Real Talk About Bioidenticals, Breast Cancer, and Why It’s Never Too Late Transcript

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Opening and Hormone Misinformation

Why would Mother Nature make the very hormones that drive humanity be carcinogenic? What the F? That doesn't make any sense at all. But we have heard that estrogen causes growth, growth growth.

And so cancer is growth out of control. If you also have estrogen signals going to the second estrogen receptor, which cause controlled growth and anti-cancer signals, this is Dr.

Talks. Hello, and welcome to Mastering the Menopause Transition Summit 4.0, our fourth year. I'm your host, Dr. Sharon Stills. And this is the conversation you don't want to miss.

dear friend, colleague, and brilliant who I have learned so much from. So much of the good stuff I do in my practice is because she does the research and she brings it to the clinicians and there's not a lot of people that I agree with in the hormone community.

I've been doing this a long time, 23 years. We both started with Dr. Jonathan Wright, the father of bioidentical hormone therapy who So many people who claim to be hormone experts don't even know who he is.

And so when I bring someone on, when i find someone in the hormone world who I just agree, it's like a beautiful gift. So she knows her stuff. She's brilliant and you are going to hear like truth bomb after truth, bomb, after, truth bombs.

So I'm, she, just finished lecturing to like 90 physicians. It's like probably, well, I don't know. She has the energy of it. five-year-old, but she came on late in the evening, oops, to do this with us.

So I'm very grateful and we're very lucky to have her here. Welcome to the summit. What a lovely opening and I have to say back at you, Gal. I respect you so much.

And I was just talking about you to a dear friend this afternoon. I know we have not much time, but I were saying, what a human being. She has both sons work with her.

What a mother, What statement of a mothers, let alone a great doctor that she is so beloved by her own inner circle. and I do agree. It's very rare that you find somebody that your world life viewpoint overlaps and it gives such peace of heart and mind and soul.

to have that. So honestly, I really respect you and love you. If I ever moved back to Scottsdale, you would be one of the epicenters of why. And I'm just back at you sweetheart, really, truly.

Thank you, all right. We're not going to spend the whole half hour love-festing, but we love each other. Anyway, what I want to do, because we don't have like an outline of what we want do.

But what i want is really have you talk about all the chaos and all of the noise out there because so many women are so confused and they're hearing things from prominent doctors in the space and their being misled.

And then they come into my clinic and there just like, I am soo confused. So I want to cut through the noise and the BS and kind of just give the truth to these listeners who deserve it so they can no longer be confused.

And so I can't think of anyone better to do that than you. So what I'd like to is start with one of these crazy things that's going around out there, that estriol.

It's dangerous and you don't need estriol and should only take estradiol. And so if you could speak to that, it would be such a great service and blessing for the listeners.

So that is such horrific non-scientific statement to only use estridiol, so these people that are saying that say, Estradiol, we have three major estrogens, although we actually have 60 estrogen-acting molecules in the body.

It's not as simple as that. If you think of the Father, the Son, and the Holy Ghost, We've got Estrone, Estriol and Estradiol. And they all have different actions.

And there's those out there saying you should only take estradiol. That's it comes as a patch. You should do this and you shouldn't. And if you need Estriol, your body will convert Estradiil to Estrial.

So one of my dear colleagues, Dr. David Rosensweet did a study for five years where he measured and he only did Estridial and we know that Estriel is important because it's the anti-cancer cancer estrogen.

It's the anti-inflammatory estrogen, and we know this. I worked at an estrogen think tank at Tulane University called the Center for Bioenvironmental Research where I work with the scientists who discovered the receptor that Estriol signals, and he writes papers, this is the end.

Whatever signals ER beta, an Estrial is main estrogen that signals the ER Beta, fights cancer from breast cancer to ovarian cancer, to even the real worst nasty brain cancer glioblastoma.

You want Estriel because it helps you fight cancer. It helps fight inflammation. And when David Rosenzweig did a study where he only gave women Estradiol, and look to see do they really convert, which is what people online are saying wrongly.

Why Estriol Matters

They didn't convert. they don't. It sounds good. We'll do mother nature. You should convert but you don' In a young healthy woman, the original research was done by Dr.

Wright and he took a look at 60 naturopathic students that had normal menstruation and got an idea that young young women have more estriol than even estradiol and it used to protect them against breast cancer.

We now have a lot of younger cases of breast-cancer, but we want Estriol on board. And people online are saying it's immunosuppressive. It is not immuno-suppressive, and in fact, because it fights cancer, it is immunoboosting.

How could you fight cancer if you were immunopressive? And of course, what damages the immune system is chronic inflammation and it lowers inflammation.

But the other thing that Estrial does is we all have heard about leaky gut. And you know, the gut opens and closes and open and close as you have these little columnar and pterocyte cells and they open, and then they should close with sticky little adhesive proteins, like a little piece of bubblegum.

Stick us back together. Should it open after a meal so nutrients go into your blood? And then with like, a piece a bubble gum, this little sticky protein It goes back together.

Well, what makes those sticky proteins are hormones. And estriol is one of the main hormones that helps keep your gut wall behaving and not misbehaving.

So you want bi-est, which is a combination of estradiol and estrial. In fact, I did a debate with one these people online. I said, let's do a 90-minute debate on Karen Martel's podcast.

And she brought with her a surgeon, Janet Taguchi, and we said, where's your science that Estriol is immunosuppressive? No science, no science. Whereas Dr.

Rose Sweet and I gave science science-science- science we have 30 minutes here, but I could give like 25 papers that show, in fact, even with autoimmune diseases.

They're now treating in men and women with multiple sclerosis, they're giving Estriol, and Estriel shrinks the size of the brain lesions and helps people get off canes and wheelchairs.

It's the good, good good estrogen. I hate when people say estrogen dominant, it makes her sound like a bad dominatrix, but Estrial is the, that's good Estrogen, you want the estrogen dominance.

So please don't worry, You want both estrogens. And so, are there things that estradiol does that estriol doesn't? Or is estrial, because all we hear about is estridiol is protective for our bones, it's protective…

Estriole protects your bones. In fact, I just had a patient the other day Her neurologist told her that ER beta, Estriol has no action on the brain. Well, there's ER-beta receptors all over the break.

Most people know zit wit dit about hormones. It is the most polemic, controversial space in medicine. It's the most important because they're the only molecules that can signal your genes.

They run the physiologic Wi-Fi of your body, they deliver emails to your cells to get the messages for you to be who you are. Hormones are the deal, but they don't teach it that way in med schools.

And most people in practice today were told hormones cause cancer, dont have anything to do with them. So it's very hard to ask even well-intentioned doctors Am I a candidate for hormones?

And to get an appropriate answer. Most of the time you get the wrong answer no matter who you ask. That's why this conversation and people like you are so important.

Because understand that most docs, even though they're well intentioned, don't know. ditwit about hormones. And that's why we're having these conversations to you to get on it.

We don't mean to say we are the end all be all and have so much bravado, but the truth of it is that there's more misinformation out there on hormones and everyone's trying to make women scared.

And I've really thought about this a lot. Why would all these misinformers want to do this? And, I think, everyone wants to be an influencer and be famous these days.

That's the deal. Want to famous. And to become famous, you make people afraid and you've got the answer for them to protect them. Unfortunately, there's only a small but hopefully growing group of doctors that are really smart.

You want both estradiol and estridiol, but estrdiol signals both. both estrogen receptors. And that's why maybe we thought that you don't need Estriol, but Estrial mostly signals the anti-cancer, anti inflammatory receptor.

We have more and more cancers today in younger and younger women. I mostly treat breast cancer. And most of my patients these days are in their young 30s.

It's just, it's horrific. And they weren't getting any signals to that anti-cancer, anti inflammatory receptor. You want that to keep yourself safer. So let's talk about that because I had a patient just the other day who came in because she was diagnosed with breast cancer and she wants to be on hormones.

So she came to see me and was petrified even though she's heard me speak. And she actually follows you too. But she is still petrified because of everything she hearing.

Let's just get that one out of the way. So why would Mother Nature make the very hormones that drive humanity be carcinogenic? What the F? That doesn't make any sense at all.

But we have heard that estrogen causes growth, growth growth. And so cancer is growth out of control. But if you also have estrogen signals going to the second estrogen receptor, which cause controlled growth and anti-cancer signals, so it's not a simplistic deal, but there were 25 studies done from 1996 to 2013. 25 Studies where they took women with estrogen profile, ER positive breast cancer, and they gave them estrogen.

and they compared them to matched cohorts, which means women of similar age, tumor size, tumour markers. One of the studies was 36 years long. one was 30, one with 24. The shortest was two years.

Most of them, One was at MD Anderson. 1 was the University of Wisconsin. I mean, these were like major American places. A few were offshore. Every single study, women had less recurrence.

women had less death if they did have recurrence. If they didn't have a recurrent, they had smaller tumor size. Everyone did better on estrogen. The only study that's made everybody say we shouldn't be on hormones is the habit study because there was a group of women on who got cancer back, I think, in the opposite breast, but it was obvious.

But if you read the belly of the study, the only group of women that got a cancer were also on Tamoxifen, so they were on a Cancer Blocker. So based on that one study we're telling women you shouldn't be on hormones.

The one thing that almost everyone will agree with is you should at least be in testosterone. Because of the exhaustive, amazing work of Rebecca Glasser, and she's published in peer review, she has shown that women with lower levels of testosterone are the ones that are more vulnerable to getting breast cancer.

Maleness protects femaleness at the breast. And she is now using testosterone to treat. She even has a patient that didn't want to do chemo or radiation or anything, and she just gave him testosterone pellets.

And she published that case, it's called a case report and peer review. I just had a woman come into me last week that's walking around with a tumor for three years because she was scared to death to a biopsy and just paralyzed into action.

So I called Rebecca Glasser and said, will you take her and do your testosterone pellets on her because she doesn't want to have surgery. And she said she would.

I've tried to get her to lecture with me, but she's very frightened of estrogen and I sent her those 25 studies, that she didn't comment on them. It's the same exact thing with men.

Testosterone protects the prostate against cancer. But if you're on it, you get prostate cancer, they tell you it was the testosterone fault. The doctor that's It's his mission to try and bring testosterone to menses, exactly the same thing.

I had the honor of lecturing with him in Miami two years ago. In fact, at the Trump Doral Hotel. And he opened up his lecture saying, why would mother nature make the very hormones that drive humanity be carcinogenic?

And I've been saying this for years. It was music to my ears. So I have breast cancer 30 years And I had lost, I have many cancers because my mother was given a terrible drug when she was pregnant with me and the daughters couldn't have children.

So I books instead of children And a lot of them got breast cancer as well as other cancers. And I didn't want to become a ghost of a woman. I was a young woman when I got it and I lost many organs.

So I read the literature, dove deep into it, and everybody told me not to go on hormones, even my functional colleagues. said, don't go on hormones. You just dont know what this will do to you.

And I've now been on bioidentical hormones, including estrogen, for 28 years, and I'm going to be 77 in about five months. So not a lot of people, you need hormones to keep you younger longer.

Well, and you have the energy of a five-year-old. I mean, first of all, look at her, 77. You look like you're 45. Oh, bless you.

Progesterone Resistance and Sensitivity

The energy to go with it. And so I mean, there's obviously something to this. She's living walking proof. So I'd like to talk about progesterone resistance because there are a lot of women, you know, I always say like, forget diamonds, like pro gesterones can be your best friend, because if you're anxious, if your not sleeping, pro-gesteron can such a game changer for you.

And so, but there's a subset of women who take progesterone and instead of them chilling out and getting good night's sleep, they have this opposite paradoxical response where it makes them anxious, it make them crazy.

They can't tolerate it. It makes then comatose. And, so I'd love for you to speak to that because I think it's very misunderstood. That's a great question.

So there are several components to the answer to that question, so first of all, progesterone resistance is when you have pro testosterone in your body, but it can't signal the receptor or the cell membrane.

So, hormones signal receptors and they also signal cell membranes. And progesterone resistance was first labeled in the late 1990s by a team that looked at 25 or 30 breast cancer survivors compared to women who were not.

When you make progeterones, a lot of it in in middle of your cycle, your breast should warm up and your whole body temperature warm-up because progesterone is a warming hormone and it helps thyroid work better.

It nestles free T3 into its docking site. So your thyroid works a little bit better when progeterones around. They took women who had a history of breast cancer and they measured their progesterone in the blood and that was normal, but they didn't get the raise in temperature in their body and the rise of temperature and their breast tissue.

So they call this progesterone resistance because they had progesterone, but their body couldn't receive the email that progeterrone was sending. It was resistant to getting that email or that signal.

So that's progeserones resistance, like endometriosis projesteron resistance or a lot of chemicals in the environment make us projesterone resistant, where we just can't respond to what projesterones trying to tell us.

But progetserons sensitivity is when you take it in and you have an adverse effect because it should be a calming hormone that makes you feel better, but it's making you want to tear your hair out.

That's progesterone reactivity or sensitivity. Progesteron is the most allergic hormone we have. If you go into PubMed and put progesterone and allergy in the search bar of Pubmed.gov, where we have all the abstracts of many of the scientific articles, our NIH arranged free access for all Americans to that, 65 articles pop up on pro testosterone-induced autoimmune dermatitis.

There's no other hormone that has that allergic syndrome named after pro gesterones. And you can be allergic to anything. You can allergic a chicken to spinach to progesterone to a hormone.

So in the olden days, I used to test all women before I put them on hormones to see if they were allergic, to estradiol, estriol pro testosterone and bases and so forth and desensitize them.

And you can desensitize women through a variety of techniques. Dr. Wright used to have an energetic desenitization. There's also the NAET, the nebutropod allergy elimination treatment program, which is kind of an acupressure treatment to identify reactivities and then desentitized you.

It's kind acu-pressure to do that. And some people have been using my new products, Receptor Detox and Hormone Balance and Protect. There's a nurse practitioner in Minnesota who's come up with a way to use my

products and I don't even know how to repeat it.

I've been meaning to ask her exactly what it is. And I designed some products to keep your receptors clean and make your hormones more balanced because I have formulated products for years and in our dirty environment, pollution is that in competition with our hormones.

So you've got to really clear yourself out, not take in more pollution and get rid of what you already got. Because sometimes your hormones won't work because your receptors are so filled with chemicals, even though your blood level or saliva or urine, whatever way you test it, the hormone can't get in to deliver its email.

There are a number of ways to desensitize somebody to that reactivity from energetics to NAET to my products, which I have not done that yet. And this one, her name is Harold Brinkman from Minnesota.

She's been repeating this and she's taught it to some people and it's working for them. So I want to find out what that is. The point is you can get someone over their reactivity to progesterone, but it's real.

It is a potentially allergic hormone for some people and you do want to get over your sensitivity because it has so many benefits when you make it your friend rather than your foe.

But you can be allergic to anything. Reactivity, you know, we move through a world that's very toxic and we're all individual and a big part of being well is figuring out what's your kryptonite and what you're, what is good for you, and bad for.

And at moments in time, a hormone can bad till you make it good. but to make it good, you got to alter your response. And so in the interim, while someone is reactive to progesterone, now I had someone, I just taught a 16-hour course with David Brownstein, and I think you took it, called Everything Hormones for MDs and nurse practitioners in naturopaths.

We had Carol Peterson who claimed to get over progesterone reactivity, you should give more and more, and just make the woman, that doesn't quite work for me because most of the women feel so badly that they want to hit you over the head with a hammer or never come back and see you.

So I like to use something to reduce that reactivty. But in the interim, estriol helps oppose estrogen and testosterone helps suppose estrogen because Progesterone is a polisher and an opposer.

Estrogen does this, and progesteron helps it do that in a balanced way. So if you've got to take projesteron out of the picture for a while, then you can add in estriol or testosterone to get that balance while you're desensitizing the patient.

Is that helpful? Yeah. And I think, you know, it's a hard sell for a patient who's reacting on a hundred milligrams to go, well, now we're going to give you a thousand milligrams.

Yeah, I know. I couldn't do it myself. It is curious why of all the hormones, like, do you think women who are reactive to progesterone had problems when they were younger, had bad PMS or issues like that.

You know, why would we be like you say, like, you know these hormones are life-giving. Why would they cause cancer? So why will our body be so sensitive to such a nice hormone in our bodies?

That is such great question because the reason it has its name is it's the major pregnancy hormone. So, pro from progesterone means to support and gest, gesterones is gestation.

So pro-gesteron supports pregnancy. It's the major pregnancy hormone. I think it's because we live in a dirty toxic world and we think of most endocrine disruptors as estrogen endocrine disruptor, but there's Androgen disruptors, male hormone disruptor, there's oxytocin disrupters, but there are a huge number of anti-progestins, progesterone disrupts.

And I think it's secondary to the toxic world. It's in our brain. It's in our air. We track it in on the bottom of our shoe. You know, I wrote one of the very first books on endocrine disruption.

And I think that endocrine disruption is making the hormone of life be opposing the human race. It is our enemy rather than it should be our major support because it helps evolution of mankind.

So I think detoxification really helps you handle your hormones better. And I thing that detox must move mainstream. You must detox on a regular basis and then do heavy detox periodically.

I that probably would also reduce reactivity. A lot of this comes as the soil and air and rain is dirty, our cells get dirty and they don't respond in the way that nature intended.

But that everything's healable, everything is fixable. There is hope always. Yeah, now that makes sense. I see, I've been doing toxicity testing for as long as I'd been practicing 23 years and I, see all of a sudden over the last four or five years, high levels of cesium and thallium, and uranium and things I didn't see 20 plus years ago.

Bleeding, Hormone Dosing, and Testosterone

So, and it is, it's raining on us. It's from all over. And so we have to, you know, what you're talking about with the receptor sites is so important.

But I want to tackle one more misnomer confusion about you have take extremely, extremely high levels of… estrogen and you must bleed. And if you don't do that, you're not producing growth hormones and your not getting the benefits.

There's a book out that's saying this and they all studied with the doctor that saying that. In fact, they're saying you really dont get the best of hormone replacement unless you take hormones to the point where you have a monthly bleed And if you have a monthly bleed, that's when you're really getting your bang for your buck.

And that is the opposite of what… That is nuts because every time you a buildup of blood on the inside of your uterus and then you shed it, you'll have more growth and proliferation.

Every time the more ovulation you have the, more growth and proliferation you, have, the. More your risk of cancer. So the women that want you to bleed for a great, they're putting you more at risk.

Of cancer, I remember I studied with Dr. Myron Morehead, who ran the laser clinic of. And he worked at charity hospital and we did research when I was at Tulane and he would go.

Abulation. The more you ovulate, the more your risk of cancer. You know, that's what you, you want to really, really be able to put yourself at rest and get hormone replacement that doesn't cause a bleed because you wanna not increase your And the other thing is that's really just using the Wiley Protocol.

That is what's being used as the wiley protocol. And it's just a theory. It's this one woman, God bless her, T. S. Wylie, I think is her name. I had a dinner with her one evening and it was her idea.

Some of these gynecologists have run with it and its very theoretical. Somedays, women are getting 25 milligrams of estrogen. 17 milligrams of estrogen.

And usually that level of estrogens turns off your system, doesn't turn it on because the higher you go with a hormone, the more it shuts your systems off.

It's not like a carcinogen where the most you're exposed to, more you risk. So, hormones work best in a Goldilocks mid-range. They are too low, too high, things don't work, and a doctor is trying to figure out what's your real Goldi locks mid range.

And when you have to have a bleed, you're going to ranges which are really, really high and some are very, very low. So I think that's dangerous. Why would they say that?

They say the testosterone causes plaque and heart disease and it's not needed by women. And testosterone helps you build muscle. You know, you really want to have a lot of muscle and muscle slows down aging.

Muscle slows down aging. Most of your immune system lives in your gut. Everybody's heard this by now. Testosterone is what helps promote your system in you gut, and testosterone protects your brain.

I talk in my last book, Sexy Brain, because sex steroid hormones rule your brains, I talked about the work in Japan where everyone's worried about dementia, getting Alzheimer's disease.

You know, APOE4 gene carriers, that's a glitch in a gene. that has brain activity. Well, testosterone, if you keep your testosterone going as you age, it shuts up that nasty gene that puts you at risk of losing your wits.

You know, the more and better your levels of testosterone… The slower you're aging, the better your immune system and the less your risk of dementia.

Why would you not want to be on testosterone? Now, not everybody needs it. Some women make their own even as they age, so you've always got to tested and all hormones must be individualized.

But these dictums, when people say these, and you know, look at the people delivering this message. Look at the messenger and really testosterone is a friend.

If it's used wisely, it protects so many tissues. And so because people have been saying it causes heart disease, I spent about a month scouring the literature.

I only found one little Greek study and the majority of studies show that testosterone protects the heart. The other thing some people are saying is you can't take hormones once you're too old.

There's an estrogen window. And we've put women in their nineties on hormones. You just have to go to a literal hormone, literate practitioner that knows how to do this carefully because it's a much more nuanced situation.

But it is never too late to. Never too. All that is, is a theory from an arrogant Harvard gynecologist. said he knows it all. He did not publish that podcast interview, thank you very much.

It doesn't matter where people come from, it doesn' matter if they've written a book, its really hard to figure out who's got their had wrapped around some really solid science.

And for many people, testosterone is an important hormone to age with because it will make your aging not so painful. Game changer. When I check in 24-hour wet urine testing, it is.

Some women, I'm like, you're still producing it. We monitor because at some point they might not be. So, you know, in some women, I feel like they lose it before they even start to lose their estrogen and the progesterone.

So you really have to be looking and individualizing what a woman needs or a man needs. Exactly. We're almost out of time, but I know you have a new book coming out.

And I would love for you, that's a little sneak peek. It's 22nd book. So, you know, I couldn't have kids because of that drug my mother took. This is my family.

I invite you to meet my kids. And this book is on, it's called Oxytocin Medicine and how to use the love hormone to heal many issues in many tissues. Oxytocin is the hormone where we, when we orgasm, We squirt it out, but it's the first hormone of life because it causes, it is the pregnancy birthing hormone.

It causes the uterus to contract for the baby to be born and it cause the breast to contact for milk to let down. And the babies is a wash in it, a washing it and its sets up the Baby to Be a communal contributing caring human being but oxytocin is under attack.

by our dirty environment. And I make a point or a case that a lot of school shootings and anxiety and our love affair with anti-anxiety meds and things are because our oxytocin doesn't work right anymore.

I go into how it can be used for weight loss, for pain, so many diabetic patients, it will stabilize blood sugar. It won't totally make type 1 diabetes go away, but it really helps improve quality of life.

And then at the last chapter of the book for practitioners, how do you write the script for a wide variety of situations for it. I've been teaching oxytocin to practitioners for about 17 years and using it on patients all that time, and I thought it was time to have a book out on it, so I just got the inside interior and the cover today.

It's such a great job. And when is the publishing date? Do we have an exact date. I think we're going to publish it in September. That seems like a better time to have a book come out early in september.

Stay tuned for oxytocin medicine. Walmart sells that you can sell. It comes in international units. Doesn't come in milligrams, but in an international unit.

And the dose range, which means how much do you use, can be as little as six to eight international units to 600 international unit. And, the FDA allows us to buy up to 15 international, units over the counter.

So, when I was lecturing in Calgary, I, was the keynote speaker at a pharmaceutical conference in calgary two years ago. And I was talking on oxytocin.

And there were some gynecologists and midwives. They came up to me and said, during COVID, we couldn't get ahold of pitocine, which is a version of oxytocin, but not natural oxymocytosin in the same way that oxydocyn works.

It's too much to go into right at the moment. and they said we didn't know what to do. So they we saw that Walmart was telling it. And we ordered it from Walmart.

And I said, well, how did it work? And they said it worked so good that we still use it now because we can pulse it. It's much cheaper. We use Walmart oxytocin.

I say, shut the front door. So now if somebody wants to try it and they can't get a prescription, I tell them to go get it at Walmart, but you have to keep it in the refrigerator and it only lasts for three months.

After that, it's kind of lost its kapow, but I invite you to read my book and see what you think. And I hope that it's an enjoyable read as well as an informative read.

Once again, these are my kids, so I invited you kind of meet my family. I look at you and you have two sons working with you, and I think you've just hit the lottery.

you created it, you earned it. But I look at that and it was a long time for me to come to peace with all that, but my books have helped me come peace to that.

And they do such a huge service. I am so excited for you. Because I compounded the pharmacy for patients, I did not know that you could get oxytocin over the counter at Walmart.

Actually, I opened an oxytocin company about five, six years ago because I did it with a compounding pharmacy. Let's get standardized 15-IUs because who knows what Walmart really has in that, et cetera.

I didn't know at that point. So I formed a company with Broken Arrow Compounders in Oklahoma because that's

where I was practicing at the time. really great guys.

But in three, four months, the FDA made it illegal for compounders to ship to other states where you didn't have a license. So the business took off like gangbusters for the first four month and then we had to shut it down.

It was terrible because I wanted people to be able to get compounded.

Oxytocin Medicine and Closing Resources

But the FDA is always trying to shut the compounders down because they're always to make the big pharma have more bucks and the people in alternative medicine have less bucks.

But people are going to be clamoring for alternative because medicine is sick. It can't heal itself. That's why we're trying have these conversations to keep us well.

This has been, I told you all it was going to be fantastic. So thank you so much. You have a sub stack. Before we sign off, everyone needs to follow you.

you're always in the literature, you are always putting out amazing information, the truth of what you need to know about hormones. Where should people go?

What's their best options? Thank you for asking me about that. I appreciate that because I don't remember to kind of sell myself or market myself, whatever that term is.

I wake up every morning for the last 50 years. I've been in practice 53 years and I read the science for at least two hours just to start my day with my cup of joe, the most dependable man in my life.

Okay. So I write about four or five mornings a week in a platform called Substacks and the name of mine is Agile Thinking. So all you have to put in is Berkson and Agiles Thinking and it'll pop right up.

And I also have a membership if people want to hang out with me and hang with once a month and you can ask me whatever you like, although it's not personal health questions at that level.

Then I have pro level, where I work with doctors, OBGYNs, pharmacists, naturopaths nutritionists. And we meet once a month and we dive deep and go over patient intakes and have guest speakers.

Tomorrow we have Dr. Schellenberger, the godfather of ozone, talking about using ozone. one shot to treat endometriosis, and that's very exciting. And then anytime you join at any time, we've archived and saved all the other conversations so you have access to the last three and a half years of what we have done.

I basically have a company that I teach relicensing courses to practitioners where I'm always trying to educate people to really give them more tools in their tool bag to help patients from hormones to digestion to nutrition and the environment.

And I think that kind of, my website is drlindseyberkson.com, D-R-L-I-N-D-S-E-Y-B- E- R-K- S-O- N dot com. You can go there and scroll down that first page.

It'll just have the memberships, and my courses, it'll have a lot on there to show you. I have stuff in the store. And I have my products that help hormones work better, receptor detox and hormone balance and protect.

I had to tell you, you know, that my product make your hormone receptors work and receptor functionality is all about happy hormones. One of the benefits really is thinking and is weight loss.

I just had a doctor the other day tell me one of their patients who could never lose weight, never loose weight. We have an easy detox where you do receptor detox four twice a day on Saturday and Sunday with a full stomach of

food because there's full flush niacin and you could get a little bit of flushing but it goes away.

But you want flushing because it breaks open your fat cells where the pollutants are stored. And just doing receptor detox weekends and going on my products, this woman in one month was changing.

Nothing else lost 10 pounds. I have another woman who was, everyone in her family was in the 300 pound range, and she'd only been 300 and some pounds her whole life.

So I put her on hormones, I always work with the medical team, put on her hormones. and did my new products and she's been at 148 pounds for the last two years.

So there's a lot of use. You can learn about all that stuff. There's video on all of that at my site. We just do a lots of fun things because life should also be fun because there is so much fun.

There's just a lot of not good feelings swirling around and life is still just such a gift. So we try and make our delivery of the information always resonate with that tonality because it still is such gift and we want to learn how to be well so we can also enjoy life, not just be frightened of everything around us.

That's why I always love hanging with you because we always seem to have a meeting of the heart, you know, like we're sisters of heart. And I always feel better just being in your presence.

That's a sign of a really dear friend and colleague, isn't it? Yeah. Well, thank you for giving the gift of your wisdom. Please, please, go follow her.

Go learn from her, drag your doctor, make them learn. doing God's work in the hormone world of educating and teaching and, you know, she's giving you good information.

So do yourself a favor, go follow her and you can get clear of the confusion so you have your own healthy, happy, hormonal journey and know what's correct and what is going to be safe and protect you.

And you don't have to feel old at 40 or 50. You can be a young 70 and early 80 year old person. And it's not the end of the world getting older, but you got to be healthy and have healthy hormones.

I swear to God, you can have a better older age without it. Even if you could have better, younger, older. Thank you for having these conversations so people can not feel like it's the end.

It's not the ending. I call it the sacred second act. Aging is a beautiful thing when you've got your hormones and your health and movement and diet. Then you get to be 77 and look like that and have The energy and the wisdom and obviously you know that there's no brain fog happening there this is clear thinking smart smart heart you everything so we can all have this she's not like some.

weird person. She's just taking care of herself, she's been on hormones, and she knows what she is doing. And so this is what I want for our future generations because we were taught, you know, 77, the 77 year olds in my life were hunched over, they were on the couch.

I'm still dating and some guys go, does it work? Do you still work and I go I put the 20 year old's to shame. So, yeah, life, you know, we're biologically can, set to go to 120. So to me, it's like you're just past your mid-prime, right?

You're from your lips to God's ears. Yes. All right. Well, I love everyone for being here. And I told you it was going to be a good one. I did not lie.

Blessings, honey. Thanks for having me. I appreciate it. Be well. See you soon. Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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