The Hormone Lie That's Been Repeated for 20 Years, and Why It's Finally Falling Apart Transcript

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Welcome to the Summit

Hello ladies, and welcome to the Future of Menopause Medicine Summit. I am your host, doctor Sharon Stills, and I'm just. I'm beaming. I'm so excited you're here.

These next five days are just going to be brilliant and provide you with so much information. So for those of you who don't know me, I am a natural medical doctor with 25 years of clinical practice experience and educating on women's health and specifically perimenopause and menopause.

And so we are going to take you through so many important pieces. But what I wanted to talk to you about this morning is the peace of hormones, because that is the biggest topic and there is a lot of information out there.

And unfortunately a lot of it is incorrect and confusing.

Hormone Safety and Myths

So I want you to know that hormones are safe for everyone, whether you have a history of cancer or family member of cancer, or even if you have active cancer, that I treat women with hormones to help balance their hormones because the whole estrogen causes cancer is not true.

That was from the Women's Health Initiative back in back when I started practicing. So back in 2002, a long time ago and it's been debunked. It's been falsified.

It's even been showed that the estrogen used, which was synthetic estrogen, which is what I never talk about. I always talk about bioidentical estrogen.

But even the synthetic estrogens reduced the risk of breast cancer. So I'm here to really help set the record straight for you. And one of the things I want to talk about is how you're getting your hormones tested.

A lot of women who come and fly to see us at our Lasting Wellness Center clinic in Scottsdale have just had blood work done, or they've had a dried urine test done, but they haven't had 24 hour wet urine collection testing, which is collecting all your urine over a 24 hour period.

So we can see the actual circadian rhythm and cycle of what your hormones are doing, because hormones don't just show up in a blood draw. And that's the story.

They fluctuate. They ebb and flow throughout the day. So we also then get to look your metabolites of your hormones to see what exactly are your estrogens doing.

Because just like children born to the same parents, you can have five kids. And yes, they have the same mom and dad, but they all have different personalities and different quirks and different things you love about them and different things.

You're like, I got to breathe through that one. So that's the same with different estrogens. The ones that we measure are E1, E2, and E3. E1 is estrone, E2 is estradiol, which you've probably heard plenty of.

Balcones estradiol has the best PR firm working for it, and E3 is estriol, which is actually my favorite estrogen. I won't pick a favorite child, but I will pick a favorite estrogen.

And so E3 is anti-inflammatory.

How Hormones Should Be Tested

It's all about the receptor sites it hits. And so E3 is hitting the beta receptor sites where E1 estrogen is hitting the alpha receptor sites and E2 is hitting both.

So what's the difference Alpha think acceleration. Step on the gas. Step on the flame. Step on the fire. Step on the proliferation and potentially abnormal growth.

The beta. Think brakes. Slow down the growth. Put out the flames. Don't fan that fire. Get rid of it. And so there's a big difference in the different kinds of estrogens you use.

And one of the fallacies is that is not important because most people are only looking for it in blood, and it has a very short half life. So you don't see it in blood work, but you would be surprised if you did a 24 hour wet urine test to see.

Well, estriol is actually produced by a lot of healthy young cycling women and sometimes even women post-menopausal. The little bit of estrogen they're still producing is estriol.

So it's very important when you're approaching hormones, which I'm never a one size fits all. Like I think everyone needs different things at different times of their lives and different seasons, and why we get an illness and how we bring our body back into balance is different for everyone.

But newsflash, menopause is not an illness. Menopause is a natural transition. It's one that I love being in, and I want you to join me and feel like that.

And so because it's a natural transition, there are some unifying factors that are what I need, what you need, what she needs, what she needs, what we all need.

One of those unifying factors is that we are losing our hormones, and we've been taught to believe that hormones are important for getting a monthly cycle, for being able to get pregnant.

And then unfortunately, we're taught that when we lose hormones, it means we get hot flashes.

Estrogen Types and Receptor Effects

We're not taught that hormones have an intimate role in every system in our body, from our GI tract to our bone health to our brain health. And we're going to dive into this in many of the interviews that I'm so excited to share with you in the coming days, but we need to think about what is something that's really important to do for ourselves as we're aging, that affects our whole body.

So obviously our diets, our movement, our sleep, our hydration, our purpose, our community, all of these things, our ability to let go of toxins, let go of what doesn't serve us or whom doesn't serve us, but we need to replenish our hormones.

And so the most natural thing you can do for yourself, the root cause of losing our hormones, is replacing our hormones. But that needs to be done wisely and sanely and appropriately and optimally.

I can't tell you how many women Doctor Ben and I see fly into our clinic, and they've been on hormones sometimes for five, ten, 15 years, and they think they've been getting all the protection because they're hot.

Flashes don't happen every day now. So certainly the hormones must be working. But when we test them, we find out. And it's one of the conversations I hate having is that they are not optimized on their hormones.

They're not getting the protection they thought they were. So the good news is it's never too late. And I know one of the myths out of there is that it is too late.

And if you've missed the window, you've missed your boat. But that is not true. We have patients come to us in their 70s, their 80s, and even their 90s, and we start them on hormones and they get benefits and they do wonderful.

And they get their lives back and their urinary tract infections go away, and they sleep through the night for the first time in 15 years, and they lose that stubborn 10 pounds, and that brain fog lifts and their energy returns, their libido even returns.

All the things and so many more that can be affected by hormones.

Why Hormone Replacement Matters

So it's really important to me as a physician that you get the truth, you get the honesty, you get the clinical expertise of what you know, what you need to know to navigate your menopause transition the best you can.

And so yes, I think everyone needs hormones. I always get around that I'm going to be buried with mine because I don't want to I don't know what happens and I want to just make sure I have them.

So I think they're really important. And if it's not something you want to do, you know, I'm not here to to make you feel bad about your choices. I just want to make sure your choices are being made from a fully educated place.

Because when we go on hormones and we monitor them and we take them in the right forms, so we do biased for our estrogen, we do compounded sustained release progesterone not filled with rancid peanut oil or artificial colors.

When we get clean, compounded testosterone and liposomal data and all the things oxytocin and thyroid support and adrenal support. When we do all these and they're done as a system.

I used to say hormones were a symphony, but lately I don't know why. I'm not really a baseball fan, but I've been saying their baseball team and so a winning baseball team needs their pitcher, right?

Pitcher is really important, but they also need their first bass player. They also need the catcher. They need everyone. And they're all working together and doing things together as a community.

And that's how our hormones work in our body. And so my hope is that by being here and listening and learning, you will have a better understanding of how hormones work and not be afraid of them.

If that's something you've been afraid of. And if you love hormones to make sure that yours are optimized so you're getting 100% bang for your buck of what you're doing with your bio hormone replacement.

Also, just newsflash, there will be an after party, so be sure to keep your eye out for my emails, because I know you're going to have a lot of questions.

And so after the summit, I'm going to go live, we're going to do webinars, and I'm going to answer all your hormone questions. So keep your eyes open for that.

But I just wanted to give you a little a little taste. I'm going to come live every morning and give you a little teaching and a little bit of inspiration and a little bit of woo.

I'm happy you're here, and I'm just glad to welcome you as part of our community.

Optimizing Treatment and Ongoing Support

I want to like, bow down to you. One, I want to say how grateful I am. I know there's a lot of information out there, and the fact that you're choosing me to learn alongside with it means a lot.

It really does. And I take that seriously as an actual physician. So I'm here to educate, but I am a clinician. I have been in the trenches for 25 years.

And so clinical practice often teaches things that you just can't learn from a lecture or from a textbook. So I want to say kudos to you for taking time.

I find that a lot of my patients who first find me on the summit, they're literally smarter than there will be GYNs than their primary care doctors, and they're endocrinologists.

So kudos to you for taking time to support and for yourself. Gratitude to you for being here. And just to recap about hormones, you want to have them tested 24 hour wet urine testing.

You want to have them properly read so that your reports, your test results have meaning because it needs to be interpreted properly. You want to be prescribed for properly, with the right doses and the right forms, and you want to be monitored properly.

And of course you want to do hormones within the context of so many of the things that we're talking about here at the summit, whether it be opening up your fascia or making sure your energy is flowing or working on your gut, or making sure your bones are healthy, you know, sometimes you'll hear me say, you know, just being present.

Jason Prall and I had such a great talk about being present. And so you'll often hear me saying that, you know, this is so important. I know you're here to talk about hormones, but this is important.

So I just wanted to come and say yes. Hormones are a big, important piece. Healing. I look at it as like a gluten free, dairy free pizza pie. And in menopause, I'll give two slices to hormones.

But that doesn't mean that all the other slices aren't important. So I just wanted to drive that point home. Yes. You're not going to breathe your way or drink your way.

Not alcohol, but like hydration, you're not going to move your way out of a hormone deficiency. But when you replenish your hormones properly and you do all the other things we're talking about over the next five days, Holy guacamole, you are going to step into your sacred second act, and you are going to love being in menopause and feel better than you've ever felt before.

So we're thrilled you're here. Yes, doctor Ben is my son. He practices alongside of me. Pro mama moment. So go listen to the talks, take notes, and I'll see you over the next five days.

And then I will see you in my community at the after party, where I will be happy to answer your questions. So sending you lots of love. I'm Doctor Sharon Stills, your host, and we'll see you in the talks.