Introduction to fertility support

[music] The typical fertility journey for so many people is to try and try and try with no data, you know, no feedback or support in how to conceive, how to support their body. And it isn't until the one year mark that they've been trying unsuccessfully that they then get this diagnosis of infertility. And then finally some labs will be done and some workup will be done. But still then there's really a big lack in support in what they can really understand about their body and you know how to support their body in being able to conceive and to have really healthy babies. And so today on the podcast I'm talking with Dr. Katie Wood who is a pharmacist and a fertility motherhood wellness coach and the voice behind Happy Nourished Motherhood. And we talk about why unexplained infertility is not actually a diagnosis and what really can be going on when we're struggling to conceive and also how we can support our body in getting pregnant even before there's an issue, even before we technically have infertility. how we can really understand our body, support our body and our health and not only get pregnant easier, but also have healthy babies and also support our health for the future.

It's really a powerful time. I'm always on my soap box talking about this and how powerful it is to address our health at this time and really be able to support our health and our children's health for the future. So, we go into all of that. She shares some really practical tips in how to look at things, some things you can do in your your diet, in your lifestyle to better support your fertility. And it's just a really beautiful conversation. She and I are very much on the same page when it comes to the approach to fertility and our health. So, I hope you enjoy it. Dr.

Dr. Katie Woodu2019s fertility journey

Katie Wood, thank you so much for being with me today. >> Hi, Dr. Miranda. I'm super happy and grateful to be here. So, first I'd love to hear a little bit more about your backstory of just what got you into what you do now, supporting women and fertility and motherhood.

>> Sure. So, my background is I'm a pharmacist. So, working in retail pharmacy, still full-time when my husband and I decided we wanted to start a family. And I had been coming off of 13 consecutive years of birth control.

And my OB at the time was basically like, "Yeah, you can stop your birth control and start trying in the same month." And honestly, you know, they don't even being a pharmacist, right, dispensing these medications, the background and education that they gave us on birth control, like now that I know what I know, did not include a lot of the negative impacts and effects that it can have on your body. And I was also a little frightened and scared like thinking about having a baby at the same time. So I was like, "Okay, I'll stop and start, you know, we'll start trying in the same month." Well, I would say that my body needed a lot of healing.

Even with my cycle coming back completely regular, it was almost as if I had never stopped the birth control. It was like every 28 days, very exact, very precise. But I think that there's just so much that can happen from the birth control in our bodies, let alone, you know, the nutrient depletion, the impact on our gut health. And but for me, I think it just completely disconnects the woman from her innate natural rhythms and cyclical nature.

Like there was just so much about the cycle and ovulation and so many things that it's almost embarrassing to say, but I just didn't even know even being a healthc care provider. It's really sad.

So, we struggled to get pregnant. And I reached out to my OB again and was kind of just told, "You're healthy. Just keep trying." And they never took any labs.

you know, it's just the basic intake when it comes down to nutrition, lifestyle, stress, whatever it is. So, that was super frustrating. And I'm sure maybe you can relate to this, but just being very type A and just like, tell me what to do so I can do it. So, I I just dove head first into a ton of Google rabbit holes, which is great to be empowered, but also it can be very disregulating to your nervous system depending on the place you're doing that research, you

know, coming from where you're at when you're doing that research. So, I was just trying all the things and it wasn't working. And eventually I did find acupuncture and the acupuncturist I think just having someone listen to me like actually hear what I'm thinking giving me some sort of action steps you know it really helped to connect my bo body mind and spirit but then also address those underlying factors that I truly believe that long history of birth control had on my body and you know even after a couple months of doing that I switched to a new OB office, >> worked with the midwives, hoping that they'd be a little bit more holistically minded. I was pretty much told the same thing, like, you're healthy, just keep trying. Still, again, no labs, nothing.

Like, not even a TSH, which we know isn't enough, but like I had nothing drawn. So, looking back, I'm like, "Wow." And I didn't really know at that point what to look at. And essentially what she told me was, I would get an appointment scheduled with a fertility doctor because if you wait till you hit the year mark, they're probably not going to get you in for a couple months because they're like backed up. So that was the advice she had given me around like month 8, month nine. And fortunately, I did end up conceiving naturally, just like a cycle or two after that. And honestly, just going through the fertility journey and then being pregnant, doing a lot of research, how can I be healthy for myself, but also this baby and receiving the lack of advice that, you know, basically if I wanted deli meat, I could microwave it.

That's that's the extent of the nutrition advice I received. So that also just was like a red flag moment for me. We actually decided halfway in that pregnancy to switch to a home birth. So, there was a lot of education going around in terms of that postpartum as well. And and honestly, just after all of that, after all of that was said and done, I was in retail pharmacy still for maybe the first couple years of my daughter's life. But it just made me realize the gap in women's health care, in maternal health care, and it's really sad. And I really just hadn't experienced anything like that myself.

So all that to say and plus being in pharmacy, I was really starting to become more disengaged with the conventional side of things. My eyes had been opened up to a lot of a lot of things. And because a lot of people will say, well, how can you be a pharmacist but you're like holistically minded? How can you be both of those things at the same time? And I just think it's through my own personal experience. You know, conventional medicine has its pros and cons, but I think that there are definitely a lot of areas where we have just lost the sight that our bodies are made to be able to heal themselves. And so, yeah, so all those things packed into one. basically decided to leave retail pharmacy, start my own business, and really give women the support that I was longing for and desiring to have on my own journey because it can be really isolating. And it's just so hard to to find support and find information that you can trust these days.

>> Yeah, [clears throat] I think so many women could resonate with that because so many of us were on birth control for many, many years without thinking about it. And you know, I was right there with you. But my story was very similar to yours and that no yeah you're a busy you know medical student doctor >> it you know we don't want to get pregnant and we weren't taught when we got our period when we actually can get pregnant or not. We kind of all got scared if we get pregnant just by looking at each other basically. So we all go on birth control whether we really needed to or not necessarily. I remember being on it in times when I wasn't sexually active. Like I didn't actually need it. I just was like well it's just easier. I know when my period comes why not?

Rethinking the one-year infertility rule

And then it wasn't until I finally came off of it and was like, "Oh, my body isn't functioning right. What's going on that I started to realize, oh, I really didn't understand what was going on with my body. I didn't fully understand the menstrual cycle, which again, even in medical school, too, we didn't we don't really understand the full ins and outs truly.

And so yeah, I had the same experience of looking at, you know, Eastern medicine and what are all these other holistic approaches and really seeing that there are so many more options for women to really understand their body, support their body. So >> I love that you had the similar journey.

I mean, I I hate that any of us had to have this journey, right, to just like learn it all on our own and not feel supported, >> but it's really it's so powerful when we can then take our journey and say, "Okay, but I don't want that

for another woman. I'm going to change how other women are experiencing this." Yeah.

>> And so at least we have that where we can take back that that power and support other women with that. >> Absolutely. Yeah. I wouldn't trade it for anything what you know the journey that we had. For sure. Cuz I wouldn't be here. I wouldn't be the same woman that I am today if I didn't go through that.

>> Yeah. Same. Well, you know, in talking about your story, you were sort of alluding to that that one year mark, right? Because that's when fertility is actually diagnosed. You have to be trying for at least a year. And and I love that you kind of bring up that point of that oftentimes nothing is being tested before then because technically you don't have an issue before then sort of behind the curve.

How do you feel about that now? Like what is your take on on the official diagnosis and how would you approach it better for other women? >> Sure. Yeah. So, you know, in western medicine, typically they'll say if you're under 35 and you haven't conceived naturally within a year, then you should start exploring that with your doctor. If you're over 35, it's 6 months or under. I don't love that mark because for so many reasons. one, just because you've tried for a year. Honestly, you could be trying for a year and you might be doing it wrong potentially. Like, you could be missing your window entirely, especially if your ovulation is ever delayed or if you even have like PCOS, but maybe it's not full-blown PCOS where it's like 45 days or more between your cycles. So maybe you have you don't even realize cuz your cycle is regular regular but there's just so many other things too you know that you could start working on nutrition or maybe you're taking supplements or prenatal that's actually not meant for your body. I have had women who've come to me and then we, you know, take a overhaul on what supplements are you taking and they're taking a prenatal with folic acid in it or just synthetic vitamins that aren't going to be completely bioavailable for your body to utilize, especially if you have any, you know, form of the MTHFR mutation. And even there's other genetic things that can kind of come up into play as well. But I think for someone who's truly in it and truly cuz sometimes people are like, "Oh, I've tried for a year, but we weren't really like tracking and doing all of this." If you're in it and you're really trying to do it every single month intentionally, I think to put yourself through that for a year, like it's it's a lot. Unless you can just like let it roll off your shoulders, those negative pregnancy tests. I don't know about you, I could not like even after that first cycle, I I had the delusion in my mind.

We started in November and in my mind, I'm like, I'm going to be announcing that we're pregnant at Christmas. Like, no. Number one, don't put that pressure on yourself, please. I don't know why I did that, but you know, that was a long time ago. That was a different version of myself. But I just think for someone to have to go through that amount of time and that amount of heartache, especially if there's something going on that you could have addressed sooner, you know, whether it be really understanding your cycle and how to optimize timing within your fertile window, whether it's looking at your supplements, making sure that you're taking the right ones that are for you, looking at your nutrition.

Sometimes there are like actual other factors like I had a client who they wanted to just kind of try more hands off like we worked on all the things but he ended up having a varicose seal you know so I just don't think putting it off for a year makes much sense. I also don't think it it has to be like this major workup off the bat.

Like if you're like okay I want to start trying. Okay let me run all these tests on you. I think it could be a nice comprehensive panel like a blood panel.

Make sure that you don't have any, you know, pre-existing or like close to blood sugar dysregulation going on or anything like that. Taking a look at your nutrition, lifestyle, supplements, anything really. But a year is a long time. six months if you're over 35. You know, I I just don't think that we should be holding people back if they are wanting to intentionally support their bodies for a healthy fertility and pregnancy.

>> I completely agree and I feel like it's a very, you know, it's a big viewpoint shift in, okay, we're not just waiting till there's a problem to support someone. Why not support someone right off the bat? Like you said, I've I've definitely seen couples where they just don't understand their fertile window because again, no one ever taught them and so they're just not timing it right or there there could be such simple modifiable factors that could help that could be, you know, a tiny barrier that's getting in the way of getting pregnant that if we just tweak a couple of things like you mentioned, you know, know how to eat, know how to time intercourse, all these things, really know how to support

our body best. We should all be doing that anyway, but especially during this time, it can save so much time and heartache >> because yeah, someone who's gone through any, you know, who's tried to conceive even for a few months, I feel like it is every single cycle can be very stressful. We talk about that two week weight between, you know, conception and finding out if you're pregnant or not.

And every day in that two weeks can be so, you know, nerve-wracking. So to go through that for a full year or longer is torture to a lot of couples. So I completely agree.

>> Yeah. Being so much more proactive with that is so important. >> And with that like what are the maybe we go a little bit deeper into that like how can or what are the big things that maybe a couple should be looking at when they are trying to conceive. Are there some big you know kind of red flags or things you know pillars that you make sure that people are looking at? So I think if possible if the woman will definitely if you are on birth control give yourself I always say minimally three months but ideally 6 months to a year off of birth control so you can really replenish those nutrients that are so vital for fertility but are ironically the ones that birth control can deplete. So if you could do that, start tracking your cycle. You know, doing basil body temperature is just can be so informative and it can help you learn your cycle. You know, are you typically ovulating around the same time or is it kind of all over the place? Are you ovulating at all? Are you seeing that nice thermal temperature shift that we would expect to see after ovulation?

So maybe tracking your cycle for about 3 months. And if you're seeing some maybe irregularities, then potentially try to to seek out some help to better understand what's going on with your cycle. Getting on a nice comprehensive prenatal.

What to look at when trying to conceive

I don't think that supplement should replace nutrition, but I just like to look at it as like an insurance policy. Fill in those gaps potentially. We can't all be perfect every single day. And you know, I guess it's a conversation for you and your partner, but just decide like, do you want to have a semen tested sooner than later? I don't think it's a bad idea. Maybe even if you tried for three cycles and it's not happening.

Probably not a bad idea just to get it checked out because there can be some easy thingable factors like you said. So I had a couple clients come in. One was using a sauna multiple times a week. one was using the hot tub maybe like once a week as his way to like relax. And these are just things that can impact sperm and some people don't realize that. And the like these are people who are trying to get pregnant for a while and it's like hey let's fix this and and usually then they're able to get pregnant within just 3 to four months after changing these factors which is amazing.

So, you know, I think a comprehensive blood panel for both the male and the female, I think, is really and I like to to take like a step back and look at the full picture with my clients, too. Yes, fertility is the goal. Having a healthy child is the goal, but ultimately too, it's about your health. You know, a lot of my clients are in their 30s, mid4s, and some of the things that we find on blood work, I'm like, if you don't address these now, this is a chronic condition waiting for you down the road.

>> So, I'm echoey. I don't know if you hear that. >> I don't hear that. Hear it? Okay. I just want to make sure that your audio isn't picking it up. I don't >> no there is on the audio echo cancellation if you click the little arrow by audio you can turn on echo cancellation see sometimes it's funny if you don't have headphones >> it's purple so I think it's in there >> I don't know why that's it wasn't happening earlier I don't want to change my mic cuz this is I mean I can deal with it. As long as you think your audio is not picking it up.

>> I'm not hearing it. Is it bothering you, though? >> I can I can figure it out. I just wanted to make sure you weren't hearing it, but you didn't want to interrupt me or something.

>> No, no, no. Luckily, I didn't hear anything. I heard something change, but it sounded like just something in the background. Nothing. Echo. >> Yeah, I'm not sure. It's okay. I don't mind.

>> Okay. >> I'm trying to think. >> So, I can I can respond to you now because I think you were talking about, you know, Yeah. doing a loting, looking at both partners.

>> Well, I love that you bring up both partners here because for one, I think there's a lot of emphasis sometimes on the female of like it's our cycle, it's us getting pregnant, but it really is 50/50 when it comes to, you know, male and female partners. So, I I appreciate you bringing that up and really looking, you know, considering looking at semen testing because, like you said, it's so simple to be able to see and give so much great information to know if there is a problem that you can actually change things. And and same with the testing too. I it's so funny to me, not not funny, haha, but you know, doesn't make sense funny that we don't look at things earlier because it really is an opportunity to just know, you know, our vitamin D levels, our iron levels. There's some things that are so easy to change that not only helps us get pregnant, but also can absolutely have a huge impact on the baby's health and that like generational health that's coming from them. And I love you point out how you point out too that their own health can positively be impacted.

That's one of the things that I love about it too that we're we're reaching people in a time where, you know, they're finally motivated to look at their health because they're trying to get pregnant, but it also has such an amazing ripple effect to their own well-being, too. Sauna maybe not so much, right? Like sauna is more just for it kills the sperm. it can be good for you otherwise, but other factors, you know, we can so easily sneak by doing things for our health because we're like, "Oh, it's not, you know, I don't feel terrible, but changing those now could absolutely have a massive impact on on the diseases or possible things that could come up in the future. So, I think that's such a a nice silver lining in, you know, doing this at this time as well. And with that, I want to kind of get into a little bit more of like unexplained infertility. I know that you talk about that and how it is just a very frustrating diagnosis to get. Can you tell us a little bit more about what that is and your sort of approach to it?

>> Sure. So, unexplained infertility, honestly, even that like I don't consider that a diagnosis myself. I think at the end of the day, whoever you've been working with, whether it's like your OB or maybe it's been an RE that you've been working with, they've run the testing that they are trained and equipped to do and maybe even just allowed within the institution that they work for as well. Sometimes doctors are just bound by certain protocols and things like that depending on where they work. They've run what they could and everything appears quote unquote normal.

So then essentially someone gets labeled with, okay, we don't know [clears throat] why you're not getting pregnant. So we're going to just say that you have unexplained infertility.

But in my experience, there's just a lot left on the table that has not been explored yet. So, you know, when if someone comes to me and they've been told they have unexplained infertility, I love for them to share what labs or tests have you done already, and I'll take a look at those myself. And usually, you know, the blood markers that the doctor is running, they're running some of the things that I would run, but they're not running everything.

And usually when we run like the whole comprehensive panel that I like to look at, we are seeing things that were missed. whether it's maybe they just looked at their A1C and their A1C was within the normal healthy limits but then I'm running a fasting insulin and it's like oh your fasting insulin is 20 so we need to address that you know it could be something as easy as that or maybe their CRP levels are elevated their homocyine a lot of times these are just not being looked at or even sadly like you said vitamin D sometimes vitamin D is not getting checked or they're just looking at TSH, but they never ran antibodies and I'm finding antibodies. So the the blood markers a lot of times it's just the full picture is not being looked at. So what they've run maybe fell within normal. But then there's another caveat too is the normal reference range within western medicine is not necessarily healthy andor optimal for fertility. So yes, a woman could have a TSH of 2.5, which falls within normal, but when we're talking about fertility here, that's not ideal. That's not optimal. So those things are being missed. And then there's just functional tests that doctors aren't looking at.

They're not running. And a few of them that are my favorites are running a stool test. And I know that doctor offices can run stool tests as well, but they're just not as comprehensive and there's some limitations to them. H pylori, for example, you know, I've had clients say, "Well, I had this test with my doctor, but it the H pylori has to be at a certain threshold for it to flag positive." So, a lot of times people are having false negatives, and then when we're

testing it, we're actually seeing, well, you do have H. pylori.

Why unexplained infertility needs deeper testing

And then since the test that we use is more comprehensive, it's showing other overgrowths, you know, you're low in these like keystone bacteria as well.

Your like your inflammation levels in your gut are also elevated. Your immune system is showing it's kind of struggling here. So, we're just seeing a whole other side of someone's health that is just not being looked at, unfortunately. And then even the vaginal microbiome. I have had a good handful of women come to me asymptomatic, but in the past they've maybe had things like BV, the doctor gave them medication and then on they went. Well, when we would then look at things that dispiosis was still there, there would be a few pathogens that have been found to be pretty harmful for fertility and miscarriage risk. and then they wouldn't have any healthy vaginal bacteria either. So, I just think a lot of it comes to not testing for certain things and then maybe some of the things that maybe maybe they've looked at just wasn't like a full comprehensive picture. And then if someone is coming in with like endometriosis or something like that, you know, doing a Dutch test is just going to really give us a so much broader picture of what's actually happening in the body.

And that's just not a test that your doctor is going to run. It's not covered by insurance. So yeah, just kind of digging deeper and looking at a lot of things that just don't get looked at. I like to say it's leaving no stone unturned. And then in some cases maybe we even have to do like a total toxin test and looking at are you suffering from like micotoxins or environmental toxins or maybe depending on where you live or the foods you've been eating for the majority of your life like maybe you have a lot of pesticides happening in your body or if pifas or anything like that. There's just so many different things and unfortunately in this moment the conventional model western medicine just isn't built to do that type of support and testing.

>> Yeah. Yeah. [clears throat] I describe it that you know the conventional medical model was designed for pathology, right? It was for those problems once they're already there.

>> Yeah. >> But it really isn't designed they don't have the tools to be really preventative and look at the big picture and support optimal health. they don't really think about that side of the spectrum. So, I completely agree with you and I, you know, I run all those tests as well and and find them so important to really, like you said, see the full picture to see, you know, maybe isn't something that is, you know, going to kill them or or create an obvious disease, but it could be enough, you know, and add in a few of those things, right? Maybe low vitamin D and their TSH being suboptimal and, you know, some some high mercury, something like that. and all of a sudden there are enough roadblocks to get pregnant or to have a healthy pregnancy.

So important. And I love that you bring up the vaginal microbiome, too, because this is something that I love. It's it's so interesting that our vaginal microbiome is so important for conception. I think a lot of people don't realize that there are actually some types of vaginal microbes that can even kill sperm and, you know, create a really bad environment for conception.

So, there's a really important piece to mention and same with the gut health. And I wonder if you could take it back there. Tell us, you know, I think for most people they think, well, what does my gut have to do with my fertility?

Those things are in completely different places. I mean, sort of, but but can you, you know, tell us why the microbiome in our gut is important with our fertility?

>> Sure. Yeah. So, when we're thinking about the gut, the gut influences pretty much everything in the body. And I know it does seem like it's this like closed off system that just kind of does its own thing, but our gut lining is only one cell thick, which is like mindblowing when you think about that because a cell is just so tiny, but that's how vulnerable it can be. So, so many things like stress or pesticides or just even like bacter, you know, there's so much food born illnesses going on right now, right? like there's just things being flagged on the shelves left and right it feels like these days and ingesting things like that. You know, I'd never realized this way back when by even having like traveler's diarrhea.

Like if you've ever traveled and you got really sick, that can still like wreak havoc on your gut health if you haven't necessarily properly addressed it, right? I've had that illness a few times just from traveling abroad. And what did we do back then? Oh, I just popped some cypro and called it a day and then I was fine. But, you know, was I like actually mindfully having helping my my gut being like reininoculated with healthy bacteria? Not so much because that's just wasn't something that my doctor shared with me and it just wasn't top of mind or something that I realized you need to do. But so, our gut lining is one cell thick. very easy for things to essentially cause what's called leaky gut. So things can move through the gut lining and move into the body. So that can cause a lot of inflammation in the body. And if you think about it, your digestive tract is pretty close to your vagina, right?

Which then goes up into the uterus and all of these things. I actually have one client that we are just still doing everything we possibly can to figure out what's been going on, but her vaginal microbiome was a mess and it took a few rounds of treatment to get that corrected. And then her gut also both of those tests were showing similar strains of overgrowths and that same pathogen bacteria has also been known to infect the uterine lining as well. So that is something that we are now exploring is is this happening you know under the surface. She doesn't have any symptoms which is part of the problem and also one potential like roadblock in western medicine is you have to have symptoms to start looking at these things but it's it is actually pretty connected because your gut is pretty close to the vagina. So all those things to say depending on like what's incoming into the body, food, environmental, all of those things, but also stress. Stress can play a huge huge factor in our gut health.

And when we have things that are out of balance, it's going to impact the absorption that our body is able to do. So you could be having like a a high stress job kind of like me. I was working retail, pharmacy, 12-hour shifts, on my feet all day, a 45minute commute, still on birth control for the majority of that time, you know, standing and eating whenever I could fit in snacks, and then I'm trying to think of where I was going with that. Oh, yes, you could be eating the best diet, right? So, clean. You could be taking the best prenatal and supplements that the world has to offer you, but if you have imbalances in your gut, if you have something like H pylori that's just going to impact the acid level in your stomach, you're not going to be able to absorb those things. So, a lot of times in my clients where we found that they're positive for H. pylori, we also run like a micronutrient test and it's just like red and yellow flags all down.

Gut health, microbiome, and fertility

So, what this test looks at is how are these nutrients actually able to get into the cell. So, like when you get a vitamin D level drawn in your blood, it's just kind of showing what is in your blood in that moment in time. This is actually showing like what is able to get into and be present in the cell. And a lot of times there's just so much insufficiencies going on here. Or maybe you could have someone on the other side of the spectrum, because I've had this too with my clients, waking up, rushing out the door, their breakfast consists of coffee, stress driving to work, maybe it's a 30 minute commute, and then maybe you're eating while you're driving, or maybe you just eat something like so small and insignificant when you get to work. Like I have seen that. And and these are people who've been struggling for years to get pregnant. And it so it can be these easy tweaks. And I know that that wasn't the question, but I just get so like passionate about it because I'm like, man, let's let's work let's roll our sleeves up and just kind of tweak and fix some of these things.

But just to kind of go back to the question, the gut can be impacted by a lot of things. Some things not so much in our control, right? We live in kind of a dirty environment. Like there's just so many things, pesticides here and whatever they're putting in the air around us. There's in our water as well.

There's, you know, residual things from medications in our water depending on what your water system is, which is one reason why filtering your water is so important. But there's a lot of things that can impact the gut. Inflammation can then get through to our body and it can impact what you are able to absorb from the food and the supplements you're eating. And it just all goes round and round and round, right? These are the nutrients that your body needs for your hormones to metabolize and eliminate estrogen. You know, maybe it's a gut thing. Not maybe, most likely it's a gut thing. If you're having estrogen issues, so many things could go wrong. But yeah, that's why in a nutshell, your gut is is connected more connected to your fertility than you may realize.

And it just plays a role in so many different factors of our body. >> Yeah. And I appreciate you and I know it feels

like it's like it's a it is a rabbit hole because there are so many ties there. And I think you beautiful described that that you know I I I love that you highlighted that even if we're eating a quote unquote perfect diet, we're doing everything right there that the stress about the diet can be a factor in even being able to then take those nutrients in and and can impact all the above.

>> So I appreciate that. And it's, you know, in particular with the microbiome, it's funny. I think we we like to think that we're very, you know, clean and sterile, but truly, you know, the microbiome gets mixed there between our gut and our vagina. It we know that. And it is, you know, so fascinating that now more recently, we know that even the uterus, like you said, has a microbiome as well. We we initially thought that was sterile, but it's not. And that is I think sort of one of one of the newest things that we're seeing in infertility issues that now we can look for chronic endometriitis and endometri endometriosis as well and you know look for these factors that can be playing a part.

>> Yeah. >> And on that I mean on that note how do you feel about you know you mentioned the vaginal microbiome testing there's some of the even like uterine microbiome testing. Have you utilized that at all or how do you feel about that? So, I haven't honestly had many clients have to go through that. I've had one come through that did some of those things, but yeah, there's a few different I know there's one where it tests the menstrual blood. I cannot the name of it for the life of me, but yeah, that's interesting. But as far as I know, it's pretty expensive. So, it could be cost prohibitive for some people. And then I know there's like the Alice and something else. But then of course if your insurance won't cover it. I'm not really sure how much those things are out of pocket. But I do have that one client I was mentioning. She's going to be doing the hysteroscopy in just a couple weeks here. So that's honestly my first client who's had to do that. But I know I won't name names, but the the brand of vaginal microbiome testing I utilize, they are really looking into and seeing some crossover in terms of being able to just do vaginal microbiome testing and it being able to kind of at least give us a bird's eye view of what could be going on in the uterine environment as well.

So more to come on that but ideally it could be as simple as that for some people. So then you don't have to go through such an invasive procedure like a hysteroscopy.

>> Yeah. Yeah. Yes. And I'm forgetting the name of the test also but right like you doing using urine blood. It's it's at least amazing that we have access to somebody and I know a lot of them Yeah.

like Emma Alice are done with a fertility doctor or OB as a you know again more invasive test and luckily I think most people don't need that in my opinion I think >> getting the sense of the general microbiome even just the gut microbiome is a really good step in the right direction like you said a lot of times it correlates but also doing the vaginal microbiome with something more accessible usually starts to show a better picture and then yeah I I fortunately haven't had any patients either who have needed need to go undergo that.

>> Yeah. >> Or they've undergone it with a fertility doctor already when we're working side by side. So yeah, but it's I I think it's just really fascinating that we we're getting more information. we're getting more tools so that when someone even though if it isn't very common for someone who is, you know, checking all the boxes and still having an issue that we have more and more tools and and a longer path for them to go down to really understand what's going on rather than just jumping to IUI or IVF, which absolutely are amazing tools, but without the things that we've talked about already is not a guarantee, is very expensive, and also comes with a lot of heartache when you're just going through procedure after procedure and not having great outcomes.

>> So yeah, with that, you know, you know, I I think already you've mentioned some very amazing practical things that people can do, but maybe what else, you know, for someone who's listening to this and they're like, "Okay, maybe getting some, you know, testing, looking at my diet, looking at these pieces." Are there some other, you know, kind of like practical pieces that you're really making sure that people are are doing early on or that you wish that people knew early on?

>> Yeah.

Practical fertility foundations

So, I I feel like these are just common sense things and I feel like I hear them a lot, but I do always myself appreciate a good reminder because it can be really easy to just forget things or maybe you're good at implementing a habit, but then maybe it falls off somewhere along the way. But I would say honestly in most of my female clients like the number one thing that has made such an impact for them and they can notice it almost immediately like at least within a week is starting off your morning by eating like an actual wholesome satisfying nourishing breakfast within 30 to 60 minutes of waking. So, I'm talking about around 30 grams of protein, nice healthy fats, and of course, you can have like your healthy complex carbs as well, but I think that so many of us are missing that piece.

Like, we're just go go go rush rush rush. Maybe if you already have a family and you're trying for more, it like it I get it. I I have a nine-month-old right now and I have a seven-year-old. So, like it's so easy to fall into this trap of you're so busy taking care of everyone else that you run out of time, like quite literally run out of time to take care of yourself. So, just being intentional with an actual nourishing breakfast and not one that's just super carb focused because that's just going to throw off the rest of your your blood sugar and your cortisol for the day. So, eating a really, really nice, healthy, wholesome breakfast. And then I honestly getting outside, getting that sunlight in your eyes first thing in the morning.

If you can't get outside, open up your shades, stand near the window, whatever you need to do. That's really going to help support your melatonin production later on in the day. It's going to help support your circadian rhythm.

Sleep is so important. I think that that's like one free thing that can have such a big bang for your buck infertility. And I think that it almost feels too easy for people that they just they don't take it seriously. But actually like being in bed by 10:00 and staying off your phone an hour before bed is another really good thing.

I think filtering your water and remmineralizing it is is really important too because if you do have a high stress job or stress from other factors in your life, you're just burning through those minerals so much faster and they're quite literally the spark plugs of like our body. So, even just a pinch of like a nice high quality sea salt in your water. I when I started doing that, I noticed just such a difference in how I felt during the day.

And these are all things that I implemented like probably at least 6 months before I got pregnant with my second. And we were not we were not trying it and and I was told I had low AMH in my 20s. So, and I was just about 36 when we got pregnant with our second.

So, I I think that yes, we can have a lot of downstream things happening, right? Whether it's PCOS, endometriosis, blood sugar dysregulation, but I think when you can really lay these foundational things, even if you don't do the testing, the testing can be helpful because it gives you a direction. But if you are someone who is just like give me a map and I'll I'll do it. Laying down the fertility foundations is going to help you and I feel strongly that like in most cases nine times out of 10 you should be able to get pregnant within 3 to four months.

So that's looking at that nutrition piece, your sleep, your stress, and then your lifestyle as well. >> Yeah. Amazing. You know, I love that you highlight even just that breakfast in the morning because I think it can be so it can get overwhelming, right, with all the things that we know we should do and we're trying to optimize everything, but that alone, like you said, can have such an amazing ripple effect on every other aspect of our life, our energy throughout the day, our sleep, all of it. So, I love that the things you highlighted there are pretty darn simple and just will make us feel good anyway and then again, you know, can have a positive impact on the food choices that we're making the rest of the day and our sleep at night and all of that. So, I love that. With that, I mean, thank you so much for for being here and sharing so much value with the listener. Where can people find you and learn more about your work?

>> Sure. So, I'm really active on Instagram. So, you can find me atthe_wwellness_fararmarmacist. And then on my website, happynourishedmotherhood.com.

You can find some of my free resources on there. I have a free quiz that honestly I would invite all of you to check out if you're on a fertility journey.

Where to find Dr. Katie Wood

It's called the ultimate fertility blueprint, but it kind of takes like a 30foot view at your fertility. It looks at your like your cycle health, blood sugar regulation, gut health, your partner of course because they are 50% of the equation.

And then it also looks at mindset and nervous system because that plays such a role in someone's fertility success than I think that we give it credit for. But you can essentially be doing all the right things. And if you are just in a disregulated, chaotic body, it's going to be really, really hard to conceive and also to carry that pregnancy if your body is just constantly constricted.

Like we want to be able to let go and release and and lean back and and be a little bit more in our like feminine energy, so to say. So, it looks at that as well and just kind of tells you where you may fall in terms of your fertility.

>> Amazing. Every We all love a good quiz, right? So, I love that. And I love that you're really looking at those those big pieces to give someone a good idea of where they stand with that. So, how helpful. Well, again, Dr. Katie, thank you so much for being with me today and sharing this incredible value. I you know, everything that you've mentioned here, I fully agree with. like like we're just so in line with how we approach things. And so I love I love that you're able to support people in this way and couples so that they can have a better experience on the conception journey and and produce just these incredibly healthy wonderful babies too.

>> Yes, that's what we want. Nice healthy babies and just generational health which I think is the best gift we can give ourselves and our family. So thank you so much for having me Dr. Miranda.

It's been a lot of fun. >> [music]