# The Truth About Birth Control, PCOS & Perimenopause Doctors Won’t Tell You! Dr. Jen | Ep. 54 Transcript

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## Podcast Introduction and Guest Background

Now, birth control pill can actually increase risk of infertility later on and increase the risk for hormone cancers. And I don't think anyone has told this.

That's scary. So what is the natural remedy to help solve some of those issues? So, what happens is… Meet Dr. Jennifer Flighar, a double board certified emergency medicine doctor and integrative medicine expert, podcast host, author and champion of holistic healing from thyroid issues to stress reduction.

She has got you covered. She's here to bring us fresh insights on gut health, hormones, and more. So stay tuned. There was protocols at the hospital that the ER doctors could not prescribe.

I don't know. Right now, I'm so passionate about perimenopause women. Women in their 20s. We see a lot of estrogen dominance or abnormal hormones at that age where they're just put on birth control and that's not helping long term.

What are your thoughts about the GLP-1 drugs? I do not like all these online. Get your GLp- 1. There are serious consequences when it's no used properly.

So what kind of lifestyle changes can people do to help manage that process? There is a lot of low hanging fruit. So the first step is to get. Welcome to another episode of a healthy point of view podcast.

I'm your host Sam Tahata. Today we have a guest that flew in into town here from Tennessee. And this is an ER physician for many, many years, Dr. Jen Flegar.

And her story is just amazing in what she's doing. She's taken a lot of this conventional approach to your health and wellness and mixing it more with the holistic.

Dr Jen, how are you? Great, Sam, thank you for having me here. Absolutely. So we were able to connect when I got on your podcast. And we're just like, wow, there's a lot of synergy here.

## Frustration with Conventional Medicine

People have to hear your story. Because there are so many people in that conventional medicine world that are fed up with the system that we live in and really have take more of this proactive approach with their patients.

I want to talk about it. Yeah, of course. And a lot of the times they just feel stuck, kind of like you did, you felt stuck. You're like, there's something more.

I went into medicine to help people. However, You can see that they're not being helped the way you thought. And that's what happened to me when I was in the emergency room, level two trauma center, outside of Toledo, I fresh out of residency and I just kept seeing the same patients over and over again.

And this one patient, she had gotten like 10 CT scans of her abdomen in a year and that is a lot of radiation. And I finally sat down with her and I was like, Hey, like you have the same chronic pain.

If we do another CT scan, we could possibly causing cancer. Let's talk about really what's going on. I had her start a food journal, all these things, and she was seeing other doctors.

She was following up. But no one was getting to the root cause and I was a little frustrated. I went to DO school, so osteopathic medicine, where we look at the body more as a whole.

We do manipulation to treat the spine, the nerves, fascia, all of that. And I got into the ER. I was like, about 80% of what we see is not a true emergency.

It's more of a chronic illness. And I told my husband, we had just had my second boy and I have to go back and do an integrative medicine fellowship because over the past two years of seeing these people just unhealthy, and thinking that they're doing the right thing and still suffering, I was just reading everything about integrative medicine, functional medicine.

And I'm like, okay, gotta go back. It was great. So that's a good, talking about what you were experiencing, right? I wanna tap into that mindset of how you felt, because when you decide to go the route to become a healer, and become physician, You do that to fulfill a certain purpose, right?

So when you started actually seeing the system that we're in, how did you feel? Yeah. And I, I know God wanted me to be a doctor. It was hard and I remember praying and was like, should I still do this?

So I'm in the right place. I was really frustrated when I found out that it was more about money. That's the hard part. Conventional medicine is more dollars and cents.

Not about the actual healing and health of the person. And I do stand up for colleagues that they're not awake yet, maybe we could say, right? Because we're like awake, we get it.

We know that there's corruption. And we know there is a better way than conventional medicine. But I feel for those colleagues, a lot of them are stuck.

They're in a rat race. Medical school is a minimum $250,000 to go to medical school in the United States, maybe a little bit less, but also room and board.

One of my friends, she's a surgeon now, I think she was like over $400,00 because room in board because she did her residency in New York City, which is so expensive.

So we're coming out in massive debt. And we are almost like slaves to the actual hospital system to be able to pay back our loans, if that makes sense.

Now, add in the patient satisfaction score, which started around the opiate crisis.

## COVID-Era ER Work and Early Integrative Care

We know that that was all corrupt. And then also now there's something called RVUs. So you get paid more the more patients you see. And you will get a slap on your wrist if you're not seeing and moving the meat.

So it becomes this almost, you know, conveyor belt type system of seeing patients versus where it should really be about connection in their heart. And I, one of my friends and colleagues who I went to medical school with, she actually was told by a nurse supervisor that if she had a cancer patient sitting in front of her crying about a new diagnosis and the time was up on the 15 minutes that she has to escort her out of the office and put her with someone from the front desk and see another patient.

That's scary. She left that job, so that's great. That probably the right thing for her to do. It reminds me of my partner, Dr. Christopher Davis, who's an interventional cardiologist.

He had one of the most successful cardiology practices here in Florida, and he got fed up with the system as well, too. And it was one those things where he said it, he says, how am I going to make someone well by only being able to see my cardiologists patients for only seven minutes?

What can I really tell him in seven minutes? And he's seen like 40 people and he just got fed up and He closes doors so he can focus taking more of that proactive preventative approach, you know Integrating more the functional medicine with his patients and now I mean he he is just a completely different person He's fulfilling his purpose and you could just tell by every single time I engage with them either there's a sense of He feels that his job is truly rewarding, which it is.

When you're treating patients in this type of method, it's different. So at what point in time did you actually say, you know what, I have to start doing something else?

After my fellowship in integrative medicine, I opened up a brick and mortar in Ohio and saw patients there for about seven years. I was kind of the only one doing that in the area.

It was very rewarding. And I still work in ER from time to time, which also keeps me grounded. it keeps be aware of what is going on right now in medicine and how bad it is.

and I did work at the ER during COVID. And that was actually crazy. Well, I, so I was doing a few things. I would seen my integrative medicine patients virtually.

It was also doing some moonlighting via telemedicine and this was back in 2020 where maybe it was a little newer, right? Telemed and all of that. And I remember they let, if you had your license in Ohio, um, New York opened up so anyone could see and help out and see patients in New york.

She was all alone in her apartment for like, I think it had been like six months to a year in New York City. And she lived alone and she was anxious and depressed.

That's why she called and saw me. I remember I did that. It was like an urgent care telemedicine. Remember I would do it on Christmas day just for an hour.

If I was at my parents' house in the room and just see patients for and hour to take the burden off of the ER. Because then I was also working in the E. R.

and it was just it. Was kind of weird. So there was some days where it just overcrowded. But then most days there is like no one there. And hospitals actually lost money because people were scared to go in for the normal like earache or sore throat.

It was very odd. Everyone was freaked out. Of course, I remember going to work wearing an N95. I would come back and like strip off on my clothes and go in.

Um, i was taking preventative ivermectin and hydroxychloroquine. And it was interesting because I actually got COVID because i eventually got it and brought it home.

And it was from a nurse that was vaccinated. Her husband had covid at home, but she was allowed to come into work because she. Was vaccinated because if you're vaccinated, you can't spread.

## Womenu2019s Hormones and Cycle Phases

We know that's not true. So it. It was funny because that. How I got it and I was actually I. I pretty sick. That was doing all the stuff. Actually took a little bit of steroids because my oxygen saturation came down.

Um, so I was treating a lot of patients during the pandemic with the ivermectin, hydroxychloroquine, lots of amazing stories of people that were very sick and some of them, they didn't want to go to the hospital.

So I kind of like their only way to get healthy. Sometimes I had family members calling in for them and they would just be on speakerphone and I would see them telemed and.

And they get better and, and then they turn around really fast. The craziest thing about it, though, I still can't believe that this was a thing. There was protocols at the hospital that the ER doctors could not prescribe ivermectin.

Wow. Yeah. Why is that? I don't know. Well, we know, right? It's all about money. I don't know. I mean, the research is there. It's crazy because the amount of off-label medications that are prescribed in the emergency room and in doctor's offices is extraordinary, but they wouldn't allow us to prescribe that.

So I would hand them the FLCCC sheet when I was discharging them and say, you need to call this number and find someone to prescribed these medications to you.

and you would have to take all these supplements. It was really hard, though. I felt so conflicted, I would just come home and talk to my family and my friends, and I'm like, this is just not okay.

And there was nothing we could do about it. But I was also, felt blessed that I could go and talked to them about just starting melatonin or zinc or vitamin C or quercetin, easy, low-hanging fruit that would keep them out of the hospital.

Because we would see, it was awful. Like I remember this older couple, they came back in in respiratory distress and I looked at their charts and they were there the week before with minimal symptoms and was just testing positive.

So think about that. If they would have gotten treated appropriately that first visit, They wouldn't have came. They would not have come back. Yeah. Wow.

You know, all of that just, this is why we do what we. We want to promote wellness and not sickness. Right. The sick care versus the well care model, right?

Yes. So what are you most passionate about with that well-care model taking more of like that holistic approach? Yeah, Right now I am so passionate About perimenopause women because that's I love that So being a female physician, you know in the biohacking space and the functional medicine space For many, many years, I've been in the functional medicine space for almost two decades.

And there isn't a lot of females. Now you're starting to see more female physicians getting involved. So you being able to be a female and relate on a personal level with other females, to me that's huge.

Because when you start looking at females and you talking about hormones, It's not like men. Men hormones are significantly easier to deal with than female hormones.

You have females that are cycling and everything. Then you can go through the menopause and the perimenopausal. So let's talk about that. What you've seen, what you're hearing based off of your own personal experience and why you are so passionate about it.

Yes, of course. Men have 24-hour cycle of hormones, right? This is why men are just easier. This Publications like PubMed, if you look at the studies, it's gonna be men, right?

Because women, they have to regulate to where they're at in their cycle. So we have a 28 day cycle, a calendar, basically month, okay? And you're gonna have different hormones every single day.

And that's why the men listening out there, this is important for you guys to know too. Because if can understand what phase that your wife, spouse, girlfriend is in, then you can have just a lot more fun.

and less arguments. So we start out with the follicular phase, okay? And the Follicular Phase, you can kind of think of like a party, so you're getting ready for a Party, estrogen comes in, this is the first two weeks of the cycle, So you are going to have that bleeding, and then estrogen is coming in.

Estrogen is getting the room ready, getting for the big party. You are gonna have a little bit more energy. When you working out, Hit it hard, this is where you're going to want to try to have personal best lifting.

This is when you could do HIIT workouts. So this time, really shining, lots of energy, everything. And then you hit that ovulation. That's the middle of the cycle, usually day 15. maybe be the DJ at the party, come in.

This is when women are gonna be shining. If you were gonna on a podcast or get a photo shoot, this would be that time. They have that glow and they're gonna wanna be intimate, okay?

So when you're ovulating, that's the okay. Yeah, so it makes sense, right? Your body wants, when your fertile, and we know fertility is such a good marker of health.

Right. If you're not fertile, you know, if your fertility is not good, then you are not healthy. And this is why it's such a big problem. There are so many fertility issues right now because we're healthy, so we have ovulation, testosterone is in there, estrogen is there.

You're just moving and grooving. and then we have luteal phase so that's the second half of the cycle days 15 through 28 okay so then estrogen starts to go down a little bit testosterone starts the leave the party progesterone comes in and calms everything down kind of sets the mood maybe a slow song everything's more calm this is when Women, we want to stay in and watch movies, maybe have a little bit of carbs.

This is when I tell women it isn't a good time to fast or do really hard keto. If your body needs a bit more carbs, it's okay to do it then. This is when you don't want to do HIIT workouts, high intensity interval training, sprints, those kind of stuff.

And this is at the gym. You're not going to be like, OK, let's add on 20 more pounds to my deadlift. No, you're just going want do weights, but more reps, less weight.

So for women, this that time. Women are more likely to get injured in their luteal phase. Um, yeah, this is the phase where where they start to Get a little bit bloated as well.

Yes. Yeah, so bloating irritability all of this Okay So the the thing is though that that doesn't have to happen There are some supplements that could help with that or if you're eating better that can help because pms premenstrual syndrome It shouldn't happen.

I mean, I hate saying that, but that's another thing. Heavy periods, PMS, that another way that pharmaceutical companies can make money, right?

## Birth Control, Fertility, and Natural Alternatives

We're not supposed to have really heavy periods. We are not suppose to really have heavy cramps. That's a sign that your estrogen progesterone are out of balance.

And I know a lot of conventional doctors, what they'll do to easily test a 16 year old girl is put her on a heavy dosage of birth control to control that.

Yes, yes and with without true informed consent, right? I was just talking with my husband about this on the plane about how to regulate my period age 16 I Was put on birth control pill but really it was because I had a thyroid problem and my mom actually asked cuz she read in a magazine to get my thyroid checked and that's my whole health story with Hashimoto's.

Now, birth control pill can actually increase risk of infertility later on and increase the risk for cancer, of hormone cancers. And I don't think anyone has told this.

I know I've talked to patients in my office about it. Whenever they're on an oral birth, control, I try to get them off.

We have a discussion about that.

Okay. It's if you are, you know, I've had patients in their 20s and they're like, You know I would be so stressed out if I got pregnant or had to think about getting pregnant.

So I have to stay on the birth control. I'm like okay. Well, if You're gonna stay On it. These are the risks of staying on it and you Know, there's natural family planning instead.

There's a progesterone only there is different choices. But these are the risks. And if you're going to stay on it, then we need to make sure your micronutrients are being replenished.

We're taking care of your gut health because long term use of birth control can make you more susceptible to candida or a fungal infection. Right. and then that makes you crave sugars more and all this stuff.

So it's a big snowball. But birth Control is the easy fix for basically any symptom that a woman comes in for. So I've heard it hundreds of times in my office.

They go to their doctors, they're in their 20s to 40s, They say I'm tired, I am more irritable during my cycle, anything. they could say anything and it's either let's put you on birth control or let put on an antidepressant.

Wow. Yes. That's scary. So what is the natural remedy to help solve some of those issues, some symptoms? Well, first is awareness. So when we're looking at perimenopause and we think about these hormones and how they're changing, so what happens during peri-menopausal, our body, it's pre- menopasal.

Our body is in this cycle getting ready for menopsis. We're having less quality follicles or eggs come through to the uterus and our bodies adjust to that.

So what happens is when we don't have a really good follicle, then sometimes the body's like, Oh, did we even get one? And then we have another surge of something called follicles stimulating hormone or FSH.

so more estradiol or more estrogen is released. And sometimes another egg comes out. That's why twins happen later on in life more. Sometimes that can happen.

We have these really erratic like roller coaster release of estradiol. Okay. And this can really confuse women. Sometimes they can have a really heavy cycle when normally they don't.

Then what else happens is that progesterone, that's that calming hormone gets the body ready to have. A baby kind of calms us down, makes us less irritable during that time.

Less bloated, you know, just less symptoms that starts to just slowly decline So we have an imbalance of estrogen and progesterone. Well, what age group is this mostly happening?

Usually 30s. So usually we see it late 20s, 30, but sometimes it can be late 30 to 40. I mean, I have a patient, she is 56 and still cycling normally.

Oh, wow. Yeah. The best question to ask would be, you know, so you could talk to your wife about this and be like, when did your mother go through menopause?

Okay, so the different things can accelerate this like stress, you know, certain medications too. So we have to, we Have to look at that also. But the symptoms, they, he can kind of tell like the periods getting shorter, or longer, more irritable, patients come and they're just like snapping at their kids more the week before their cycle.

So what we start to do is we clean up diet and gut health, but then a supplement that's really helpful is chase tree berry. And it, it gets your body to produce more progesterone.

And then also liver health is good. So any supplements like milk thistle, artichoke leaf, things like that, inositol can help with liver Health. Okay, and then that's helping clear the estrogen because our estrogens are cleared through our liver.

Women in their 20s. We see a lot of estrogen dominance or abnormal hormones at that age where they're just put on birth control, right? And that's not helping long term.

That's creating more inflammation and disease Yeah, are there are any lifestyle changes that people should make?

## Lifestyle, Insulin Resistance, and PCOS

Yeah. Well, and I know you have a book eat sleep move breathe right and So I know all of those, all four, when you start hearing that, that's all lifestyle, right?

So what kind of lifestyle changes can people do to help manage that process? Yes, absolutely. Movement is… really important. So walking, walking at an incline is going to move the lymphatics, get everything flowing nice.

You know, if you have any constipation issues, movement is important for that too. And weight lifting. I would say gentle movement, stretching is great, but then weightlifting.

Muscle, we know it's a longevity organ. It is so important for insulin sensitivity. As we age, we get more insulin resistant. So women with PCOS, that's insulin resistance.

Women that are in that perimenopause and then menopausal state, they tend to be more in insulin-resistant. We see it on their… continuous glucose monitors, they start to really struggle with any carbs or sugar, but if we get them consistently lifting weights and on a good weight lifting routine, then we will see those numbers drop.

So a really actual helpful lab for anyone out there to ask any age, any sex, would be a HOMA IR score. You ask your doctor for an insulin, a fasting insulin and a fasting glucose, and you actually Multiply them and then divide by 405 and you get this number and we want it to be less than one less someone we Want to?

Be insulin sensitive and why I like using that better than the hemoglobin a1c is because we can catch really early insulin resistance Okay, so I start with that.

We want a fasting insulin of less Than five So if it is not less than five, I would recommend get on a continuous glucose monitor and see what your blood sugar is doing.

If it's a roller coaster or if its smooth sailing. Have you ever worn one? I haven't, but I have a lot of patients that have utilized it, and they're able to control their nutritional plan throughout the day quite well.

And I see some tremendous results off of it. But it'd be nice for me to try it out. I'm very particular on what goes into my body. You would love it though.

Calculating your data data date data for your wellness. So it's probably after this podcast. I'll probably order it You would have fun with it And I feel like someone like you you would just you do it like once a year or something Yeah, and just test out certain things So what's good to like test?

Out maybe like a snack something that you don't have a lot, but just see how your body reacts to it Because what was surprising with me was grain free chips like a like cassava Cassava like spiked me.

Really? Yeah, and it's grain-free. So everyone thinks grainfree is healthy But cassova, it can spike your blood sugar because it it still a starch, right?

yeah, It's still the starch but I was just kind of shocked at how much it did so I really changed like How I maybe not eat as much right? Yeah, or just like have it with guacamole or something But it's really it' s also really funded to

wear a CGM while you're fasting Because certain electrolyte drinks some would would give a little spike so then I know it s breaking my fast versus some Would not So I think it's really and it gives you the ability to understand your own personal body a bit better So that that is pretty cool.

I'm all about wellness data where my or ring and everything. Yeah, you know so Going back to one thing that you brought up earlier. We were talking about Fertility issues women that have infertility, right?

And then you brought up PCOS which there's a huge correlation with women who have PC OS being infertal and You see it with the IVF market that a lot of them are going into that so Besides the typical anti-inflammatory diet, what are some of the things that women can do if they are suffering from PCOS?

And how do they even know they have PCOs? Right, so usually they get a change of their cycle or they don't have a cycle and or the ever really heavy cycle so eventually they'll go into their primary care doctor be referred to OB and sometimes they do an ultrasound and if it shows this that's one of the markers and then there's some lab markers also.

For me, I just look at it as they're insulin resistant. Yes, they are going to have higher testosterone, DHEA, but their fasting insulin is not good. And usually, these are also the women that might gain weight really rapidly out of nowhere.

A lot of things can trigger this too. I've had patients where a really stressful traumatic event has triggered it, like a death of a lost one or some other sort of trauma.

It's it's hard because we know that stress is tied to insulin being elevated in cortisol Do you have to get to the root cause of that? So definitely, you know prayer meditation breath work is gonna be helpful for for these patients with botanicals or supplements which I think work better because The other option is they just put them on birth control the PCOS or Lupron or something like that.

So I I really like salt palmento, can help drive down the DHEA and testosterone a little bit and normalize that. Berberine is great for these patients, so that's going to help with the blood sugar.

Right. And chaste tree berry is also good and omega-3. So those are usually the four. Then we're hitting hard diet, wearing the continuous glucose monitor.

Doing the cycle sinking which I kind of alluded to So that follicular phase the first two weeks they can do keto low carb, maybe even carnivore I like putting patients on carnival as like a prescription for a couple weeks if I think they have a dysbiosis or imbalance in the gut because it can really clear that I actually prescribe that to My my patients that are breastfeeding or pregnant sometimes because it's just it food and it is very nutritious They're getting lots of choline and B vitamins But we can't treat them with botanicals or meds and its really helped I had a patient with really bad skin rashes and she got pregnant kind of when we were in the middle of treating her gut and I'm like we'll do carnivore for four weeks and cleared it up so she was able to get through the pregnancy So the first two weeks, go for it.

You know, you could do fasting, a 36-hour fast, 24- hour fast. And then the luteal phase, if you need a little bit more carbs, increase it to 20, maybe to 50. See where you're at, but we don't want to stress your body out.

## Spiritual Health and Finding the Right Church

I see this a lot in the functional community is that patients are put on extremely crazy restrictive diet elimination diets. I'm sure you've seen it too.

Yeah. And then it's like, well, they're so stressed out on this diet that that's driving up their cortisol and hurting their gut health just as much. So it has to be an easy medium there.

Yes. This is where you can't do this in a seven minute Visit you need to know the patient. I have 30 minute

appointments with my patients and they're talking most of the time is I'm getting that feedback They tell me yeah, you want to understand exactly what's going on how they feel and you mentioned, You know that stressful component.

It's like yes eating this way is probably gonna give you certain results but if the process of eating, this is It's overly done where it's so stressful.

Now that stress is gonna affect your hormones, there's gonna be a hormone shift there, and it just gonna work totally against it. Yes, especially for the women like in that perimenopause state or, you know, mothers, Mothers are juggling so much.

I mean, I don't think I think this is the hard part for me and why I like to talk about this so Much is we see everyone's perfect, social media, Instagram, these women that are home with their kids or they're working and their Kids are going to school.

They're comparing themselves to these Women biohackers or These social media people that that's their job is to create these videos and I like to be I'm like I am in there with you guys like, I get it like i'm Doing doing it with, you iIm doing the life with You I know this is hard and you're struggling and my heart like aches for those women you know and i also feel like they're being spiritually attacked more and You know, I feel like the enemy the devil can feel that weakness because it happens postpartum to women to anxiety and depression it's like when that hormone changes come in when we're more vulnerable as women like that's I Feel like they get attacked more spiritually so I also speak with my patients and on my social media and stuff about how to protect yourself from spiritual warfare and using prayer and You know making sure you're really relying on jesus, you know, and that that's part of their health plan because We we know if we read the bible, I mean our health is spiritual too.

Yeah Yeah, i mean listen and the Bible says your body is the temple of god, right? So it's very important to have that connection and have That understanding you, know um So for people that are not spiritual, right, or have not dabbled into religion, what would be the step for them to be able to accept something like that into their life?

Hmm. That's a great question. I would say pick up the Bible, you know, and go to a church. And I think it's tough too, because there is church hurt and we live in a broken world and not just because someone is at a Church or a pastor or something, doesn't, we don't know their heart, only God does.

So they, there's church hurts. People do get burned. We need to make sure that we are looking at the bible and no religion or church that were reading.

There's the Bible recap. Have you heard of that where you go through the bible in a year? I've heard that I haven't heard the terminology the biblical recap, but I heard about yeah within a Year, maybe that's what it is.

That's one of the ones I listen to there's a bunch of different ones But it's great because she breaks it down Every day so that like maybe with a group of friends and you know or joining a book club or something where?

you read a Book that is spiritually fulfilling right so I mean the only books I read are nonfiction science nerdy stuff of course and the good stuff and PubMed studies yes and I could do that all day but I also the last three years I read a couple of good spiritual books and not, not New Age spiritual because I've been there done that and that only brought dark into my life.

And that was that, was a hard part of being into integrative and functional medicine is there's a lot of New age and when I mean Newage, this is yoga, crystals, Reiki, you know, meditation empty in your mind.

which we're not told to do that in the Bible. We're told, you know, to renew our mind with the Word. So I think that that is a hard spot. And I like to talk about that too, because I got sucked into it.

I was in my fellowship in integrative medicine and I had practiced yoga casually. You know I'm like, oh my gosh, I am going to be a yoga instructor and have a Yoga Studio attached to my integrate office.

And unfortunately, my eyes were not set upon Jesus anymore. They were set up on, I don't know, like meditation, yoga, new age, right? And that really got me off course.

That can become very scary. I feel like you have to have a very strong mindset about your connection with Jesus in Christianity, where I don't necessarily think you to eliminate these crystals and some of these things that are out there that natural to this earth, but understand that they're here because of Jesus, right?

They can't heal, don't put healing power in a crystal. Jesus is the only one that can heal. I just think it's tricky because I was asking Christians if it was okay.

And it's not. But they were saying, some of them are saying it was, right? But we can all be deceived. I also love it because it is part of my testimony now that I think that we have functional and integrative medicine without this, without the new age stuff that can kind of hinder our healing, honestly.

Yeah. The biggest part for me with some And this is going more into the functional medicine biohacking space. I try to always tie it into science, right?

It's what has been tested. If we look at certain crystals, what is actually feeding off of those crystals different type of frequencies and stuff? that then you can actually figure out those frequencies.

What is it doing to your body? What can it heal, et cetera? But understand that it's more of a tool. It should not become your spirituality and it should become not your religion.

You know, it almost like me allowing the defibrillator to become my new religion, no, its just a tools that's gonna get someone out of cardiac arrest.

So, you know. And me as a Christian, that has to come first. It's very important for that to comes first, for the people that are out there, one thing that worked for me, because there was a point in time, I grew up as as Catholic, and it just, it wasn't for, you know, I would always ask, I come from a family of Mormons, Jehovah Witness, and Catholic.

So very interesting family reunions that we would have, right? So for me I'd always asked my father, since dad, all of us can't be right, who's right.

And I wouldn't really get an answer, my dad would just tell me, well you go to church and just listen to the positive word and live a better life. Which he's write to a certain extent, but what am I listening to and who is right And it wasn't until I became an adult where I stopped going to church for probably a good like three, four years, and I had this sense of emptiness, right?

And I didn't want to go back to the Catholic church because the catholic church was, I'd go there and it was just a bunch of silver hair, you know, a lot of old people.

And, uh, would always look at my watch like, when is this going be over? Yeah, it's football Sunday. Like why, why I don't wanna be here. And until I started going to a non-denominational church, which it was all about Christianity, what's inside of the book, the Bible, right?

That's where I figured out religion's man-made, Christianity is straight from the bible. And what I decided to do is I wanted to go somewhere where people looked like me, right?

That were around my age, that were kinda hip and cool, and it just made me feel more connected at that point, you know?

## Listening to Patients and Root-Cause Testing

And I do feel that some people, if you really wanna make that step to understand the Bible, is figure out the people that do what you do, think the way you'd do that make the mistakes that you make, they probably party where you

party, and still go to church because church is the hospital for the broken.

It's not for perfect, right? So don't go church thinking that the person sitting next to you is a perfect person. They're probably making the same mistakes and the sins that you make.

But find those people where you can actually go that Bible study and have a good time. And it's like you're hanging out but at the time you are learning.

And you're sharing and you are crying together. You're saying, yeah, I yelled at my kids today. I messed up and let's pray. And because that's I think that puts a lot of stress on everyone thinking that everyone is perfect and they're all the social media thing or they are making these perfect breakfast for their kids where really, oh my goodness, three boys that are just It's very overstimulating at my house sometimes, right?

I mean, they're just like blah, blah blah. And I'm like, you guys were fighting about this. They're like no, we don't understand. We weren't really fighting.

I was like you were yelling at each other. So it's overstimmulating and I have friends that they'll just be like oh, I am so overstimated today. It was hard, and we're all doing these hard things but we have to be honest about it.

If we're not honest like about like, oh, you know, my stomach's bloated and you or I have bad gas or something like that. If We're, not sharing that because we are embarrassed or we want to look good.

We are not going to get to the root cause and find true healing. That's true. It's really, it's hard. it is hard nowadays. I love technology because it brings us closer, but then sometimes it like distances us more.

Do you feel that a lot of patients, specifically your time in the conventional side of medicine, where a lotta patients didn't even bring up aotta their symptoms because they just kinda accepted it as this is part of the aging process?

Absolutely, so a few things is that I forget they did a study But I think it's like within three seconds of a patient talking the doctor interrupts them so you would come in and Just hey what's going on and they start to talk and then the Doctor interrupt them and I learned very early on that.

I just would sit there and listen and and let them finish. And then I would ask questions, especially in the ER, like, where's your chest pain? Is it radiating?

Right? All of that. But if you just let someone talk, they will tell you. Yes, to be in a medical field, as we both are the conventional medicine, you have to ask specific questions to make sure you're getting the right info because they might not think it's important.

But then I also think that there is this thing where, yes, it's normalized, right? Having reflux or GERD or burning in the throat, having bloating, all of that is normalized.

I'll never forget my daughter had a friend over and she had headache. And she's like, you know, and it comes down. She's asking if we have any Tylenol.

and I don't know what to tell her because we don' have that in our house. So I told her, I'm like, we have some magnesium. If you want to try that, just text your mom first and ask if it's okay.

It's a supplement. So we gave her some Magnesium and it helped and her headache went away, right? But yeah, but like we're weird because of that. But I felt like saying to her your headache is a symptom.

We shouldn't normalize getting headaches and then taking Tylenol or Motrin for it. That is not normal. I absolutely think that some, people just accept it or they accept the fact that they need to be on medications forever.

I mean, I had one patient, she grew up in Florida, actually, and she lived in Ohio and had a chronic headache. And

I'm like, you know, like you lived Florida.

You lived right on the coast. There was probably mold in your home. Let's check mycotoxin mold testing. So if we have black mold and we're exposed to it, sometimes it can just live in our gut and then continue to produce these mycotoxins and cause problems.

She did have mycotoxins. We treated her with botanicals and she only gets headaches like one every few months now She had headaches every single day and was told by doctors and She was actually a nurse.

She told that it was normal It's and this is where we go back to like we're beautifully and wonderfully made like God would not give us symptoms, right?

Like we wouldn't just be walking around with these symptoms. It's because something's off or something is wrong. Now, say you have a newborn and you're not sleeping well and something like that and and your tired and fatigued for yes, that's a stage.

But if this is something that you don't have an answer for, like, you know, so you ate bad food the night before it spoiled meat and then you Have a stomach ache.

That makes sense. chronic pain and it's like oh I this is another cool story I had a guy came to see me and we're working on his overall longevity and I'm like yeah I need you to just stop eating gluten just give it six weeks six to eight weeks just please I want to See if you know anything is is causing this if your gluten-sensitive So he gave it up and then I always tell my patients at the end of the six weeks, I'd like them to do eight, but at end the 6 weeks they can go out and have a pizza and see if anything flares.

So, he had this chronic low back pain that he didn't even tell me about when I asked him what his symptoms were. It went away with eating gluten. So he was having this like low level inflammation and it was presenting as this low back pain that he Was just dealing with so yeah, that's amazing Yeah, and that probably happens with a lot of people, you know going back to the person with the mold Yes, my question is is like How far does someone have to go down that rabbit hole of sickness until a physician actually tests for that mold?

Because we live in this toxic world, right? The food that we eat, the environment that were in, there's all kinds of toxins that are going into our body causing all kind of issues, gene expression change, where disease starts to develop, an acute disease develops, then it becomes a chronic disease.

A lot of the times, the proper testing is not even being done to figure out what the true diagnosis is and what that root cause of that issue is. I think that's a difficult question for anyone to deal with because a lot these functional tests like the mycotoxin test or saliva hormone testing, they're not covered by insurance.

Right. So this is where you really just, you have to set aside money for wellness, for healing, and it can get pricey. And that's what's frustrating because these insurance companies are probably never going to cover that.

There is a lot of low-hanging fruit. Elimination diets can be really helpful. You can, if you just have symptoms and unknown mold exposure, just treat for mold with botanicals.

Sometimes you will need a prescription called Sporinex or Itraconazole. If the botanicals don't work, then I move patients onto that medication.

## Mold Exposure and Functional Treatment

Why I don' start with it is it's metabolized through the liver and hard on the livers. And when you have mycotoxins, those are metabolize through liver.

It's interesting because mycotoxin in general, they can also affect hormones. They can tank testosterone. they could make you be more estrogen dominant because your liver is tied up with all those myco toxins.

So mold is big. So that's the thing, like I've had patients where we know they have a mold exposure, we knew they had a basement that flooded when they were younger and it smelled musty.

We know that they a school that moldy or something like that. So the first step is to get out of the mold. And sometimes I say to them, well, let's focus on remediation.

Let's not even test your mycotoxins. It's focused on getting you out the molds and then you can start treatment. That's gosh when there were the hurricanes in Florida this past year I was just looking at those homes underwater and i'm like Please just rip out all the drywall because it gets moldy within 24 hours.

Oh, yeah it and I'm just like, oh mycotoxins but It can be frustrating. So I would say if people are if where do they start? They can ask their primary care doctor for some labs that are covered by insurance But sometimes insurance depending on your deductible.

Sometimes it's cheaper to do the cash route, right? Yeah, so I Would ask for that on my website I do have lists of like thyroid labs to order hormones so they can do that to start with and then if they think they need to dig further into functional testing they might have to step aside from the conventional medicine and work with a functional or integrative medicine doctor.

Right, right. So Dr. Jen, there's a lot of stuff that's happening, current events in the medical field right now, and one of them are the GLP-1 drugs.

What are your thoughts about the glp-one drugs? So peptides have been around for a long time and I've been using them in my practice for almost a decade.

They are great tools. I do tell my patients, you need to prep for them. nutrition, you know, if you're meditating, they work, They're gonna work better.

So do that stuff first. And and then maybe try a GLP one. I've had patients where we it has changed their lives. They've tried everything they're eating fine.

It's just like they almost needed like a reset. Then we wean them off of it. I've also have patients that are on really small doses of GLP ones to help with inflammation.

And these patients have tried everything and they have done like the perfect diet, but they still can't get over that insulin resistance hump. Even metformin, you know, berberine, all these things.

So I think that it has a right time and a place, But I do not like all of these online. Get your glp1 they have them like where they? Have influencers now and affiliate codes and no that's not how it's supposed to be done because there's serious Consequences when it is not used properly we're losing muscle mass and when you're over the age of 40 It's really hard to get that muscle.

Mass back right so There's a peptide called Pepti Strong that it's an oral peptides that helps maintain muscle mass. So if I have patients on a GLP-1, I usually have them on Pepti Strong, taking adequate protein, having them lifting weights.

It's like a non-negotiable. And if they're not doing those things, yeah, we can't have you on that.

## GLP-1 Drugs and Proper Use

Yeah, that's important even like with us at liquid Vita We get a body composition analysis right from the beginning and then we're trending it to make sure they're not losing that muscle because you know, even when we do in the blood work and we are monitoring the patients and whatnot and We think our medical providers think that this is gonna work perfect for the patient Everyone's different and some of the patience might start to trend in a way where they are losing muscle and that is where we have to Make a quick quick adjustment So when you're dealing

with these, how you said the influencer with the promo code and you getting this stuff in the mail that says it's for research purposes only, you gotta be a little bit careful with that.

You wanna make sure you go into a medical professional who's trained and understands how to utilize these GLP-1 drugs. Absolutely. And we you can see when people are on them, you see how they look, how the lose muscle, their ozempic butt and face.

That's not health. Yes, they're having more stable blood sugar. I've also seen diabetics. You know, I was at a conference with a colleague, his older, he has diabetes and his glucose monitor kept going off and I went over to him like, He's like, oh, it's been so much better.

I'm on Manjaro. And he's, like maxed out on manjara, which I also don't think that that we're supposed to be at the highest dose for a long time. Right.

Peptides should be cycled. We should. Be at. The lowest effective dose. But he is eating like a muffin or a Danish for breakfast. Told them and as a doctor and I'm like, you know better than that I like you can't like eat like come on like I should tell them to do carnivore but it's it hard because We're just using it like any other medication where really it is a great tool in the longevity space in The biohacker space You know and for those people that just can Get to that insulin resistance, but I also I have patients and I'm like, yeah, you know You still have to work on your trauma.

You Still have To work On your autonomic system. Yeah you're in fight or flight all the time and Went right when you get off the glp-1 that's still gonna be there, right?

No, You said it very well. It's a tool It shouldn't be used as a crutch. it should be a Tool for your weight loss, in a journey So Doc, right now, there's a big movement that's going on, Make America Healthy Again.

What are your thoughts about that? Oh, I love it. I feel heard. And for the last two decades, we've just been grassroot talking about this. I mean, if you mentioned probiotics 20 years ago, people would look at you like you were weird.

So I think that and raw milk and all of this, it's beautiful that it is getting attention. And I that's what is important because we are the sickest country.

Our kids have chronic illness. So if we can vote with our dollar, and if more mothers hear about this who are buying the groceries and they pick the healthier groceries, in all of that, we make change.

There's a lot of corruption. I mean we talked about that with medicine. So I'm really happy it's getting the attention. Did you ever think in your career as a physician that this would actually be happening?

No, I mean when RFK Jr. got actual acceptance and sworn in, and I was like, this is amazing. I see a lot of injured patients, you know, That they will have like a voice and it will just be recognized that they got injured from a medication that isn't even you know, there aren't really a lot of data on a of these things that are going into our kids and the older adults.

## MAHA Movement and Closing Thoughts

So that is like my patient population because they see me after I have a patient now that was injured by I think Pfizer and he had been to 20 doctors including Cleveland Clinic and He was going downhill and they said that there was nothing he could do I just saw him this week and his steady now So I want to get him on a few more peptides to him back to normal but the fact that they're just told that No, this is we just don't know why this happened.

And we're like, no, we know, why, you know certain medications, We know they have side effects, right? So I think that him speaking for those that have not had a voice and they've been just pushed aside because if pharmaceutical companies aren't liable, well, those patients aren t going to be heard.

Right? Yeah. Yeah, that's absolutely true. So Dr. Jen, You moved you recently moved to Tennessee. What's the next big thing for you? Yes, so we moved from Ohio to tennessee and now I feel like i'm on vacation every day.

We're outside in nashville Yeah, it's beautiful and I will be coming out with a book this spring. Oh, that's exciting pause So if you go to my website healthy by dr.

Jen, I'll have all that information and i just really want to help Women out there and this book is for men to to understand women and how they can support them in that transition Right for perimenopause.

That's exciting. So doc as we wrap up here if there's someone out There that's soliciting and there is something that they've really resonated with specifically with the peri-menopaus What's one thing that you can leave them with?

Don't give up hope. Make sure that you just never give hope and you keep searching for answers and working on your health. Amazing. And where can people find you?

I am on Instagram. That's how we met. Integrative Doctor Mom. You can check out my website healthy by Dr. Jen. Awesome. Dr. Jenna was a pleasure to have you on the podcast.

Thank you.