Episode Introduction and Guest Background

Welcome to this episode of Hormones and Mental Health Overcoming Anxiety, depression and ADHD summit. I'm your host, doctor Cassie Smith and the functional medicine endocrinologist.

And today we're going to be focusing on the symptoms, the mental health symptoms of menopause. I've had a lot of questions about supplementation and more natural things that you can do for this.

So I have a treat for you all. I have the greatest formulator with me Sean Wells. So he's globally acclaimed. He's a nutritional bio expert. Biochemistry expert recognizes the world's greatest formulator in the supplement industry.

He's got a master's degree in nutritional biochemistry from the University of North Carolina at Chapel Hill. And he's got over two decades of experience of experience formulating over 1100 products distributed worldwide.

He has 40 patents, including BHP salts, dilution and some other things he's going to tell us about. He is the author of an an international bestselling book, The Energy Formula, which is listed as a top 20 book of the year by the US today and Forbes.

He's also a feature author on the Mid Valley platform with The Ultimate Guide to Supplements. His experience has been showcased in documentaries such as Biohacking Yourself, Supplements Revealed and Cycle Psychedelics Revealed, his personal journey overcoming Epstein-Barr chronic Fatigue syndrome and a pituitary tumor.

It's his passion for health and wellness. Sean offers full service product formulation and development in the dietary supplement, functional food and cosmetology arenas through his company called Zone Halo.

He also provides a wealth of information at Sean wills.com, and we'll link all of this in the notes, where individuals can find invaluable articles and insights to optimize their health.

For regular inspiration updates, you can also follow Sean on Instagram. He's very active on Instagram and all sorts of social media platforms. So thank you for being with me.

Wow. Well, I've been formulating supplements. I used to be a chief clinical dietitian working in skilled nursing facilities and acute care. Since about 20 years is is, how long I've been formulating.

There was some crossover there. And as you stated, I've been, patenting unique ingredients, formulating supplements, writing books, speaking all over the world, doing documentaries, all that kind of stuff. And, it's been amazing making friends like you.

Yeah. Yeah. And we were talking before this how you were at a forum, which is one of the biggest, I think, the biggest biohacking functional medicine conference in the world.

Every year. So you were speaking there, which I thought was awesome. You did a great job. Oh. Thank you. Oh. Yeah. What are.

Rethinking Menstrual Cycles as Superpowers

Do you have anything in particular you're working on currently or you're excited about currently in the field or the realm of like menopause, women's health, mental health?

It's a big focus. For sure. I am, I formulated a supplement for the famous influencer Aggie at Aggie. She has well over a million followers on Instagram alone.

That is really for, I would say pre menopause, but for kind of regularity, reducing, menstrual cramps. And, and negative menstrual symptoms. I like looking at all four of the phases as four seasons.

And instead of, you know, one of the things that was a big shift in my mind is instead of looking at these things as a big negative or frustration, you know, I'm I'm a woman and I have to go through, menstruation for x amount of years.

I look at it as a superpower. You know, women have intuition. They have this ability to, obviously be fertile enough to grow another human being to create humanity.

Like, if I stop and think on that, that is incredibly powerful. No matter if you're going to have a child or not, you have the ability to create inside your body, inside your womb, to create another human being, and then maintain that human being through the nutrition from your breast.

And I think this is why, like, you know, we whenever we talk about creation, we talk about this, feminine energy. And so that's very powerful. And this ability to be fertile.

Cleanse, reset. It's just it's it's amazing. And it's one of the reasons that, women actually live longer is they ability to shed iron, unlike men. You know, men tend to build up toxic iron stores.

So I look at these things, and if you look into four different phases, the luteal, menstrual, follicular, ovulatory, you actually see that each phase has different superpowers where you're more extroverted, where testosterone is high, or where intuition is higher, where you're more introverted and need to kind of, take time to have self-care and just being aware of these four different phases instead of powering through like you're a man, I think is really important.

And I think there's going to be a huge shift when we start looking at things accordingly and say, okay, this is the phase you are in now. Here's how you should train.

Here's how you should work. Here's how you should connect to others. Here's the food you should eat. Here's the supplements that you should take. And instead of again looking at these as a as a frustration or a weakness, if you're looking at the world through masculine eyes, it would be a weakness that you can't be as masculine.

But if you look at things as as through feminine eyes, now these are super powers and you just need to know how to hone them and be more aware of them.

And the same is true. You know, when you're talking about pre, Perry and postmenopausal too, they're just seasons. They're phases and they're super powers and all of them.

So for me, there's, a shift that I believe is going to happen. And, maybe it's the woo side of me that, you know, I believe that we're heading into this is going to get kind of woo for a second.

I've done psychedelics and so you know, I believe that we're heading into something called the Age of Aquarius or the the kind of Christ consciousness, like a new era of a real shift towards like what's been dominated by masculinity, I think, is going to move into an era of, of maybe a rebalancing, with feminine energy, where they're truly balanced, kind of like yin and yang, I think where we're coming into that era.

And I think you're seeing, more studies happen, with women. I know they're, they're lacking in they're certainly more expensive, a little bit more complicated.

But you're seeing, studies and a desire to to have those studies, a real impetus for that. So, I don't know that that's just some thoughts around, like, you know, women in medicine, in health care, in research and the kind of shifting of that paradigm.

So women were a little more expensive and a little more complicated, but were worth it is what I, I. Agree, yeah, 100% health improvement. Yeah. Because without us nobody's having any babies.

So yeah thousand percent. Yes I agree. Yeah. No I couldn't agree with you more actually I think it's, you make really good points. I think there's a lot of women out there who are very driven.

And when you put them in an arena, the world, you know, they're just go, go, go, go, go. And you make a good point. Like our body, we have different cycles.

And so we have this powerful three, four days of our cycle where our estrogens higher, testosterone is higher and our progesterone is high. And I say all the time that if you put women in a room for those 72 hours that we're all in their ovulatory phase of their cycle, they could solve all the world's problems, like done.

So. It used to be called the Red tent, like, with Native Americans, where people would go get wisdom from women that were elders, that were, I say, elders.

They were still menstruating, but they were certainly more experienced. And and they would go into the red tend to get to get advice, to get wisdom. Know it's true.

And then, you know, everyone's a little different. But there are certain parts of your cycle, you know, when your progesterone tie, like you said, and it's just like you need more self-care time.

You need just more, you know, less stress. And so when you try to put more stress on yourself in that time, it doesn't go well. And so this actually happened to me recently.

So I'm writing a book right now and I have this time line ish, but I'm kind of putting it on myself. And so this last week actually, like I had all these meetings set up because I was going to finish writing this book.

It's not a good week for me.

Stress, Hormones, and the Menopause Transition

I'm I'm in my luteal phase, like I need to be resting and need to be sleeping, and I'm just tired. And we just got back from Vegas and it just it went so bad on Monday, like so, so so bad.

I was almost in tears. And I like because I can't do anything halfway. I have to do everything amazing. And and they're like, no, it's going okay. I'm like, oh, it's going okay, but it's not going like, what I want to come out is not coming out.

Just it wasn't fabulous. And so on Tuesday, we were supposed to meet and I was like, I'm done. Like, we're not doing it this week. So we didn't meet Tuesday.

We didn't meet today. I think I made everyone mad, I don't care, we're going to meet in two weeks and I ran back in my like, powerful face. I'm going to just take a minute. I think I'm this is going to get into a deeper conversation.

But, like, I feel like and we can get into the supplements. But I do feel like because we're in a masculinized world, and I don't mean that as a negative for for men, I'm all for like healthy, divine masculinity, holding space, being protectors, providers.

But men are kind of straight forward thinkers, the logical thinkers. And we're driven by KPIs and and we're competitive. Were built to be competitive.

You know, it's it's survival of the fittest. It's all that kind of stuff. And that's not how women are built. And we're forcing women to work these workweeks like they're men.

We're forcing women to eat like they're men, fast like they're men, operate like they're men. And and we're even getting studies like they're men. We're getting, you know, research and supplements and medications like they're men.

They're not men like, you know, and women shouldn't be men. Like, it's just it's, we're we're two different energies, and we're both equal but different and we're complementary.

It is the yin and yang. It is the the balance when brought together. Yeah. No. It's true. And the more you fight it like I tried to fight it Monday because Sunday everyone's like, we're doing it, we're doing it.

And it was just it was so bad. Like, I know what I'm capable of. It was so bad. Like, I was almost in tears and I was just like. And then they said, oh, it's a it's fine.

We'll just try again tomorrow. And I was like, we're not trying again tomorrow. Like, I'm going to sleep tonight and I'm going to sleep in tomorrow and we're not trying it. So, yeah.

The one last thing just I mean, just think about, you know, the lunar cycle, you know, 28 days of the cycle. And this is like spiritual. It's cosmic that you're, like, attached to tides, that you're attached to gravity, that you're attached to.

Planetary movement. And then women sinking up with their menstrual cycles and circadian rhythms to to some degree there is like some fertility sink there.

That's like evolutionary. And we're just denying all of this in a way that doesn't make sense. Like we're, we're we're trying to, again, operate in a, in a masculine environment as women.

And that does not might make sense. That will not work long term. You're going to hit a wall. It's going to be frustrating. You're going to burn out. Women need to be creative, need to be intuitive, need to be, self-care and nourishing for themselves and for their, their home or their their nest, if you will.

And that's what that's what women are built for. They're not built for the environment we're creating. Yeah. No, I agree, that's, that's a good point.

So and I think that's what drives a lot of the anxiety and stress and ADHD type symptoms that women think they have or get diagnosed with. Because it's this lack of self-care, this lack of self-awareness, this lack of self, like listening to your body.

Right? Like as I get older and my intuition just gets better, I three years ago, if there would have been a bunch of people on a phone call that said, no, we're doing this tomorrow, we're going to do it again.

I would have went home, I would have cried. I would have stayed up all night. I would have tried again. I was like, nope, I'm done. I'll get back to you when I feel better, you know, like, nope.

Not happening. Because if you don't do that, like you said, then you end up very anxious, you end up very depressed, you end up like it just doesn't work.

And so I think that's where a lot of these symptoms come from, especially with women. Now, when you have hormone shifting that is shifting or not shifting how it's supposed to or whatnot, because you are stressed, your insulin's high, your cortisol is high, it affects your progesterone and estrogen.

I think that makes it worse. I think there's also a lot of women going through menopause or perimenopausal at much younger ages. I see that all the time because of this chronic stress too.

So I think there's a lot of lifestyle things, which is what I'm working on in this book actually talking about. And your how your gut plays a role in all this as well.

It's very interesting how much stress affects your gut and what it does to your hormones. I think that's what causes a lot of this. Right? So what I mean, I guess talk to me about we're going to leave out lifestyle and all that.

We're going to just kind of focus on supplements. What supplements can people take to help with some of these

things with symptoms as they transition through, you know, from perimenopause to menopause for like hot flashes for insomnia.

And then we can focus on the mental aspect of it. Right? So first and foremost, when I'm thinking of my book is the energy formula. And I talk about resilience, I talk about, allostatic load Allostatic capacity.

That's the size of your stress bucket. I even mentioned terms like, being fragile or antifragile. Being harder to kill is kind of the masculinized version of it, but it means that you are resilient.

You can take on stress. You have the capacity to take on new or extra stress. If your stress bucket has extra room in it because of. For me, it is because of you taking on stress from time to time.

You can grow your bucket. When we're chronically stressed really bad, when we're occasionally stressed, really good. Because not being stressed means that your stress bucket will stay small, that you will be very weak and easy to kill.

Same on the other side. When we're chronically stressed, doesn't matter how big the stress bucket is, it's overflowing. You can't take on new stress, easy to kill.

So what we want is to have periods of ease and periods of unease, and then we can avoid disease. So ideally, where I like to start is adaptogens. This is going to bring you into balance.

Speaking of yin and yang, masculine and feminine, we're talking about balance. So it's going to create more resilience if you're low and blood pressure high and blood pressure low and blood sugar high in blood sugar.

If you are, low in testosterone, high in testosterone, etc., it's going to bring you into balance. This is going to create a greater resilience, a greater centeredness, a greater capacity to take on mental or physical stress.

So things like ashwagandha, rhodiola, mocha, ginseng, etc. these are going to be, amazing when it comes to having greater resilience. I like to use one for a month and then cycle to another one and then cycle to another one.

I don't like to chronically stay on the adaptogens. They each work a little bit differently. But they're all working on that same concept of bringing you into balance.

Okay, so adaptogens are one to just kind of help in general with stress. Talk to me about. And by the way, most people are stressed. I look at stress markers all day.

Yeah, I look at cortisol levels. I look at ESR and cups. Yeah. Oh my goodness.

Adaptogens and Core Supplement Foundations

I look at insulin levels and it is difficult to find people who aren't stressed. I saw an 18 year old yesterday, an 18 year old boy whose CRP is more than 20 and his insulin is 88, and his cortisol was like 20 something.

And I was just so. So this working. For you, living like you. Well, this works both ways, as I was saying. Like, yeah, this is kind of like the idea of like that, hedonic scale, like with, with pain, right?

When you're, when you're in the hospital or nursing home, you're like, you have like this scale of pain and you have, like, the happy face on one end and the smiley or the sad face on the other, and, you know, but basically pain is variable person to person, right?

It's it's, it's it's not like, pain translates like from me to you. Maybe I can experience more. Maybe the type of pain is, is that I can experience is greater, but you can experience different types of pain, greater.

So it's variable, right? So it's the same when we talk about this stress and what you can take on. Because like what

you're saying also is that if that stress bucket is small, if they're metabolically dysfunctional already, right, 93% of the population is metabolically dysfunctional, which also means that they're mitochondria dysfunctional, which also means that they're in states of insufficient cellular energy, which is called Ace, an acronym, which also means that they don't have enough ATP to run the system, which also means that you're going to run into elevated insulin, elevated blood sugar, elevated, inflammation, oxidation, faster biological aging, shortened telomeres, less sirtuin gene activation, on and on and on the whole system is like overwhelmed because there's not enough mitochondria.

And the ones that are they are not functioning optimally. And this actually happens both ways too, from blood sugar being too high. And then it's creating more inflammation.

Oh, there's more inflammation. It's creating more blood sugar. Oh. Like you have more stress, but you don't have enough physiologic bandwidth to deal with that stress.

Oh that's creating higher insulin and cortisol at that higher insulin. And cortisol is creating more inflammation. Oh. Like your testosterone is down because the cortisol is so high and that ratio is very poor.

So now you can't, have sex like you want to say. Now you can't connect. Now you have shame around that. That creates more cortisol. That creates more inflammation.

Yeah. Like this is like this spiral. And then you add in seed oils and, you know, high glycemic foods and all of this stuff. And it's certainly exposure to, metallo estrogens, phyto estrogens, you know, all of these endocrine disruptors.

And those are throughout our environment. So much so now that they call them like NPS, with the nano microplastics like that, we're getting exposed to that.

We're seeing in the brain, in the penis, in the ovary. So like throughout our tissues, we're seeing them in icebergs. We're seeing them down in caverns.

We're seeing them up in clouds, 30,000ft up. We're seeing we're seeing them at the bottom of the ocean, like in the Marianas Trench and stuff. We're seeing microplastics and nano plastics everywhere.

And these are having a massive impact on us as well. So, you know, this is like this whole thing that's happening and our exposure to emfs and blue light and our disrupted circadian rhythm that we're trying to override, and we can't get to sleep.

I mean, this is all leading to all of this, like, and we're seeing, you know, all of this happen at like, record rates, autism, ADHD, like cancer, like all at record rates.

Yeah. And then your gut makes it worse too. Right? So the seed oils and everything, you know, I look at gut studies all day. People have leaky gut and your gut starts leaking.

Then all those lipo, you know, polysaccharides and everything that you're eating in the red 40s leaking out of your gut. And then that's giving a feedback to your brain, in your body that something's wrong.

So then interleukin six is release and tissue necrosis factor alpha. And then there's more inflammation. And then your cortisol is higher and then your insulin's higher.

And then people are like why am I walking around with a big gut and why can I lose weight? Well, because your body and. There's a link right now to. Yeah, I mean, that's a kind. Of yeah, yeah.

And stress. You know, your vagus nerve. You know this I have a whole chapter on this in my book. Like your vagus nerve is so important for digestion. And so if you just walk around chronically stressed, you're not digesting, so you're constipated, you're not releasing secretions in your GI tract, so you're not digesting your fat.

I mean, there's so many things that play into your gut as well, just from stress. And so, you know, it's just it's it's really sad how many people walk around with all of these symptoms, especially a, you know, depression, anxiety.

But what really infuriates me is then they get put on these medications with all these side effects, right, like SSRI. And you do not have a side effect.

There is not a an vilify or, you know, Prozac defect that does not exist. Okay. There is a problem here that we need to figure out what it is. And especially when you're transitioning through menopause.

Like that's why I'm so passionate about this and we're doing this summit. I see so many people who are perimenopausal or becoming menopausal. They go to a doctor, hey, I'm, you know, I feel depressed and I'm tired and I, you know, I'm having hot flashes in my breast or Tinder and they give them all these symptoms and the doctor doesn't know what to do.

They don't know what. The answer. Use. I don't know what to do with. Here's a pill to make you shut up. And it's frustrating because those pills have more side effects.

And oh, by the way, I have a chapter in my book too that talks about how all these medicines we give people also affect their gut and make it worse. You know, like, I don't know.

Well, women, I've been told that they're irrational for a long time. And, you know, often a treatment this is barbaric. Was removing your reproductive organs as a result.

This was done like, throughout history. It was a cure for irrationality of women. Was to do these hysterectomies also, like the word lunacy comes from being affected by the moon.

And like, women were considered crazy as well. There's I mean, this is all throughout like medical history. So this is where the paradigm is shifting.

And we do need, female medical doctors and, and, and female researchers and female dietitians and, and female pharmacists and, you know, people that are all stepping up across the board.

I'm. Yeah. I'm so glad that you're, you're bringing this, to attention. And I totally agree about the the gut microbiome and the hollow beyond in general, which is the the hollow biome.

Is, is is kind of like this six foot orb around you and how you're interacting in space with the microbiomes of everything else. If you're if you imagine, Charlie Brown and like Pigpen, do you remember that, character with, like, that dust cloud around him?

Yeah, that is your your microbiome. And it's like interacting and speaking. They actually outnumber your cells 10 to 1, and they communicate on a very, primal level.

I think that you don't understand fully similar to, like, you know, oh, like, there's, there's, like deep levels of communication, even electrically, that we're not even aware of.

We're just starting to become aware of, you know, and there's all kinds of communication that happens before you open your mouth. And this is all a part of survival.

And, you know, whether you're safe or not, whether you know, they've done studies on, like, women smelling a man's clothes and they can, like, tell whether he's like, fertile or like, you know, ideal in terms of a mate or not.

They can tell if, he was just afraid of something and then fear or not, just from smelling clothes. So, you know, there's there's a lot going on in terms of our microbiome that we have yet to even discover.

So what supplements can women take to help their hormones? Let's focus on that. Like what do you recommend

for hormones? Whether it be like painful menses or, you know, transitioning into menopause, hot flashes.

And then I want to talk about anxiety, depression once because I know you, you have a lot of good tips for that. Right? Right. So I mean, there are there is hormone replacement therapy of which prior to maybe I always recommend working with someone like you, getting the data, getting a baseline, understanding where where you're at and where you're trying to go.

But you can potentially at least use, progesterone, use DHEA, use melatonin, use vitamin D, these are hormones that you do have access to over the counter.

You know, beyond that, you know, you can look at testosterone, estradiol, etc.

Magnesium, Vitamin D, and B Vitamins

and, and, you know, again, working with someone like you, if that's a path that you want to go down with, with bioidentical hormones, you know, Doctor Amy Killen is a friend of mine, and she's a big advocate of these things and often talks about how that research is very misunderstood, often by, male doctors on how these things are, you know, potentially harmful and going to grow cancer and all of these kinds of things.

But beyond that, as far as supplements, I do see a lot of value that there's two big things that I always see, like almost all human beings are deficient in.

And these are going to be really important for immunity, blood sugar and, and stress. There's going to be magnesium number one. And vitamin D3 is the other.

I probably see 70 to 80% of the population deficient in those. Certainly from an optimized standpoint, you could argue 95% plus of the population is is not an ideal standpoint deficient?

It's over 70% for both. So those are going to be important to be on. You would watch like a woman, like if especially a woman with magnesium massive like you'll see improved sleep, improved bowel movements, improved brain function, improved blood sugar, improved immunity, improved resistance to fractures.

Improved muscle contraction. I mean, it just goes down the line with magnesium. Do you need to be on a variety of different forms? Not necessarily. There are some minor benefits of these different forms over the other, but it's really from that salt that it's connected to that's going to give it a little bit more extra.

So like magnesium malate might help with you know, pain and, and and muscle aches. Magnesium oxide or carbonate might be better for bowel movements. Magnesium three and eight might be a little bit better for, brain function.

But ultimately just getting enough magnesium is very important. One of my favorite forms, it's a great phrase that's highly bioavailable is magnesium glistening.

It's probably the best bang for the buck. And again, like, if sleep is an issue and a lot of women are not sleeping appropriately because they have kids, because they're the matriarch of the home, because they're working crazy work hours and because they're not acknowledging their menstrual cycle or what have you.

And it's just so much, you know, then then they're just not getting enough sleep. Magnesium can help tremendously, not only with sleep, but with stress.

Going back to that idea of the stress that we're putting on the body. And don't think stress just means like, stress, like stress in physiology means, there's like something that's difficult for your body to take on so the stress can be you working out.

Stress can be fasting. Stress can be. Yes, it can be mental. Could be, you know, losing your job, someone,

breaking up with you or what have you. But there's a lot of stress and stress isn't always a negative.

Again, stress can be a good stress. A you stress, you stress. And that helps us grow stronger. It's just chronic stress. That's the issue. And so immunity is a big issue if your immune function is compromised and a lot of people have, immune function that's compromised, I like looking at some of those things as well.

I know you'd probably see that a lot. But again, you know, it's like kind of which side this is all coming from, like, the body's falling apart and like, we're seeing a lot of different things.

We're seeing that stress, high blood sugar. I don't have enough energy. The immune function is, you know, it's like, where is it? But you can address, like, each of those parts and at least get some things under control.

And then you can figure out your epigenetics, your gut microbiome, like what if we try this hormone, you know, things like that. But, going back to what I was saying earlier, vitamin D3, incredible as well.

We used to think that was related to fractures, but now we understand it's more of a hormone. And truly, there's this whole endocrine. You could speak to that.

You're the endocrine endocrinology. There's an endocrine cascade. And I think people don't appreciate that. Like they think of these hormones like, as, they're in a vacuum, but really, like, there's a, there's, they're reversible and they're affecting each other and it's, it's this beautiful homeostasis that's taking place again, kind of going back to that yin and yang from God or creator or source.

And that cascade is something that you need to be aware of too. And having an expert in the endocrine system is going to be helpful, because when you kind of reduce one or increase the other, it can it can have a number of effects.

But we do see vitamin D3, in particular very low because we're not, exposing our skin like we used to. Right? We have like we're all like clothed, especially if you're in northern climates, especially if you're darker skin, in particular black skin, you're not going to get enough vitamin D3 if you're in northern climates, you need more sun exposure.

If you're black, you need more sun exposure. So, you know, there's most of the people in the world are not getting sun, period. And then they're also in northern climates.

They may also be black or darker skinned persons of color, and they're most certainly not getting enough vitamin D3 again, like it's it's pretty much at a pandemic level.

And speaking of which, with Covid, if we got more vitamin D3, they could have had a massive impact. Yeah, and D3 deficiency can affect your mood as well.

So yeah, I completely agree with that. I you know, I've told people this, I diagnosed Detroit cancer. I do biopsies needle biopsies on thyroid. So I have an ultrasound machine.

And I mean that's something I learned in fellowship. So I still do it just for my patients. I don't have to go somewhere else. I've diagnosed now a hundred people with thyroid cancer in eight years with needle biopsies, 100% of the 100 people have had vitamin D levels of 20 or less.

That says something, right? So like whenever I do a biopsy, I can usually kind of tell by the way it feels. And so I have a thing with my staff when I do a biopsy and I give it to them and I'm like, what's their vitamin D?

They usually know. And they're like, oh yeah, sad. I'm like, okay, well, just make them an appointment on Friday because we're to talk about it like, I mean, it's just it's pretty.

And there's a study that shows when your vitamin D is less than 20, your monocytes and macrophages don't work. Which are the cells in your immune system that help fight cancer.

And you're 16% more likely to develop cancer for the vitamin D of 20 or less. So it's I mean, yes, it affects your immune system, but it also affects a lot of other things.

And and I can get into like things like, evening primrose oil or borage oil or why or some of these things that I do think have value. But I also think like some of the basics, like are being missed and, and the reduction in stress like another one is the methylated B vitamins.

I think women are, are often anemic. You know, just thinking, oh, it's iron because, you know. Yeah. Sloughing blood and, and, shedding blood and I'm not, you know, not getting enough iron.

And that is true to some degree. But there's also folate and B12. Up to 40% of the population has an MTT for, dysfunction, where, you know, they're not converting, folate to five methyl tetrahedral folate, optimally the ideal form of folate, the active form, the coenzyme form.

And they might be poor methylated on top of it. And so they're not converting like even, you know, supplemental or food based B12, hydroxy co barmen or cyano cabal.

And over to methyl cabal or things like that. So that can lead to anemia, that can lead to fatigue. Certainly the B vitamins have a ton of data around stress and resilience as well, and immunity in particular. B6.

Yeah. So if you had to pick one supplement that you think would be best for sleep in general, somebody who's having menopausal issues supplement, what would it be?

Magnesium would be the foundation. Magnesium B6 would be the foundation that I would get into, melatonin. And, you know, some of the low dose I know that's controversial, that I would do low dose because, the reason I would say this, unless you're wearing, like, blue light blocking glasses and like, not eating in the evening and doing all these things that are counter to our circadian rhythm and counter to our evolution, our physiology, which we are we're eating late.

We're getting all this blue light. We're getting exposed to devices, TVs, cell phones, iPads, whatever, that's blocking melatonin.

Sleep Support and Hot Flash Relief

So people are like, oh, like, you know, your exogenous melatonin is going to compete with your diet. Like, yes. And no one's making enough melatonin as far as I can see.

So, I do think using a low dose melatonin can be helpful. If you haven't explored all of the ways to reduce blue light and and optimize your circadian rhythm.

Doctor Sachin Panda's data is amazing around that. What about pregnant alone? Do you ever recommend that so your body can make your own? I do, I recommend it, like exogenous pregnant alone?

Yeah, yeah yeah I do. I always think it's ideal to replace something short term until like you can kind of get things under control and then like then we can like seek out like kind of a more holistic approach is of like, you know, ridding yourself of all these toxic cleaners and shampoos and, and reducing EMF exposure and reducing blue light exposure and eating an optimal diet without seed oils and, and, you know, hypoglycemic foods and getting to bed on time and, you know, getting enough sex in your life, you know, all these things, by the way, that has some of the most powerful data.

Unbelievable. Doctors never talk about it. It's insane. Its effect on the immune system, on happiness, on longevity, on resistance to diseases, like just having intimate sex with an ideal partner, profound impact.

But that's, you know, I do believe in, in supplementing with these things until until you can kind of like, it's kind of like, like, let's get the fire under control and then we can start, you know, building the building, right?

Yeah. It's that kind of thing. So I find sometimes people tell me, like, melatonin gives them a headache, you know, or they have like this rebound headache in the morning.

So that's where I use a lot of pregnant alone. People like that. What about hot flashes? If you had to pick one thing, if somebody's struggling with hot flashes and they don't want to do estrogen for whatever reason because they haven't listened to all my podcasts that tell you the million reasons you should take estrogen, what would you what would you recommend for those people?

It would be those two things that I mentioned actually before. Like it's a high GLA source. It's that gamma linoleic acid. So that's from borage oil or, evening primrose oil.

Okay. And then also, Dunkley is a really good, herb that's been shown to be very effective on that front. Is that for Edie to erectile dysfunction, you know.

Yes. There it does have an adaptogenic effect. It seems to be like, put in this female box, but, kind of like mocha, like for libido, which is an adaptogen.

It's like, put in this, like, masculine box. But mocha is very effective for both genders. You know, this goes back to the idea of, like, we think of erectile dysfunction as a male thing, but it's really a, both genders, right?

Like it's blood flow to the phallus. So it's the clitoris or the penis with Pde5 inhibition is the mechanism. But that's important for men and women. For women it's going to be sensation, orgasm, wetness, etc.

the ability to be intimate and enjoy it. And for men, it's just a little more obvious when they're not getting enough blood flow because you can't even perform.

Period, let alone it's, you know, for a woman, it can be, you know, she may be too dry. She may not get enjoyment out of it. You know, there may be some pain associated to those kinds of things, but with men, they can't even perform.

Period. And then I must say, on both sides, there's embarrassment and shame around that. So, you know, blood flow is an extremely important factor. And so increasing nitric oxide, is going to be important.

There. And by the way, speaking of microbiome, the oral microbiome, you're killing it if you're using mouthwash, alcoholic mouthwash, you're killing your entire oral microbiome, which is killing your ability to make nice nitric oxide.

So if you have trouble as a woman or a man getting enough blood flow, you have to get rid of the Listerine, the scope, all that kind of stuff. Yeah. What about so let's transition to anxiety, depression.

A lot of that that you do as you transition into menopause. Now a lot of that is lack of hormone. So I agree with you. It's really important to find a provider that understands hormones because you can fix a lot of this with hormones.

I take people off of seasoning anxiety medicine every day. That is like one of the happiest things that I do. I take people off statins and I take people Thursdays and I take them off of sleeping medicine, tragedy and all these things.

So just real quick, those are all criminal things. The cholesterol myth is disgusting to me. It is, the higher the cholesterol, the longer the longevity.

There are tribes like of Eskimos that have cholesterol is in the six hundreds and zero incidence of heart attack. Yeah. And especially if you look. At their there's, there's a meta analysis from 2017, 2022, both meta analyzes showed that, they cause more harm than good.

And we shouldn't be using them. Especially in women. So this is what really fires me up, Sean. There's no studies in women. Zero. Studies in women for cluster or for stands.

Right. So but they extrapolate the data from men on to women. We are not the same people. Number one. Number two, there's actually the Seattle. There's a Seattle study that showed that women that have been on statins for ten years or longer, over the age of 50, have a 90%, 92 to be exact, percent chance of developing breast cancer compared to the general population of about 1 in 4.

So it's giving women breast cancer. According to that study. And you're putting women on it with zero data because how many women out there on it for secondary prevention?

And then that's been extrapolated from a man primary prevention data has been extrapolated from a man. Let's use our brain and actually check the lipoprotein.

A this is my favorite thing to do. I saw right. Her LDL was like 135. So her primary care doctor puts her on a statin and never checks it again. I never take her off of it.

I check her LDL 35 geez, her poor brain and her lipoprotein is less than ten. Okay, yeah, and your triglycerides are like 70. Like, I don't give a shit what your LDL is like.

I don't care 200. You're not going to get sticky particles that are. It just, it makes me so mad. You know, not the bad cholesterol. That is a complete math.

I agree with you on lipoprotein. A being the best cardiovascular health measure. It's all people. It's very frustrating. And, you know, if you think about what is a statin going to do that lowers cholesterol.

And again, cholesterol is what's protective to your cardiovascular, but also the lipid bilayer around the cell. Every cell in your body is made of cholesterol.

Every sex hormone is going to your brain is largely cholesterol. You're all the sex hormones that you're interested in testosterone, beta estradiol, a strong progesterone, DHEA, they're all cholesterol based.

So of course you're going to lower testosterone, lower estrogen. It's it's stupid. And then also you're lowering, CoQ10. And then that's why you're getting these muscle cramps and you're getting mitochondrial dysfunction.

You're not making enough cellular energy. It's all a giant scam. It's very upsetting. It's it is. And the reason women are getting heart disease is because they don't have estrogen, not because they don't have statins.

There's not a statin deficiency causing this.

Anxiety, Depression, and Medication Concerns

There's an estrogen deficiency. And so I pride myself in trying to take people off medicine every day. Like that's what I do a lot of people look at me like I'm crazy.

Eventually they're like, maybe she's not, but I love taking people off size as well. And like tramadol and sleeping medicine, things like that, like that stuff is all garbage.

So that was the last thing I'm going to mention. And then I'll get into some supplements is benzos almost killed me Cassie. Benzos I was I've, I've struggled my whole life because I was in a sympathetic nervous system that could be a whole discussion on its own.

And I think a lot of people are stuck and sympathetic. This gets back to balance of parasympathetic sympathetic autonomic nervous system like rest and digest, fight flight or freeze.

I was, because of trauma, abuse, all these things I was stuck in sympathetic. I didn't know how to relax. And I had to use, Lunesta, Ambien, Xanax, all these things to even try and fall asleep.

I became deeply addicted to them, had unbelievable fear about not having them. And, like, I literally would sleep less than 30 minutes in a night if I didn't have them or I ran out.

But then my sleep over time became highly Apnic. And just like a zombie type of, type of sleep, that was just the worst possible. Like, I would wake up and feel more tired than I've been.

I went to bed as I was, like, fighting for life all night long. And so these drugs are deeply addictive. Absolutely terrible. All of the benzos I like to definitely a mission of mine to get people off them.

It took a long time and a lot of work, but I'm glad. Lay off them. That's awesome. Yeah. No, that's my goal for all my patients. My goal for all my patients is actually to take no pharmaceutical medication like zero.

And like, you can take all the supplements you want, but my goal is for them to take no pharmaceutical medications ideally. But the sleep is what really gets me and the ADHD.

You know, people say, well, I have ADHD. So does it make sense to you that if I have ADHD? But I'm also telling you that I have insomnia, that you put me on a stimulant?

Does that make sense? That has never made sense to me. Like you. Just anyway, it makes sense. Like short term, like, like dopamine surgically to get like, the, you know, the the system like, this kind of gets into that masculine energy where we're like very dopamine dominant.

And unfortunately we're trying to put women again into like this dopamine, dopamine world that's like driving, driving, driving, driving. But like, that is a definitely a short term solution.

And we do caffeine or the ingredient I came up with paired is an thing like short term, if you're tired, like, you know, then like that makes sense. Sometimes you have to get things done, get through the day.

But like, ultimately that's going to be diminishing returns. Absolutely. Yeah. So then what would you recommend for people with maybe anxiety depression again.

Yeah. Testosterone, estrogen progesterone obviously. But if we're talking from a supplement perspective, are there certain things that you recommend I think that that's related B vitamins.

You already said it. I use a ton of methylated B vitamins for anxiety, depression. I use a lot of Sammy depending on if they have a T mutation. I like butyrate, sodium butyrate or things that like five. HTP.

Is that what it is, a precursor to tryptophan for your. Yeah, I like that. But tell us what else you tell us about your supplement. Yeah. Even better.

Than as as in a version of butyrate that I brought to market as a triglyceride form that's optimized for uptake. That's called tripe uterine. Yeah. And so that's something to look into as the post biotic that, that you're, you're mentioning as far as, like kind of the herbal Xanax, if you will, like the most powerful thing that I've come across and it doesn't have negative side effects is like the, Hanako and dihydrate.

Hanako beta. Those are very powerful compounds. Dihydrogen to kill beta as it's metabolized. There's less research on that than there is Hanako. It's, parent compound.

It's, prodrug, if you will. But those are both a very powerful. And then along the lines of the adaptogens, there's one that's really powerful for stress.

And that is holy basil. I like that one. Also, if you tend to be more in that, like, frazzled mindset. And this is great when you combine with caffeine or pairs and thing or any stimulant, but it's great on its own.

Is l-theanine. That's a, it's an amino acid that tends to put you in more of that alpha brainwave state, like where

you're more in like a flow state. That's what I need while I'm writing my book.

Yeah, like tier 200 plus milligrams would be ideal. And, yeah, definitely check out like for kind of like breakthrough anxiety. I would say like that's where like that keel is powerful.

But again, going back to magnesium and the B vitamins, those are going to be foundational when it comes to stress and your capacity for stress. I mean, when you think about like I am stressed, I feel overwhelmed.

Do you have to like take a step back and think about like, is this would this normally be overwhelming? If it if your answer is no, then you have to like look at the other things that your diet, your supplementation like did you get enough sleep.

You know our capacity for that additional stress is going to be much lower if we got four hours of sleep versus eight if we're in a toxic relationship, if we're getting exposed to carcinogens at work, or, you know, if there's mold in your house or whatever it is like, there could be a reason that your capacity for stress is so low.

Yeah. No, I agree, and I think that's the other problem with in my opinion, society is like as soon as there is a symptom people immediately want to fix, it's not like, let's step back and think about this, right?

Like Monday, for example. Why was I stressed? Well, I know why I was stressed because we had been in Vegas all weekend. I had been at this conference.

I wasn't sleeping like I normally was. I probably wasn't drinking the amount of water, you know, it's just different. And then also, I know I also forgot my magnesium and that's a huge trigger for me.

I know that like I take magnesium, I take vitamin D, I take B12, I wasn't sleeping is good. So I hadn't had my magnesium I even I wasn't. Yeah, I wasn't sleeping well, I had been traveling, you know, and then plus I'm in like the back half of my cycle.

So my progesterone is high and I don't have any estrogen. It's like, so when I was, like, losing my mind on Monday, I'm like, okay, this really isn't that hard.

It's just I'm like, I need to reset, right? Like, I can do this. It's just I need to reset all these things. And I think that's what people forget is like, do your point and could I have could I have came home and cried and flipped out, made someone write me a prescription or whatever and done it?

Yeah, I could have, but I'm like, that's just not what I want anymore. Like, what I want to do is I came home on Monday, I ate dinner, I took a walk, I went to bed, and then Tuesday I actually took a nap at lunch.

And I went to bed early on Tuesday. And I went to bed early last night. And I felt great today. And so like, it's just people want this like immediate fix though, right?

Instead of like, why is my body giving me the signal? And then what do I need to do to fix it? Right. And it's I get it because I was there at one point.

My life, like you, I was thankfully never addicted to benzos. But I took sleeping medicine at one point. I took anxiety medicine. At one point I took I don't want any of that now.

Like, you know, I what I want to do is figure out, like, why do I feel like this? And let's fix it. And I think that's a lot of the problem with today and right now is because we live in this world, like you talk about of like go, go, go go go.

It's okay to be like, no, I'm not. You know, I'm not going to do that. It's okay to disappoint people sometimes as long as you, you know, know where you're going, right?

It's about the direction, not about the speed. So there you go.

ADHD, Focus, and Libido Support

Yeah. So I like all of those. I think those are good recommendations. We covered sleep. We covered hormones. Do you have anything in particular you recommend for people with ADHD?

Like if they're trying to get off of medications? Have you ever used like, diet hacks? That's. Yeah. You and yeah. Yeah. So pairs and thing is one that is like a light CNS stimulant that doesn't have the downsides in terms of elevating heart rate, affecting blood pressure, etc..

It's a much more mild, version of, of caffeine in terms of side effects, but more potent in terms of its nootropic effects. So I do like pairs and I do like, as we talked about L-Theanine, alpha GPC is a like bioavailable form of choline.

That's my favorite. That improves focus. So those are all like really helpful as far as, magnesium deficiency. Again, I'm going to keep going back to that.

That's going to affect, your ability to focus or whole concentration. I do like the adaptogens in terms of focus as well. In particular, my favorite, the most nootropic one is Rhodiola, which is having some issues in terms of, it being an endangered species.

But now we can get a purified active from Rhodiola called Solid Side. So cylinder side is, is really, amazing as well. And like that. Yeah. Dijak says cool.

There's also so link in Samak, there's cerebral ice and you can try those peptides. Methylene blue is really interesting. On on the front of, that's actually what I spoke about a day from as well as pairs.

And then methylene blue is one of the only substances that's really going to be like an artificial electron transport chain. Electron donor, like it's going to like.

And what all that means, that sounds complicated is that it's helping, a lot of times the mitochondria, there's dysfunction in there. And, and there's like different, sets of this, electron transport chain where, like, an electron can kind of get stuck and not transfer.

And so, this is where that dysfunction leads to, like suboptimal energy production and leads to all of these side effects that we talked about, like with oxidation, glycation, inflammation.

Because you're not producing enough energy. And so meddling Blue can help like be this synthetic electron. Donor like where there's dysfunction in the mitochondria, it can step in and kind of like, guide things along essentially.

So it's going to be one of those things like if you were like incredibly healthy, you might not notice much. This is kind of like the ketogenic diet. Like, you know, you might not notice as much, but if your, if you're someone that is deeply, metabolically dysfunctional and in this insufficient cellular energy state, methylene blue or the ketogenic diet or things like dihydrate, berberine, which, by the way, we didn't talk about, but it's I think could be tremendous, for hormone optimization because blood sugar plays a huge role.

But that can be significant, methylene blue. So it is worth exploring. Yeah, I use a lot of methylene blue in my practice. Last question about supplements libido.

We sort of touched on it. Are there any other supplements? Nitric oxide. You said anything else that you recommend for women in particular? Like I feel like women get the shaft on this.

Yeah. Everyone's always like, oh, Ed women, low libido, but women lose half of their testosterone by mid 30s. And by the time we're in our 40s, most of our testosterone or androgens are gone.

And so it's very common for women to have low sex drive or low libido in their 40s. So what I. Besides, you know,

taking care of yourself, not being stressed, actually liking your husband, sleeping all of that space.

What else can you do to help your libido if you're not going to replace your testosterone? Yeah. Horny. Go read. As funny as that one sounds, it. There's a lot of people think of it as, like, male libido, but it works just as well in women.

It does free up testosterone. It works by HPG, like sex hormone binding globulin. So what it's doing is it may raise testosterone a little bit, like maybe ten, 15% if you're lucky, if you're taking a great extract and it's working really well, and maybe you were suboptimal in testosterone, male or female, but what it's doing on a kind of more important level is freeing up more free testosterone.

So that is able to interact at the receptor, the androgen receptor, more. So that's that's one that I would definitely recommend. And D3 can have a big impact on libido too.

And testosterone production, as well. So, also just for me, sex in general, like doing hot and cold, like hot Finnish sauna, doing, cold plunges, especially if you're doing both, like doing contrasting.

That can be very helpful working out, especially if you're doing high intensity interval training or heavy lifting. A lot of women tend to shy away from heavier weights, thinking they're going to get bulky or it's just too difficult.

I don't like heavy weights is where it's at. Like that is going to impact bone, it's going to impact muscle, it's going to impact connective tissue. It's going to impact your brain.

It's going to impact longevity. Heavy lifting is where it's at. Okay. Well thank you for coming on and talking to us about all of this. Tell everyone just briefly, do you have any I mean, we'll link your supplement.

I will link your website, which I think has everything with with all your supplements. Is there anything else you want in your social media? Anything else you want to tell everyone about where they can?

Yeah, it's. Shawn michaels.com, Schwinn WLS and then at Shawn Wells on my social media. And I have a lot of, great infographics and kind of distilled down if any of this is overwhelming.

I have it all. There or my book energy formula, which you can go to energy formula.com. Okay. Well, thank you so much for taking the time to share all of this with us.

You got it. Thanks, Cassie. All right.