Introduction and Dr. Pfleghaar's Background

Hi everyone. Welcome to this episode of the Reversing Type 2 Diabetes Summit. I'm your host, Dr. Beverly Yates, ND Today. It is my distinct privilege and honor to interview a colleague, Dr.

Jen Pfleghaar. She has wonderful, wonderful practitioner. She knows a lot as a doctor, as a physician, and also her lived experience. You know, Dr. Jen, welcome to our summit.

Please share a little bit about your background. I thank you so much, Dr. Yates, for inviting me. This is an amazing summit you're doing, and you are just really helping people conquer diabetes.

So it's such a pleasure to be herewith such an amazing person And doctor. So a little bit about myself. I had Hashimoto's Thyroiditis and I had hypothyroidism and this topic is near and dear to my heart because I've lived it.

I feel it. And not only that, because I had to have surgery on my thyroid, I will always be on thyroid medication because I only have a little bit of my azimuth left.

So the butterfly, the thyroid looks like a butterfly, two lobes and it is not connecting it. So I had to get some of that taken off and interestingly enough, I was told I had Hashimoto's via a biopsy, not lab work.

So we'll get into all that goodness later. But I am a medical doctor and board certified in emergency medicine and integrative medicine. And how did that happen?

Right. Well, I, I was in the E. R., I loved the E. R.. I loved the shift work. I loved being able to help people where they were at at their most vulnerable.

But then I kept seeing the same people over and over again. And I told my husband, I'm like, I'm sorry. I have to go back and do a fellowship. I still work in the E. R.

It really keeps me grounded to conventional medicine. It also makes me more passionate and want to scream at the top of the lungs. You know what is wrong with conventional medicine?

But it's great if you break a bone, need surgery, stitches. But the goal is, is to get the people out from diabetes complications or complications due to thyroid problems, you know, because those are the people that we see for chronic issues in the E. R.

So that's a little bit about me. I have a brick and mortar practice, and then I will be doing online health coaching soon after, after the summer. All right, great.

That's so exciting. Thank you for sharing with us a little bit of your journey, you know, and why you do the work you do. How did you get here? I always think it's so interesting for those of us for whom our personal health has been a part of the the learning and the healing, because that's so different than just the intellectual clinical side. Right?

So let's dig right in with a key question and that is this What are the signs and symptoms of hypothyroidism? This is something I'm sure many people are not really as clear on as would be helpful to them.

Yeah, it can get really confusing. So for Hypo, which is a low functioning thyroid, it can be the the main ones that doctors will kind of get triggered and think of constipation, slow moving bowels, weight gain, fatigue.

We talk about brittle nails, hair falling out, and then it can be more subtle things like depression, low mood, low energy. You can have thinning of the lateral edge of the eyebrows right there.

Sometimes that's a really subtle symptom. You can have things like infertility and your cycle could be not right. So there are a lot of different signs of the low functioning thyroid.

And unfortunately, with women, which Dr. Yates and I were talking about, how this fires us up, these symptoms are missed a lot. And not only are they missed, they're ignored or they're told, I can't tell you how many times I heard this.

Patients like my my doctor, I went in there and they just said that I was a mother. I'm supposed to be tired. I'm supposed to feel this way because you're a mother, right?

So and that's that's false. So I feel better now in my forties than I did in my twenties, and that when my twenties I was not a mother.

Hypothyroidism and Hyperthyroidism Symptoms

So I think that that is just, you know, kind of like we don't know what to do or how to help you feel better. So hypothyroidism, a low functioning thyroid, those are more of your common symptoms, signs and symptoms.

And that goes along with Hashimoto's, which is the most common autoimmune disease in women. And that basically the autoimmunity destroys the thyroid gland and then you end up with hypothyroidism.

So the goal would be to catch that early help reverse the Hashimoto's through. Lots of things we'll get into later. And then you never have the hypothyroid and then there's hypothyroidism.

So this is an overactive thyroid most commonly caused by graves disease, which is another autoimmune disease. Right. There's a theme here. So I have been seen in my practice more graves lately.

I don't know if the incidence has kicked up since the pandemic and the autoimmunity being triggered or if it's just more graves. Patients are seeking out my care because they want to reverse that.

Also. Now Graves is going to be symptoms are things like hyper like the metabolisms kicked up. So sometimes diarrhea like an irritable bowel anxiety is really common heart palpitations.

That's a really common presenting symptom for graves. So afib, too, can be another common common complaint. This would be patients that also they could have period irregularity.

Okay. And then they can also just really lose weight for no reason because that metabolism is wrapped up. I actually I saw a patient that had a post-viral thyroiditis and she presented in hyper and graves and then she went back down to normal.

But she had a horrible back pain and she was just like achy because her metabolism was so ravaged up and she had really bad swollen neck. So that was really interesting.

So with graves, same thing, go to a conventional doctor. What they do is they put you on a medication called mathematical to decrease the conversion to the thyroid hormones.

And that kind of shuts things down. Or the what they usually say is like, well, we'll do the Methimazole And until you have to get radioactive iodine, and then that radioactive iodine goes to the thyroid gland where there's iodine receptors and it kills the thyroid.

So then you have to be on thyroid medication the rest of your life. So Graves is like one of those that it's not as straightforward as Hashimoto's to reverse and treat.

But I've had some patients that have gotten off or they're weaning off their meth muscle right now. And usually with that it's interesting because the endocrinologist will say, okay, you have, you know, six months to make this

decision or, you know, a couple of months.

So I usually say about a year, you know, and uncover those root causes. And if we can turn that around, it's really exciting. So you know those symptoms, right?

They could be also symptoms of blood sugar imbalance or menopause. Right. So that's why it gets kind of confusing if you're sitting back thinking like, I have those symptoms.

Well, what's awesome is that there's easy way to differentiate and know if it's your thyroid or not. All right. Thank you for that tour. So with this summary of the things people might be experiencing, what they could, you know, recognize is, hey, this, this applies to me or oh, I heard my friend or my loved one complaining about this now.

Okay, let's talk about where these things overlap. So how can these symptoms that are thyroid system symptoms overlap with blood sugar problems? Because when we're talking about reversing type 2 diabetes, first, sometimes people are starting off with that really high type 2 diabetes diagnosis or with pre-diabetes.

And if they've got an overlap with thyroid, we'd love some clarity about how these two sets of symptoms can overlap. Yeah. And the third thing is, is they they play on each other.

So if you have a major blood sugar imbalance, insulin resistance, well, you're going to hold on to that weight, right? It's going to be hard for you to lose weight.

And that's hypothyroidism. And a lot of the time these patients that are insulin resistance or on their way to diabetes, right, The actual diagnosis of diabetes, they do have problems losing weight.

And it's kind of like you're in this circle, right? You're chasing your tail because if you're hypothyroid and your metabolism slowed down and you want to decrease the fat and the insulin resistance, because if you if you're losing the weight, you're becoming more insulin sensitive on your way to reversing the diabetes.

Well, if you're not if your thyroid is not taking care of properly, that is really going to not be frustrating. But it's also going to slow your slow your efforts, if not sabotage them.

So the weight gain energy, the cold feeling, I forgot to mention that. So cold feeling cold sometimes, you know, diabetes, you're not having good circulation.

So you can have that same kind of sensation as someone with hypothyroidism. So this is one it's important to if you are if you have diabetes, diagnosed with diabetes, pre-diabetic, you also ask for proper thyroid testing to.

Absolutely. You know, and just really insist that your doctor, whoever the ordering provider is, works with you. And if not, consider putting other people on the team.

I know clinically with this 30 plus years of experience and I know for your work that similarly we've run into just a ridiculous number of people whose symptoms and concerns have not been taken seriously and often doctors don't ask people the order of events like what happened first.

And particularly if somebody walks into a clinic and is overweight or obese. Often a lot of assumptions are made that often have nothing to do with the presenting problem, and particularly with this is in regards to women.

There are many of us are just not treated as well as we ought to be, and clinicians sometimes jump to conclusions that aren't warranted. So test, don't guess and make sure people are listening to you.

So what else could you suggest so that people could be advocates for their own health? Because I think that that's often necessary with these connections between blood sugar and thyroid problems.

Yes. So one thing is the testing, right? So if you go into your doctor and ask for thyroid testing, they might just do a

thyroid stimulating hormone or a TSH.

And it's it's just not enough. And not only that, the t h the range of the lab used to be a little tighter and now they've they've increased it. Okay.

So the test h being high would mean hypothyroidism a low functioning thyroid because you're trying to stimulate the thyroid to make more hormones. Okay, so that range has actually gone up.

It used to be like three or four and now it's like all the way up to six. So really a disservice towards patients because they they're feeling bad. Their thyroid numbers are actually low.

That TSH is not triggering a reflex of free T4. So that's why you just need to ask for it. You get the whole picture so you want to get a free T4 and a free T3 along with your TSH.

Okay.

Thyroid and Blood Sugar Symptom Overlap

Now the free T4 is you're in active thyroid hormone, so it doesn't do anything until it's activated. Okay. But it's what the thyroid makes the most up.

Okay. Like 80%. And then there's pretty three, which is T4 is converted to T3, which is the active thyroid, mainly in our liver, but other parts of our body to Now the, the reason why we need both is because some people don't convert T4 the inactive thyroid hormone.

So it's not turning on those metabolic you know, those metabolic switches and everything. It needs to be converted to the free T3, which is the active which is going to turn on all those cellular processes.

Some people don't convert well from 84 to 83. So what does that mean? Well, supporting with certain supplements like zinc, for example, vitamin D is important.

So all of these things are helpful for that conversion. And also this is when we get into treatment where if you're just being treated with T4 or and you don't convert while t 43, then same thing.

It's not it's not going to turn those switches. You're still going to have the weight gain. You're going to have the fatigue, the blood sugar problems.

So that's how that's connected. The other thing that you want to ask for is thyroid antibodies. So that's going to be thyroid globulin antibodies and TPO antibody.

So those two antibodies are very important for the full thyroid picture. Why is that? You could have an early Hashimoto's or thyroid autoimmune disease and it could not be detected right away or they wouldn't even trigger searching for it unless those thyroid numbers were really awful off.

But we don't want to get off the wall. We want to get it before it gets bad so we can actually do something about it. The other the other lab I like is a reverse T three.

So this is another inactive thyroid hormone. So I can just give us some picture on how the cell like the cellular health going, you know, does your body feel like it's in fight or flight starvation mode?

Because that's usually when we convert the T four to the reverse T three so that we would look dig a little bit more into maybe infections, you know, things like mole lime, all of that.

So that's really helpful. So when we look at the thyroid to kind of recap, we want a full thyroid panel. So you might have to write these down and hand them to the doctor and say, look, I've never had my thyroid evaluated.

I want a full panel to make sure we're not missing anything that's important to my health and my diabetes and my energy and my hormones and all of that.

So DSH free. T for free T three the TPO antibody fiber globulin antibody, and then reverse T three. So there are some other functional tests we can get into, but that's a good start.

Just going in to your doctor to ask for things. Thank you so much. Excuse me. That's a great list. What do the letters TPO stand for? Fired for oxidase.

So it's a part in the thyroid gland that the antibodies are attacking. Okay, So it's another another thyroid antibody. So you have to ask for. Most likely that's the one they're going to order.

If you say thyroid antibodies is going to be the TPO antibodies, because that's the most common one that's elevated in Hashimoto's, but a small percent.

We do sometimes just thyroid globulin antibodies are elevated. So that's why I would just like to get both and make sure we're not missing anything. Exactly.

Thank you for that, because that is definitely a more thorough approach. And I think because often the antibodies are not looked for a lot of not completely obvious thyroid issues aren't caught, they aren't diagnosed and people go, Oh, you're fine when actually a person is not fine.

Right? Well, it happened to me. No one checked my antibodies. I had ultrasound, I had a biopsy, and then surgery through pathology. You know, I look back and I'm like, no one checked my antibodies.

Like, how much different could my life had been, you know? And and that's yeah, that's what really drives me a little crazy. So if anyone bites bites back at it, you know, they're like, we're not ordering that.

Be like, well, you know, I know someone that they missed it and that's not going to be me. So, you know, it's important to to fight back. I mean, unfortunately, you have to really be confident and really ask for what you want in medicine or, like you said, Dr.

Yates, that you add people to your team or kick people out. Right. Exactly. I think that, you know, it's just necessary to make sure that you're getting the service that you're there for, that you've paid for and and should reasonably expect.

And there's just such a variability excuse me, in how people practice. You know, I was recently diagnosed with Hashimoto's Thyroiditis and it was found because of the insistence on the antibody panel and it was there.

And thankfully I was seeing a fellow, a colleague, a licensed naturopathic physician here who already knew to do that. Prior doctors in their work up were insisting that I'm like, Wait, yeah, you do.

So I changed team. So I'm just telling you sometimes you need to have somebody else on the team who won't be lazy, who will be thorough, and who understands how important your health is to you, and it should be just as important to them.

It really should be.

Getting the Right Thyroid Labs

And I think one of the arguments is with the with the Hashimoto's and the antibodies is that you might get the argument from an endocrinologist saying, well, there's nothing we can do about it.

The thyroid is just going to destroy itself and then you'll have to be on thyroid medication. So we don't even watch those numbers. We don't care about those numbers.

And I argue that, you know, working with so many patients that have reversed their Hashimoto's, their antibodies have come down, they've preserved the function of their thyroid gland.

Right. So that's why if you catch it early, you can preserve that function. If you wait a decade, right, and it's destroying that thyroid tissue, you might have to be on meds.

The rest of your life, you know, and, and I don't know, I was told by the surgeon that that was looking for cancer when I had surgery in medical school on my thyroid.

He said, the thyroid, you know, what was there look disease that looked bad, you know. So he took it out. And I'm like, Yeah, but like, could I have reverse, you know, gotten some of that function back?

You know, I won't know. But I do know patients can and they do. And some of them I have one in particular I'm thinking of. She went really hard at it.

Very type-A personality, which isn't always good for four things, but really went hard, went grain free, fixed her gut. We put her on peptides, she totally reversed all of her thyroid disease and she doesn't have to be on medication.

So it can happen. But this is once again why we reiterate just bring in your information that you learned here in the summit and go in and have a talk with your doctor.

And if they get defensive or they're not hearing it, then you might want to add your team. Exactly. Exactly. Thank you for illuminating that. And also, I don't know if everyone's aware, but at least here in the US you have direct access to labs.

So if you are working with health professionals and they refuse to cooperate, you can get your own lab testing done. Which is why throughout the summit, when we have wonderful experts like Dr.

Pfleghaar come on, where they are listing what the labs are. So at least you can see what the data is if you don't have a team around you. And then you can find someone already ready to go knowing, hey, this is an issue, or maybe it isn't right.

So we aren't trying to say anyone has to be their own doctor. We're saying, find a doctor who will do this. Work with you. Yeah, that's a great point.

And most of my patients are they're so in tune with their body. They're so well-educated, too. And they'll know, Don't call my office and they'll be like, I think something's off with my thyroid.

Can I get labs? And they're right, you know? So you need to you need to trust your your in your body and you know your body best and really trust that if you feel like something is off, then investigate it with your doctor, doctor or get the labs yourself.

So then that way you can really do yourself a favor and not ignore those signs and symptoms that you're getting. Exactly. And these things do interact between blood sugar, thyroid issues, etc., because those are all part of the hormonal world.

They're all part of the endocrine system. There's a reason why endocrinologists look at all these things. And so if someone is missing this, wow, what a missed opportunity for healing.

Right? So let's take a peek now at this topic. In fact, more than a peak, let's do a deep dive. How can stress specifically affect the thyroid and people's blood sugar levels, especially for women?

Because I think we might be a little more sensitive to these effects. Oh, yes. So the adrenal access is the hypo pituitary adrenal access. So HPI access is it's it's hard.

So most women in my office are between like their 2250s. And women, as you alluded to, are very we're not sensitive to stress. We just have we just have a lot going on.

Right. So what can happen? Cortisol, which is the stress hormone that's made in our adrenals, that when cortisol goes up, that causes blood sugar to go up, especially if we're we're stressed all the time and that blood sugar going up is going to start you on a roller coaster or just if you have the big spikes of glucose when you have a stressful event that's going to those big spikes are going to make you become more insulin resistant over time.

Okay. Also, if you're stressed, sometimes people eat when they're stressed, right? They're in chronic stress. They're eating not the sweet food more and all of that that's causing blood sugar spikes.

So also the adrenals play a role with the thyroid. So we have that that reverse T3. If there's a lot of stress, our body kind of converts to that reverse T3.

So then that T3 is going to be lower that active thyroid hormone. I see this a lot with patients that if we really tune in on their adrenal health and their cortisol, their stress, then their thyroid numbers look better.

They're in range, you know, they look better as opposed to just medicating with the thyroid medication and having them more stress. Sometimes that just shunts to that reverse T3 or it's just their cellular health is just not responding to the thyroid meds as much.

So with regards to cortisol, what happens with cortisol is that it's this low. Okay. So when you wake up in the morning, your cortisol should be the highest of the day, okay, You should get out of bed.

You should, you know, kind of like hop out of bed, like ready to go. You shouldn't be dragging out of bed. You shouldn't feel exhausted when you wake up.

So we need to have that peak in the morning and then you slowly come out throughout the day and then it evens out. And then at night it starts to rise again.

So doing different cortisol saliva test with different, different patients, we see a lot of different things. We see people that are always high and they never really come down.

And these are patients that are just stressed all the time. They don't get good sleep, they don't have good mechanisms to help deal with stress, and they might have blood sugar imbalances from that because their blood sugar is going to be elevated too.

So we also have patients that are just really low. They don't mount a response. Those are patients that are going to be tired all day, kind of, you know, we call it more adrenal fatigue.

So that can happen after being at this level really high all the time and then you're down. It's kind of you can think of when you work really hard, work really hard, and then you go on vacation and then people get sick, right?

It's because you're up here all the time burning just candles at both end, and then you finally relax and your immune system is in shock because it's been operating with all this cortisol and then you get sick or, you know, when you're studying for tests, you know, when you were in college or high school and you're up all night pulling all nighters and you come home for break and you get sick.

So operating at that high cortisol all the time is not good.

Stress, Cortisol, and Hormone Effects

Okay. Not good for the thyroid, not good for your blood sugar. And unfortunately, with the state of how we live with notifications all the time, emails popping up that you know, you feel you get this email and you feel like you have to respond like right away to it.

You don't, right? You feel you get those texts and you feel like you have to respond right away. Don't, right. Also like things like reals and tick tock where you're just constantly stimulated that dopamine rush and you're just you're constant on this great wave of adrenaline.

So we have to take a step back and look at how can we manage our stress better because we're all going to have stress. We all have to build resilience to that stress because stress is not going away.

Right? There's always going to be something. And I have four kids and I tell you, like they they give me a run for my money sometimes. So when they do it, it's crazy.

Well, it's a wonderful example because I have felt this. I had a patient back. Her adrenal curve was was going down. And then right between three and four, it would spiked up and went back down.

And she was having some hormone problems. We're also investigating her blood sugar, too, because those blood sugar imbalances cause emotional roller coasters and all that.

And we want to prevent the diabetes. So I asked her, I'm like, what what happened at that time? She's like, well, that's the time. So she's working hard.

She stays at home with her, with her kids. She's like, I feel really rushed right back. I'm making dinner. I'm cleaning the house to get ready for her husband coming home.

And she feels that in her body. And I'm like, Yeah, your body is not liking this, not doing good. So, you know, we went through some behavior modifications we added on L-Theanine for her to take at that time and it's an amino acid that helps helps with stress response.

It's very nice. So we came up with a plan for her because that spike, it was not good for her health. Okay, I feel that too. I don't know if there's anyone else that has that rushing moment, you know, after work and before the kids activities, Right.

So every once in a while I'll have to take an l-theanine or do some deep breaths or just recognize it, be like, okay, I'm feeling stressed out. Let's take some deep breaths, put on some music.

You could dance, right? Or you could also figure out ways to make that time easier. If that's your busy time or if morning is your busy time, you know you're cooking all of that.

Use a crock pot, you know, have dinner ready when you come home. On my busy office days, I do that a lot, so I'm not cooking when I get home. So I don't feel like rushed and stressed because that rush and stress feeling is not is not good, long, long term right.

So those are some tips like to help with that. The other thing you could do is meditation. I do prayer and meditation, meditate on Bible verses. You could do stretching, you can do breath work.

So there are a lot of different things that you can do to help with that, that cortisol. Another thing is sleep and timing your sleep properly. So watching that sunset, avoiding blue lights at night, then getting a good night's sleep, hopefully, and then waking up in the morning and then right away, look at that, Look at the sun, Get some bright light in the morning.

So that helps set that circadian rhythm which helps set that cortisol rhythm. And we do know from studies that working night shift is actually a carcinogen because it messes up that circadian rhythm.

And I worked in the E. R. and guess what? My favorite shift to work in the E. R. is? It's a night shift because it's so chill. There's no like administration around.

And it's just you and the patients. It's great. It's very chill about it, but it's terrible for your health. So you don't. Want

to trade off. It is it's bad. I know. Well, I tell I remember like, you know, people ask, they're like, well, are there things you could do if you work night shift to help negate that?

And I'm like, yeah, I get off night shifts so I don't work full time in the E. R. anymore, So I'm not working as many night shifts. But yeah, it can. It's it's tough.

It's not easy. So picking one of those strategies and just recognizing, okay, so if my cortisol, my stress levels are out of control, it's going to lead to weight gain in my abdomen.

It's going to lead to insulin resistance, it's going to affect my thyroid, it's going to affect my hormones. So you need to just be more aware of it. So when something you know, because there's low level stress, you know that just every day there's things going on.

But if there a big event happens, then your body can be ready to handle that because our bodies are amazing and our bodies adapt very, very well. Yeah, they sure do.

Thank you for pointing these things out. I think that the human body is fantastic and it is up to us to be good stewards of the wonderful gift we've been given of this life experience.

But there are some real obstacles to get in the way. So thank you for giving us clarity about what these things are, how they're experience and what people can do about it.

So with this in mind, I would love to get your thoughts on this. How can you help heal your own thyroid? How can you help it to heal? Yes, that's the that's always the big question.

Like, okay, so thyroid, something's wrong, but what do I do? Okay. So we talked about cortisol, which is helpful. The other big thing is healing the gut.

Okay, so for Hashimoto's, especially gut health is where it's at. So autoimmunity can come from leaky gut or intestinal permeability where big things come through that aren't supposed to and our body sees it and thinks it's bad, so produces those antibodies, but they're autoantibodies, so they're our body attacking itself.

Got health by far is the number one thing that will help heal autoimmunity. And what do we do first? So first we remove the things that are bad and causing problems and gluten.

I'm sorry, gluten, wheat, barley, all of that got to go. Okay, So sometimes there can be a little part of that molecular mimicry where the body confuses those things with thyroid and then creates that autoimmunity.

So gluten would be the first thing that I would say has to go. And what you want to do is take it out for 6 to 8 weeks and then you will notice a difference.

I tell patients, take you out for 6 to 8 weeks, put it back in. If you have no reaction at all, then maybe you're not gluten sensitive or celiac or anything like that and you can test for celiac.

There is an overlap between patients with celiac disease and those that develop Hashimoto's. That's well known. The problem with gluten though, in general, a lot of times I think it's the glyphosate that's hurting the gut and causing problems.

I just like to take it out. Anyone that has Hashimoto's or have, you know, just it's just think of it is not there anymore. If you go to Europe, you can have bread there.

Okay. But the food in America is just different. It's highly processed. The glyphosate, which is banned in other countries, it's in abundance here, so it's really causing some damage.

So grains too. So if you're really all about it, it's not if it's not going to cause you stress, right? Because a lot of

times if you go to a doctor and they're like, go on the AP diet, which is the autoimmune protocol, or take out everything that's stressful.

And what do we talk about? Stress, right? Stress is not good for the diet. It's not good for your blood sugar. So I kind of see it. I gauge my patients.

So I'll have some patients, you know, I'll just they just do gluten. You can do it. It's one thing if patients are like, all on board and they want to go grain free, I'm like, That's awesome.

Go grain free. You know, because as we know, grains can be kind of moldy. Mold can cause a lot of gut issues and just more for the liver to process and everything.

So grain free. Yes, that would be amazing. AP Would be amazing. Short term. Short term, not long term. But if it causes more stress for the patient or it's going to bother them or cause them anxiety and social situations, then no, we're just we're just going to stick with gluten.

So that is a big part is the nutrition. Obviously, we want to have healing foods, you know, no high fructose corn sirup and which is terrible for diabetes and, you know, none of that, obviously, also.

And then when we look at the gut health, we want to remove other things like dysbiosis is in the gut. So dysbiosis is an imbalance of gut bacteria in the gut.

This could look like SIBO, small intestinal bacterial overgrowth where we have methane or sulfur producing bacteria overgrown.

Healing the Thyroid Through Gut Health and Detox

This could look like candida, this could look like mole being in there. So this is going to look like different things. And what happens is the bad guys just they outweigh the good guys, right?

They take over. So how does this happen? Well, if you've had antibiotics, that could happen. Glyphosate can disrupt that stress, can cause a dysbiosis in the gut.

Most stomach acid, if you're on a protein pump inhibitor, can cause dysbiosis in the gut birth control and you're probably like, Oh my gosh, all of those things.

Well, yeah, unfortunately a lot of people have gut health. That is not ideal. So what do you do? You find a natural path in integrative or functional medicine?

Doctor Someone to work with you to investigate and get a functional test to look at that so that that's really helpful. And then you remove those things also parasites, parasites.

Yeah, particularly for graves. I have this one patient and she was pregnant or breastfeeding at the time. Yes. I started seeing her when she was pregnant and she had a parasite and we removed the parasite and we actually used medications at that time because a lot of the herbal medications she was breastfeeding are really young, baby are aren't tested.

And that was like the last trigger that we just had to take away for her grazed and she's off medication. I haven't even seen her in a couple of years because she's doing so good. So.

So yeah, you know, this stuff is real now. Why? When you go to a gastroenterologist, they will look at you like you have five heads. If you bring this up.

It's just it's taking time. It's taking time to to go through the studies and to become standard of care. And a lot of the times, the studies that we do have now that acknowledge this dysbiosis or imbalance with autoimmune diseases,

they just haven't made it through the colleges and stuff.

And we'll see that a lot. The stuff we're talking about, like at this summit is just light years above national medicine, unfortunately. So that's kind of why that you might see that.

Another thing with Hashimoto's, we talked a lot about gut health. We talked about cortisol. Heavy metals can be a problem. So Mercury loves to hurt the thyroid and mercury.

You know, you think, what's that it right. Amalgams or silver fillings in the teeth. So those are big. So if you have any of those you will you do want to get them removed.

Okay. Because that is causing mercury to just be absorbed in your body. And then from our diet, from mercury in fish, and then also certain vaccines that had mercury in it.

So if you're older, you could still have that mercury, that heavy metal in your body from your childhood, from your teeth, your mercury fillings when you were a child.

I know I had some. Did you have any. Dr. Yates I did before I became involved in this profession. And I didn't know at the time that they are toxic and I did indeed get them removed.

In fact, before I conceived our first child, because by then I had left electrical engineering and now was naturopathic physician. And I realized, oh dear, this has got to go, you know?

So yeah. Yeah. And that's a great point. You did it before you had your child because unfortunately, the first born get that big mercury load. They were like a giant later.

So I always feel bad for my first born because I'm like, oh, like I didn't realize, you know, I wish I would have completed the mercury out because I had a few fillings.

And then the other scary thing is I know for sure that that was not a safe mercury removal because it was like 20 years ago and I'm sure Mercury was just flying everywhere.

I was breathing it in. And so when when you get your mercury out of your teeth removed, you do want to go and get it done by a mercury safe removal. And it's hard. It's expensive.

It's not usually covered by insurance, but it needs to be done properly because think about it, you're just that heavy metal is just just circulating in your body.

So yeah. And then fish diet, you just need to be careful. When I go out to sushi with my husband because he he likes to. I used to love like sushi. I used to love it so much and now I'm like heavy metals and parasites.

No, thanks. Right. So, yeah, it's like. So now I, I look up if it's some, like, random fish that I've never heard of, I always look at the mercury content and I'm like, It's not worth it.

But I do take a binder of after Sushi that night, just just because of all the things that can happen, you know, bind up all the, the parasites and and all the heavy metals.

So here's the thing you have to realize is that these things we're talking about, this is just the rest of your life. You know, we're going to use these principles.

We're going to watch our diet. We're going to make sure we're not consuming a bunch of mercury. We're going to help our stress levels. And the interesting thing is, is, you know, Dr.

Yates is an expert in diabetes. I'm an expert in thyroid, but they're all connected. Right. We can't we can't talk about diabetes without talking about the thyroid and hormones.

And it's it's such a beautiful thing that once you finally find that rhythm and you will you will find that rhythm, that you'll you'll know when something's off and you'll be able to self-correct it and your body will just live in harmony like it's supposed to be.

Because a lot of the stuff we're talking about, you know, heavy metals and I didn't even go into environmental toxins that was going to affect the thyroid, too.

A lot of it's out of our control. But if we can control the things, we can, you'll you'll just end up in good health and you'll feel great. Absolutely.

Absolutely. Thank you for painting such a vivid and clear picture. You know, as you were talking about mercury and the need for mercury removal and avoiding glyphosate and, you know, the pesticide and herbicide, all of the toxic exposures we get in the sources, I wondering for how many people who might be watching these sound recordings, particularly this one, if people ever used or were exposed to as a kid or a teenager, the old school Mercury Thermometers and people would break them or they broke and you see that silver looking liquid, if anybody ever played that to your skin, had direct contact that is toxic and terrible.

So if that looks if that sounds familiar, France, you need to get this done. You really do. Yeah. It's so true. Because my my dad that that was I mean, I remember them as a kid.

We wouldn't break them open. Don't play with them at that point. If they broke, it would be like everyone would stop and like, clean it up. So I think it was known the danger zone at that point.

But like my parents, they would play with them. And you know, the Mad Hatter, they used to use mercury to float hats and everything and the acute poisoning.

It's it's so fascinating. But but now, now we know. But it's kind of crazy because we know forever chemicals are terrible, yet they're still put in everything and those are used.

And I do you know they're in contact lenses. I saw that report and it's so frustrating. Our world is so toxic. Right. So. So what can you do? Just practice what you know, start with food, start with lifestyle.

You know, start with the pillars of health. Make sure you're getting good sleep. You know, do your breath work. And and it's all you could do, right? The one thing that's not good is just stress about all of these toxic things.

Right? Especially when that contact paper came out with then having the forever chemicals in contacts. And I was like, I just ordered contacts, but now I know my next set, I'm ordering.

I'm going to look for the ones that are free of the faces. So it's it's a it's a fun world out there, right? Yeah, it is quite a service. It keeps us all on our toes.

Thank you for pointing out the issues with contact lenses as well. These personal care items, the things we do in order to be able to see, to eat, to breathe, to drink our water, to breathe our air, to go to the bathroom, things for menstrual care, things for hair care products, skin lotion, any makeup, a clothes.

I mean, wow. Yeah, it's hard. Just just make small shifts, small changes every day. If you run out of something, then get something new. You know, you could just use vinegar to clean and then some essential oils.

So most of the switches I feel like that we've made in our household over the last 15 years actually save money in the long run. You know, even just like we use cloth paper towels, you know, because paper towels have in them and who knows, they probably put some plastics in there, but we save money.

The only thing it doesn't save is my my headache of asking my kids to fold the napkins and the paper towels. So that if anyone has a big tip for kids to get do their chores.

But it's also it keeps my stress lower. I have less to do, you know, they will unload the dishes for me. They just don't like folding things. But it takes off to my to do list.

So try to delegate if you're a type-A personality out there, because I'm a recovering type-A personality and try to delegate some of those tasks because that will help your stress level and help your thyroid and then help your blood sugar.

Right. So it's okay to ask for help, which can be hard sometimes. Too. Absolutely. Thank you for sharing that. My kids are older now, and when they were younger, I always told them, Here's my tip around this.

You don't have to like your chores. You just need to do them. I like that. That's a good one. Snap right? Exactly. Exactly. Yeah. That's just real nice.

Just keeping it totally real.

Advocacy, Empowerment, and Closing Advice

Okay, So as we wrap up this episode, is there any one particular thing that you want to share with our audience? Oh, boy, that's tough. Okay, it's tough, but it's not.

So I would just say advocate for yourself would be the number one thing I would say. And you know, know that your body is very intelligent and wants to go into homeostasis.

So you're going to have to put work in, but don't give up on yourself and keep working at it and you'll find answers. It might take longer if you've been sick with whatever disease for a long time, it might take a little longer, but you will get there.

The things that I've seen in my office with integrative medicine have just been miraculous. And it's it's not me, it's not the supplements they take or the and the medications.

It helps, but it's ultimately the patient putting the work in. And and once they they know that they can be in control of their health just to see how happy they are.

It's it's amazing. So yeah so take all these tips and tricks and and get to work great with the whole summit. Everything you hear, just get to work and share with your friends and family.

Because if more people are doing it around you, the more people that can just change the health of, you know, the health of America. Absolutely. Thank you for that. That's a great, great message.

So, friends, as you listen to all of our episodes, please share the summit with others you know, who care about their health or who need to have more options and maybe have their eyes and ears and hearts open to other approaches to what is really effective for health care and just reclaiming that personal power.

All right, Dr. Pfleghaar, thank you so much for being my guest here on the summit. We appreciate you. Yes, of course. Thank you so much for having me.