean, I've been practicing for 20 years and that study came out while I was in residency. And the number of women I've run across were like, they hear the word hormones and they go, Oh, hormones, equal cancer.

And especially if it's a woman who now has a diagnosis of breast cancer and they feel lost because they're like, I can't do I can't do hormones. Yeah, no, there, there, there are actually told some of them are told that their hormones caused their breast cancer.

Right. Which is preposterous. And we have to get rid of that narrative.

Reframing hormones, estrogen, and the Women's Health Initiative

I mean, that narrative is entirely created because we have drugs that block estrogen. Right. So let's tell everyone, estrogen is bad so we can sell our drugs.

But people think like, oh, will I have an estrogen driven tumor? Because my tumor cell has estrogen receptors on it? Well, guess what? Normal cells have estrogen receptors on them.

They're supposed to. Right. This is this is if your cancer has estrogen receptors on it, it means it's more like normal because it's the cancers that lack estrogen receptors, that lack progesterone receptors.

These are a far departure from normal. And these are the more aggressive tumors. They're more aggressive to treat, but they behave more aggressively. They just inherently behave more aggressively because there are further departure from normal.

So we did people a huge disservice with that Women's Health Initiative study, and there are so many things that were wrong with the study. First of all, the study wasn't even empowered to to determine whether or not they're related to causing breast cancer.

The study was initially powered to determine if hormone replacement is protective against heart disease. Right. That's what the study was initially powered for.

And they took women who are ten years out from menopause to determine if hormone replacement protects against heart disease. Only the vast majority of these changes happen within the first ten years after menopause.

So you have an acceleration in heart disease. You have an acceleration in bone loss, even acceleration in brain deterioration over those first ten years.

So we didn't even try to help the population that we could help. And then we made all these false conclusions in an

a population where it's just not appropriate to talk about.

Plus, they use synthetic hormone. Plus they manipulated the results like it was a whole crazy controversial study that showed you have never been released that has since been retracted.

Only that's a bell that can't be uncovered. Mm hmm. And so what we need to do today is just inform women with the truth. First of all, God would never give us a hormone that is so essential to life that causes breast cancer.

It's preposterous. Estrogen does not cause breast cancer. Period. End of story. Now, are there situations where people have an abundance of estrogen? Yeah, maybe I actually think that it's probably a lack of progesterone brought on by a processed food diet, sedentary lifestyle, toxin exposure.

So I think that that is far more of an issue than actual estrogen abundance. However, there are certainly situations like being overweight that cause higher estrogen levels, but your body should be able to detoxify them.

If you are living in a way that you you are physiologically functioning the way you should. Environmental estrogens are a different story and a huge problem, and I think we all need to do our best to avoid as many environmental estrogens as as we can those xeno estrogens, things like plastics and fragrance and antibiotics and phthalates and all of these synthetic things that exist around us that we can opt not to use, not to include in our daily routine.

And in doing that, we eliminate a lot of those toxic estrogens. But we have to get away from this the perception that the estrogen that is produced by our ovaries is causing breast cancer because it's simply not true.

And it's evidenced mostly by the fact that the vast majority of breast cancers happen in the postmenopausal woman, where estrogen is virtually absent.

So it is when a woman gets to the point in her life where she is searching for that estrogen, that breast cancer has become more and more common. And so with that in mind, we know and we have seen time and time and time again estrogen is protective.

It is protective.

Treating the root cause instead of the tumor

And even in that in that Women's Health Initiative study, there was a subpopulation of women who have had their uteruses removed that were not given the progesterone component of hormone replacement.

They were just given estrogen alone. And those women had less breast cancer. So we know that estrogen is protected. And in this population that we're talking about, in a population of women who has had breast cancer, who are suffering, they have heart disease, they have brain fog, they have mood disturbance.

They can't sleep, they have no libido. They're fighting with their spouse. They're on edge. They have vaginal dryness. They have pain with intercourse.

This woman needs help. She is not living a life worth living. And that is a woman who I would make sure is least stable in terms of her disease, on a diet that is nourishing, that is fueling her in a positive way, making sure she's moving, making sure she's prioritizing sleep, making sure she's voiding environmental toxins.

And I am putting that woman on hormone replacement because she deserves it and she deserves to have a healthy heart, healthy brain and a healthy vagina.

Yeah, I love that. And that's such a great explanation because I think too, there's a lot of us health practitioners that don't know this either. Sure.

Because I know it wasn't taught to me when I was going through my traditional training. You know, I even came out

myself thinking like I was a gynecologist.

I knew what I was talking about, and I had a hysterectomy and I was like, I don't want to go on hormones because I don't want to get cancer. So I think that, you know, what you're doing is amazing because this is the education that we all need.

Yeah. So, you know, it's amazing how much people fear cancer and then we know otherwise, which is that women are exponentially more likely to die of heart disease starting from the age of 30 on, exponentially more likely to die of heart disease than breast cancer.

And yet people fear breast cancer. So much more women die. Just as many as many women die every single year as a complication of a fracture, as do of breast cancer.

And yet all of these drugs that we give to women after they've had breast cancer accelerate heart disease, accelerate brain disease, accelerate bone loss.

These are huge problems. And we are just trading in one problem for another. And oftentimes the other problem that we're trading in in for is far worse.

And we really need to rethink our approach to treating breast cancer, because what we're doing now, we are not serving people. And you and I took an oath, our first day of medical school.

You and I took in our first do no harm. We are now living by that oaths. You know, and I was talking to you recently about cancer in general, and you said something that I thought was so incredibly fascinating and really drives your direction on how you treat patients that the tumor isn't the problem.

Yeah. So, yeah, I wanted you to get to what that is. So all of conventional medicine is focused on the tumor, right? Fight, fight, fight. We have to fight the tumor.

The tumor is not the problem. And like everything else in the conventional medical approach, they are totally directed at the symptom. The tumor is the symptom of the problem and there is something that is driving that tumor growth.

So often people think of the tumor as some foreign invader, some foreign body.

Holistic breast health and where to learn more

But your tumor is a part of you. Your tumor is the part of you that is afraid of what is happening around it, that is responding negatively to its environment.

It's the part of you that is unhappy with the status quo. And so what we all need to do when we are faced with a diagnosis and I looked at the abyss myself, I am here for a reason.

I left conventional medicine for a reason because I know that all of our focus is on the wrong place. And when we instead say, Why is this tumor there?

What is driving this? What is causing the inflammation? How can I affect that? The symptom stops. So I remember when I was training at the Institute for Functional Medicine, they, they talk about the tack theory.

So if you have a tack in your foot, you can take a lot of aspirin to get rid of the pain or you can pull the tack out. And I like that line from breast cancer, healing from any cancer.

It's about pulling the tack out. And I use this analogy all the time. So if you have a cancer diagnosis, your proverbial sink is overflowing, right? There's water all over the floor.

You have a tumor, growing surgery, chemotherapy, radiation, anti hormonal treatments they're The mop right. And sometimes they're necessary. Like sometimes you're in crisis and you just have to use them to clean up the floor.

But unless you turn off that faucet, you can't mop that floor forever. And turning off the faucet means that you have to figure out what's driving this.

And it's going to be different for everyone. And for some people, it's going to be mold illness. For some people it's going to be viruses or heavy metals, or they're reliving a trauma from their childhood over and over and over again.

I don't know what's driving your tumor. Only you know what's driving your tumor, but you'll never know unless you ask the question. And unfortunately, your medical oncologist is not asking the question.

Mmm, this is this has been really amazing information. And I love your holistic approach because I just find this so incredibly fascinating and and it really just ties into all of our areas of life and really can affect I mean, this holistic treatment is like we treat everything, this treat, you know, our chronic disease, it treats our sexual dysfunction.

It's the answer to everything. Yeah. And I say to people all the time, breast health is health. So the same things that you're going to do to have healthy breast are going to give you a healthy heart and a healthy brain and healthy bones, healthy skin, healthy gut, healthy muscles like we are all one system working in concert, right?

And so if you're doing the things that drive breast health, eating a whole food plant based, nourishing diet, if you are moving your body because we know sitting is the new smoking, if you are prioritizing sleep, eliminating toxins, making sure that you are dealing with stress in a healthy, productive way.

Right. Not alcohol and pot. And you are living a connected purpose driven life. You're not only going to have breast health, you're going to have unqualified health.

That is amazing. Thank you so much, Dr. Jenn, for being here and teaching us all these just really nuggets. So where can people find out more information about you?

Yeah. So you can go to my website, which is realhealthmd.com and there you can download the breast owner's manual. I just wrote a book called The Smart Person's Guide to Breast Cancer.

It is absolutely where anyone who is either looking to prevent breast cancer or dealing with a diagnosis, you need to have this book and then you can follow me on all the social media outlets.

I'm @drJennSimmons and my Jenn has two Ns So I'm once again, thank you so much for taking the time to be with us today. It's my pleasure. So happy to be here.

All right, everybody, stay tuned because we have more amazing sessions coming up.