Introduction to Menopause and the Podcast

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They're free, they're available all the time, but those are challenging and really guarding your sleep. I really work, Pat, with people guarding their sleep for that really long health span, right?

Because if you don't sleep, you don't heal. Have you made it past menopause, or are you going through it now? I'm Dr. Pat McShane, and on the Women's Health Span Voices podcast, I'll guide you through the health challenges of the menopausal years and beyond, guiding the way to thriving in this powerful era of your womanhood.

Hello and welcome. I'm delighted today to have Laurie Hammer with us, and she will be talking about a lot of issues that go on in our menopausal brains, including mood and brain fog and a few other things.

Laurie is a functional nutritional therapist by training, although her practice is quite a bit broader than that at this point, I would say. And she is a podcast host herself, Take Back My Brain is the name of her series.

And I would invite you to appreciate a lot of the material that she has recorded in those podcasts, various podcasts with a lot of different experts, and then her own perspective, of course, as well.

Functional Nutrition and Root-Cause Care

So, Laurie, if you would tell us what a functional nutritional therapist does and a little bit about how you got on the path that you're currently on.

Yeah, I would love to. Well, thank you, Pat, for having me. I love your mission with HealthSpan and everything that you're doing, so I really appreciate you having me on.

Thank you. So a functional nutrition is basically using food as medicine, for one. And how does that affect your body head to toe? And so I really work on changing the diet, doing basic supplementation.

Then we say, hey, what's leftover? What still needs to be worked on? Is there some glucose regulation that hasn't been fixed yet? Are there some adrenal issues, thyroid issues, those kinds of things?

And then we implement some lab testing and dive a little bit deeper. And then we try to find the root causes for people. And so that they can overcome those things without medication, without a lot of medical intervention.

you know, as much as possible. And so that's really, really fun. It's kind of, you know, it's like Christmas to me all the time trying to help people decide, you know, figure out what's going on with them and finding the best diet and everything for them.

Uh-huh. I mean, the basic aspect of functional medicine is finding the root cause, not just treating the symptoms. Not just masking the symptoms, yeah.

Yeah. And a lot of people I'm sure find you after they have failed the typical medical approaches, which is typically or usually kind of fixing the symptoms on the top of the problem, not the underlying cause.

Although it can be pretty, it can be pretty hard to get people, even if you know that they need to make some lifestyle changes. So my goal in having this conversation or one of them is to deal with a lot of the changes that people report as they are undergoing menopause, brain fog, depression, sense of lack of identity, just huge issues

as our lives change from having monthly cycles and estrogen rise, progesterone and so on, to having very low levels of estrogen and progesterone and The average woman gains weight during her menopausal transition and she's at greater risk for a lot of metabolic conditions, diabetes and blood pressure, heart disease.

And we've started to kind of learn more about this, but it seems to me that the brain stuff and the mood stuff has been sort of put aside. I mean, the cardiovascular issues are more, I guess, compelling or obvious, but you probably see people in your practice who feel quite discombobulated after their menopause, and maybe you could tell us a little more about your experience with that situation.

Brain Fog, Mood, and Inflammation

Yeah, discombobulated is a really good word, Pat. Yeah, I have a lot of women that come in and so they feel like they've lost their brain. You know, my mantra is let's take back your brain, take back my brain.

And so they feel like they've lost their brain. There's a lot of brain fog. They're more emotional. They're not sleeping well. They feel disconnected kind of to the world around them.

Maybe they just don't even enjoy being around people anymore. They're more isolated. So a lot of different things going on and a lot of them come to me on SSRIs or other mood medications and a lot of it's just because nobody really, really listened to them.

So they're working on their heart, you know, those kinds of things. They're like, oh, it's just part of aging. Just, you know, you're just going to have to learn to navigate it.

And it doesn't have to be that challenging. So I really work on people. A lot of it has to do with inflammation. So how can we reduce that inflammation?

You know, we're working on changing the diet, kind of look at maybe the medications they're on are causing inflammation. So I have a lot of people that come to me like on a statin or different blood pressure medications.

And when you change the diet and those types of things, you don't need those meds anymore. And then you take them off the meds. I don't take them off.

Their doctor takes them off. But all of a sudden, you know, the restless leg goes away because statins can contribute to restless leg and those kind of things.

But my main goal, Pat, when they first come to see me is to really calm the neurology down, to balance the brain down and fix those deficiencies first.

Because when we balance that brain first and everything below the neck and just the lifestyle changes, all those things are a lot easier for people to deal with.

And then the body has a better opportunity to heal when the neurology is calmer in the body. The estrogen per se has a lot of impact on our brain functioning and on our mood.

Are most of your women patients on estrogen replacement therapy of some type? And if so, could you comment on that? Yeah. Well, some of them come on it.

Some of them come to me because they don't want to be on estrogen replacement therapy. So I have a lot more people in that realm than people who are actually on that estrogen replacement, it can be amazingly helpful.

But it does come with risks, right? But having low estrogen also comes with risks, so you kind of have to weigh those things out. But there's definitely things we can do nutritionally and with specific herbs, and I do some specific testing to see Is your body even using the estrogen that you're making?

And if it's not, then we can work on your pituitary gland or we can, you know, target some other things for people and then help to raise that estrogen a little bit because you still can, even in those later years, you can, you know, take some different burdens off the body, maybe with some detox or just making lifestyle changes and dietary changes to reduce inflammation and that can have a profound effect on your hormonal profile.

Any hints about lifestyle changes?

Hormones, Estrogen, and Lifestyle Changes

I mean, dietary changes are huge, difficult for most people, and I'm sure you can't just say, oh, you need to do… and have that workout for people. Any hints that you could give me and our potential patients on the podcast?

Yeah, absolutely. So lifestyle changes would be, you and I talked about this on the podcast I had with you, movement. Movement is so key. So, you know, getting everybody out and moving, moving, moving, you know, 30 minutes a day, get out and walk, do some stretching, maybe try some Pilates, maybe, you know, depending on what your ability is.

So there's lots of different options out there. I think you know, some light weight training or body weight exercises are key to everything as well, maintaining your brain health because if you're able to, you know, get up off the floor, do some squats, do those kind of things, that really triggers, you know, activity in the brain and that's what we really want to keep going.

Getting out in that morning sunshine is really important. I really work with people try to get out, you know, right away in the morning and then get out at noon.

So don't eat inside your lunch, you know, eat outside, try to put your toes on the ground and try to catch a sunset so that you can get that circadian rhythm.

Those are easy, but yet still challenging things to do. They're free, they're available all the time, but those are challenging and really guarding your sleep.

I really work, Pat, with people guarding their sleep for that really long health span, right? Because if you don't sleep, you don't heal. If you're not sleeping, your brain isn't working very well and then you're gonna have more brain fog, you're gonna have more anxiety, more depression because you're not having any of that rejuvenation time, any of that detox time.

Your brain really only detoxes while you're sleeping. That glymphatic system in our brain just drains while we sleep. So if we're not sleeping, you know, that has a profound impact on our brain health.

Yeah, I think some people with sleep issues are very well aware of them, but not everyone is. Some people just feel tired or confused or, you know, fatigued during the day, especially.

Do you recommend that people do testing for sleep apnea on a frequent basis or does that come up from time to time in your practice? Yeah, absolutely does come up from time to time.

And I have a number of clients who do have some sleep devices that really help them. And then I've helped a lot of people not need them anymore. So there's lots of factors.

It could be that your palate is too small or your throat collapses. And there's definitely some dental things you can adjust. You don't always have to be on a sleeping machine.

So yeah, there's lots of options out there. So we try to explore everything so that people are getting the best sleep that they possibly can have. No, that's huge.

And again, no side effects to getting a lot of good sleep. And I think too, Pat, that as we age, well, you know, and I

think it's getting younger and younger.

I always ask people, okay, tell me about your sleep, you know, and then we'll dive into it. And like, oh, I sleep really, really well. Like, so you never wake up at night?

Sleep, Circadian Rhythm, and Sleep Apnea

Oh, maybe once or twice, but I go right back to sleep. That's not good sleep, right? If you have to get up to pee three times, that's common, but it's not normal and our body shouldn't need to do that.

We should be able to sleep all night long. We were created to be able to sleep without peeing during the night. And hormones, of course, do play a role in that.

You know, if your estrogen is low, you tend to have to pee a little more often, I think. So, you know, just because we don't have the solid structure, you could probably speak a little better to that being a fertility doctor than I can.

The gynecologist, yeah. Before that, yeah. Yeah, exactly. So there's lots of factors in there, but the goal is to really work on that sleep. Yeah. Tell me a little bit about the gut microbiome from your perspective.

That's gotten a lot of press in the medical literature and a little bit less in the popular literature, but it's kind of out there too. And that is at the core of a lot of the issues that people have.

So how do you learn about somebody's gut microbiome? Well, if they come to me with any of the things we've been talking about, the brain fog, the sleepless nights, the anxiety, the depression, you just know that their microbiome is off.

So you don't really even need to test it. So anybody who has an autoimmune condition or has any of the things that we've been chatting about or even other things, our world and our food system is such that most people's microbiome is pretty pathetic.

So I just assume I'm going to work with everybody's microbiome. I mean, there is testing that we can do if we need to, but I don't often feel that you just don't really need to spend that money on that microbiome testing, that we can make a profound change in the gut without it.

So I do a lot of probiotic, prebiotic rotations. We never want to stay on the same probiotic all the time because then that doesn't really help our gut.

It'll help in the beginning, but we don't want to stay on the same one because we want to constantly reintroduce different bacteria and we want to make sure we're feeding those bacteria well.

And then we want to make sure that we're like supporting the lining of our intestines. So we do some different herbals and you know, some like fulvic and humic acid and butyric supplements and butyrate to really help that microbiome establish and grow and have a specific protocol that I rotate through to help people shift.

I mean, it takes a good year to really change your microbiome. So, you know, people who start doing it need to know that You're not going to change it in three months.

You can make some good changes, but if you really want to work on your gut, you need to be committed for a whole year. One of the things you just mentioned was the medications that people may come to you on.

And I recently did a podcast on that I entitled too many medications, which is the average person over 60 ish is on five plus medications in the U S and many of those medications have some of the side effects that we've been talking about and brain fog and confusion and just poor mood are some of those.

So. just again, working with people to get to the root cause of the reason that they're on those medicines, which

may be very valid, but if you can lower their blood pressure by dietary intervention or weight loss and back out some of those anti-hypertensives, blood pressure medicines and so on, you may find that you're in a different space with that woman.

So that's a good thing. Yeah, yeah. I'm sure a lot of your clients and patients are on many fewer medicines after they've been working with you for a little while.

Yeah. That is always the goal. Even my own dad. I mean, there's like nothing wrong with this guy except he has… you know, high blood pressure and he is on five medications for his high blood pressure.

And I'm like, damn, you know, and he's having all these like weird like side effects with his skin and heart palpitations.

Gut Health and the Microbiome

And I'm like, it's from the meds because most doctors don't put people on nutritional supplementation or guide them on their diet to fix the deficiencies that the medication causes, right?

So we've been working on that. And so he only has two left now. So we're working on those last two. And his blood pressure is lower off of the medications.

And he doesn't have those issues anymore. So it's like everything was compounded. And I'm like, I think it's the meds that are causing these issues because he has no other risk factors, zero.

Like they've tested everything. So anyway, Good case in point, yeah. Changing subjects a little bit, I recently came across a reference to menorexia, which is anorexia in a postmenopausal age range.

And again, it's something that we tend to associate anorexia with very young women, and obviously it can be a very serious condition in those people. But we're not home free when we go through menopause, and sometimes something will trigger maybe that lack of identity and, you know, loss of roles that may occur as we go through menopause.

So if you want to just say a few words about that. Yeah, I think that's a topic that really needs to be talked about, Pat, because it's definitely valid.

That's where my amino acid therapy comes in because it helps women of all ages. So when the menorexia happens to people, Again, it's probably identity, you know, like we've been talking about, you know, you feel lonely, not heard anymore.

You're kind of in that stage of life. You're not really sure what your purpose is anymore. So there's a piece of that. There's also the decline in the hormones, decline in other nutritional things.

So probably things that have, you know, really accumulated over the years, you know, higher toxicity levels, those kind of things that just trigger the brain and then you don't have the proper neurotransmitter production, you know, enough serotonin, enough dopamine, GABA, all of those things.

And so not everybody is going to experience this, but people who that would be their bent, you know, then they stop eating, right? And so when we come in with that amino acid therapy, we start rebuilding the brain and we fix those deficiencies going on there.

Then all of a sudden, you know, people actually have an appetite again because their anxiety lifts, the depression lifts, you know, their endorphins, their dopamine, but that drive is back again, right?

And so you can make a profound difference just by fixing some really key nutrient deficiencies in the menorexia challenge that's going on right now for sure.

Medication Side Effects and Reducing Dependence

Uh-huh. And the testing that you do to determine which amino acids might be required for an individual person, what kind of testing is that? Is that blood or urine or?

It's actually neither one of those. I use a questionnaire that was developed, you know, probably three, four decades ago, and it divides it into five different categories.

So five different neurotransmitter categories that really affect our mood. So serotonin, GABA, catecholamines, your endorphins, and then glucose regulation.

And there's amino acids that correlate with all five of those areas. So I actually send all of my clients a kit because I do a lot of virtual. And with that kit, the amino acids are in there.

We meet on a Zoom call just like this, Pat. And then we actually open up the capsules, put the powder under the tongue, stare at each other for a couple of minutes and just wait and see what happens.

Yeah, it's pretty exciting because you get really profound changes within like two to five minutes with the amino acids and then you know what your body's going to respond to and you'll actually feel the depression lift or you'll be like, oh, I feel more focused or I don't feel the noise around me anymore or, you know, everything looks brighter.

I can see better. I had a woman say the other day, she goes, oh my goodness, I can read the supplement bottle. Like you couldn't read it before. Like it really changed her eye focus.

So it could be a number of different things, but the amino acids have a profound effect and you need those because those are the building blocks to everything.

So if you want a good… All of our proteins. Yep. Yep. One of that good health and you have to have the foundations. Well, good. That's good to know.

Thank you for that. Any other topics that you think would be good for our listeners that pertain to the brain health in menopause?

Menorexia and Amino Acid Therapy

That is such a great question because we've talked about movement is key, sleep is key, just getting in the right amount of protein and the right amount of healthy fats for your body to function, for your brain to function.

We've been lied to all these years about our nutrition, eat low protein, eat low fat, don't have saturated fat, when in fact, our cell membranes, our brains really need the cholesterol.

They really need the saturated fat to have that long health span, to have that vibrant aging experience. So that's always my goal when I'm working with women who are postmenopausal, you know, going into menopause, whatever it might be, just to age well.

We weren't meant to have sickness and disease. We weren't meant to be, you know, non-mobile and all those kind of things. So I always want people to know that there is an option, there is a way out.

I mean, you have to decide whose report you're going to listen to. If you know that your body, if we remove the interferences, and we give the body what it needs, it can function well.

It can function really well. So, you know, to make the decision like, okay, let's try this. Let's try some nutritional supplementation. Let's try a little more protein.

Let's try a little more fat. I think I'll walk an extra two blocks today, right? The power of one more block, the power of

one more ounce of protein. Like those things make profound differences in any stage of life, but especially, you know, as we're aging and as we're aging women, because most of the time we're going to outlive our spouses.

And so we need to live well and we need to be strong in that process. And nutrition is such a key. Amino acids are such a key to this whole aging process.

Protein, Healthy Fats, and Aging Well

Well, that's great information. Yeah, the protein piece people don't realize, but that whatever might have been adequate at age 40 probably won't be at age 60 because our bodies build up a resistance to the protein that we intake.

Yeah. And if we're, you know, have been a little bit neglectful of our muscle mass and now we're working a little bit harder to build muscle, you absolutely need protein to do that.

So that's a good point. Yeah. Well, this has been fantastic information. I value your experience and your insights tremendously, Laurie. Thank you so much.

Thank you for having me. It's been a pleasure. Yeah. If this information is interesting and useful for you listeners, please like and share and pass it on to someone whom you care about and love.

Thank you very much and take care. Bye bye. Thank you. God bless. Thanks for listening to the Women's Health Span Voices podcast. If today's episode spoke to you, follow the show and share it with a friend ready to take charge of her health.

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