Cycle Syncing and Listening to Your Body

But what do you think about cycle syncing? I love cycle syncing. And I think you hit the nail on the head when you said you have to listen to your body because everybody is different.

So just a quick backstory on how I, I didn't even know cycle syncing was a thing until honestly, about a year and a half, two years ago. Prior to having my daughter, so I have a two-year-old now, but prior to having my daughter, very active, I was running 10Ks, half marathons.

And when you train for something like that, you have a schedule and that's what you do. It doesn't matter how you feel. So looking back, I can remember having runs where I was like, oh my gosh, I feel like I have a hundred pound weights on my legs.

Like my time is terrible. My energy isn't there, but it was just, maybe I slept bad. Maybe I didn't eat right. Like maybe it was just a bad day at work, whatever, tons of excuses.

But looking back, I'm like, you know what, I probably was in my luteal phase. Your health is shaped by more than symptoms. Through real stories and expert insights, we explore how your genetics, environment, and daily choices affect your well-being.

We uncover root causes and share practical tools to help you find the healing you need. Welcome to the Forum Health Integrative Medicine podcast. Welcome back to the Integrative Medicine podcast with Forum Health.

In this episode, I'm sitting down with Alicia Barkholtz from Forum Health to talk about something that affects every woman, our hormones. From adolescence through the reproductive years and into the transition before menopause, hormones are constantly shifting, influencing everything from sleep and mood to energy and metabolism.

Alicia and I break down what's really happening in the body and how understanding these changes can help women better support their health at every stage of life.

Let's dive into it. Alicia, I'm so excited for you to join us today. We are going to be talking about women, their hormones, and some of the shifts that women experience throughout the years.

Alicia, thanks so much again for joining. This is such I feel like an important topic for women. It's something that I've dived into recently. I just turned 37 this year.

And so I was feeling some different shifts and strange in my body. And I know I've done some of a little bit of a deep dive into this also, but Alicia, let's just dive into it.

Women go through hormonal shifts throughout their entire life. But I think to start off our conversation, let's dive into what are those shifts throughout the years for women?

What do they look like? I know we know the buzzwords of perimetapause, metapause and stuff like that, but there's so many other stages that we go through that aren't defined with those buzzwords.

Can you walk me through the hormonal shifts women go through?

Hormonal Shifts Across a Womanu2019s Lifespan

Absolutely. Well, first of all, thank you for having me. Super excited to be here and talk with you about this topic. I

think I'm just as passionate about this as you are.

So I think this is going to be a great conversation. Great first question. So yes, when we think about hormones, a lot of times we start with, okay, you're an adolescent, you get your first period, and then nothing gets talked about until perimenopause.

That's like a 30 to 40 year gap that women are just supposed to be balanced and happy and nothing is happening. Wrong, totally wrong. So we kind of break this down.

We can think of adolescence as getting your first period. You know, hormones are starting to ramp up. We're starting to notice puberty changes. And like I said, that first period and women are getting into their womanhood at this point.

But then we can already see hormonal shifts when we get into the teenage years. And this can be due to different stressors. This can be due to different, just outside things that are coming in.

It can be, I mean, if women are doing sports that can play a part in their hormones and things like that. So I think you've even looked at kind of the high school years, the college years, and then we kind of flow into our fertile years where women might be starting to think more of, you know, pregnancy and starting a family and things like that.

And then perimenopause, I would say comes next, but there's a lot that can happen between that fertile years and that perimenopause. With you saying that you turn 37, yes, there's another shift there.

You're not perimenopause, but you might be starting to feel some different decline in some of the hormones and things like that. So truthfully, it just, those buzzwords are great, but there's so much, so many things that can happen in between there that I think just get missed and women just get pushed to the side no matter their age when realistically there's so much we can do to help balance hormones throughout that entire lifespan.

Absolutely. And I think the other thing too that happens is birth control is such a big piece to this, at least for me. I got off birth control because I was on that.

I got on it when I was young. Around my first period, it was the tool that we had at the time. I had really aggressive PMS symptoms when I first got my cycle.

So I feel like I was taught it maybe in school, in health class or something. But then I get put on, you know, women get put on birth control early in life.

And it's almost like we forget what it's like to be a woman. And then When you get off of it, whether you're getting off of it for your fertile years or you're just transitioning off of it, that's what I chose to do.

I just didn't want more hormones in my body. And I wanted my body to act like it was intended to act. And I hear this from a lot of my friends and family and things like that, that they didn't know what to expect.

You kind of forget what it's like. to have a period and you're relearning what it's like to be a woman. And when I turned 35, 36, I started noticing differences in my sleep, my attention, and even my mood where I was questioning like, Is this anxiety or is it like, I started questioning myself because I knew I wasn't at that perimetopause age.

I know I'm not in my like fertile, fertile windows, but there's this like in between time, between fertile and perimetopause that I feel like for some women, it was for me, there can be huge shifts that you have to adjust to.

So I think I, I kind of talked about two things, one, the birth control thing, but love to, to hear your input on like birth control. And if you've ever experienced patients in your seat who have gotten off it or anything like that, what, what, how do you feel about that first piece that I said?

Yeah. So I was in the same boat. I got started on birth control. I want to say early high school because same as PMS symptoms. I can, I can vividly remember.

getting my hair, my mom was doing my hair for homecoming and I ended up like on the floor in the fetal position with like the worst cramps ever. So, you know, then birth control is, is the option.

Now when you think about what it does, it makes sense of why, why people go that route, right? So when we think of birth control, what it's doing is it's shutting off the natural production of estrogen and progesterone that we are formulating in our body.

So your ovaries are producing estrogen and progesterone. And when we Go on birth control, it shuts that production off of those natural hormones. And then you're given synthetic hormones that then fill the receptors.

So we have hormonal receptors throughout our entire body and they need to be filled. Otherwise they're going to get really mad. And we can talk about that later.

That kind of gets into the menopause part of it, but you have to be, you have to fill these receptors. So this synthetic birth control is going to fill these receptors for you, but we're shutting off that natural production.

So these synthetic ones are going to be much less. So that brings the last PMS symptoms and things like that because we're shutting off that production.

When you talk about the womanhood aspect of it, I love that because we do, we lose those natural productions of our hormones. And so when you think of why it makes sense of why women are put on that, because it shuts off that production.

But when we think about what we can do though, when we really look at the hormones, a lot of times, a lot of those PMS symptoms are coming from an estrogen dominant standpoint.

And women can be estrogen dominant from high school on and we see the heavy periods, the PMS, unwanted weight gain. That all is showing estrogen dominance in a really kind of fun side effect is we don't realize where we can get estrogen from so many different places.

So candles, do people know that candles can give off extra estrogen building?

Birth Control, Hormone Disruption, and Coming Off It

molecules and things like that. So when we're around a lot of those fragrances, those not natural fragrances and things like that, they can actually cause our body to produce more estrogen.

Same with BPA. So if you're using Tupperware or things like that that have BPA in them, that also can stimulate more estrogen production, which in turn can cause more heavy periods and all of those types of things.

So we have to look at the outside world too and all of the different things that play a factor. But when we know that we can work on getting rid of that estrogen dominance and getting rid of that estrogen, we can work on balancing up progesterone without having to lose that womanhood and without having to shut off the production of our hormones.

So yes, birth control I like to say is an easy fix and it's a bandaid and it makes like logically it makes sense of why people are put on it because it is a bandaid and it takes care of it but it's not getting to the root cause so you could come off of it you do have to relearn what it's like to have a normal cycle and you could be hit by a train essentially because if you all of a sudden are estrogen dominant and you don't know how you know to take care of this and things like that coming off of birth control can sometimes be worse for women than before they even went on birth control.

Yeah. It's also super, you know, when you work with a practitioner, it's, it's easy to come off knowing these things and being like, okay, we're going to work on, you know, supplementing these different areas to help that transition be better.

So if you're on birth control, I don't want to scare you. I've been there. You've been there. I mean, a ton of women have been there and it's not super scary coming off, but there's definitely things you can do to help supplement coming off and make that transition a lot easier.

Yeah. And you said something about like just the fragrances and the things that we're exposed to. A lot of times we refer to those as hormone disruptors.

That's another, you know, theme and conversation that's kind of going on now to hormone disruptors. molecules, chemicals that our bodies come in contact to, whether we're ingesting them, whether we're smelling them, touching them and absorbing them through our skin, the air we breathe, all of those things, they get into our body and they can either up regulate or down regulate hormones in the body.

And the other thing is, which this is going to be a really fun, I'm already kind of planning another podcast to spin off of this one. but even the toxic burden that is generational.

Every generation and every person has such a different toxic load that either is now being passed down generation from generation, as well as the environments that we're in have a lot of these hormone disruptors in them that we're not aware of that can really mess with our hormone production regulation and things like that.

A follow-up question on the birth control too, is when women are coming off birth control, whether it's for fertility or they're just wanting to get off it and feel, you know, go back to their biology.

I've heard rules of thumbs. thrown out there. Like it's gonna like for every year you're on it, give it a month or so to like transition off of it and stuff like that.

Have you heard any of that before? And do you agree? It's a really good question. There's a lot of different things about that. My kind of rule of thumb that I look at is a three month rule.

So really it takes a good three months for your body to get back into its natural cycle. Now, whether that means if we're supplementing with hormones, I generally won't recheck patients for three months because it takes that long for those hormones to start to circulate and to see how it's doing in the body.

So that's generally my rule of thumb for birth control as well. So, um, you know, if you're coming off for wanting to get pregnant, give it three months, give your body a good three months to get back on a normal cycle and just kind of figure out a cycle because that first cycle is going to be kind of crazy because your body's like, Oh boy, now we're having to produce these hormones again and fill these receptors and things like that.

So my rule of thumb is generally three months. I don't know, you know, if that one about, oh, you have, you know, a month for every year you've been on it can be kind of scary because if people have been on it for 10 plus years, they're like, oh my gosh, I have been off of it for a year before trying to get pregnant.

And I don't necessarily think that's the fact. Like I said, my rule of thumb is really like three months. That's what I've seen to be the most effective in really any, any stage of doing anything with hormones is really a good three months.

And then just like supplementing in areas where you can, you know, helping with estrogen metabolism and making sure progesterone is adequate and things like that.

But usually my rule of thumb is about three months. Yeah. Are there any birth controls? Like there's a lot of different forms out there right now. And I've I've been on several different styles and forms and like there's the shot and things like that are there.

And now there's like the IUDs and stuff. Are there any birth controls that are, that you think are more challenging to come off of where that three month rule might like, maybe you need to be a little bit more patient if you've been on X, Y or Z.

Yeah, I think the three month rule is really good for probably most of the orals. Because those just with the metabolism rate and things like that, it goes through the gut, it's metabolized, it's kind of easy to get rid of and get back into normal cycle.

IUDs probably, I would say, are a little bit trickier. And those are ones because, I mean, that's inserted right into that uterine tissue. So it is going to take a lot longer to really kind of get that, that re-regulate it.

So I would say probably the IUDs and sometimes even the one in the arm, it also is going to determine what synthetic hormones you're being given. So even with IUDs.

Right. Some of them are hormonal. Some of them are like non-hormonal. Right. Yeah. So it's really going to depend. And that is across the board. I mean, there are so many different orals, even when it comes to IUDs.

You can have hormonal IUDs, you can have copper IUDs. So it really is going to kind of determine that side of it too. Like what kind of dosage are you on, what kind of synthetic hormones are you on, and things like that.

And again, it's very patient specific. So, you know, even when you look at, you look at pregnancy, some women can get pregnant, you know, their husband looks at them and they're pregnant and other women have to try for months and months and months.

So it's very patient specific in just how our body is adapting. So keep that in mind too, you know, if you know someone who like came off their IUD and they got pregnant in a month, Congratulations.

Celebrate. Your body bounced back super quick, but it is a personal journey for everybody. That's hormones, men, women, whatever. It's, it's a personal journey.

We all have different histories. Our bodies are all different and needs are different and things like that, which is why I love our personalized medicine.

One dose might be like one hormone level might give somebody symptom relief and another hormone level, the same hormone level for somebody else doesn't provide that relief.

And that's where personalized, you know, hormone care kind of comes in there too. So you talked a little, we talked a little bit about the different stages and I kind of want to hone in on two stages, really one for my own personal greed and benefit, but like the fertile years as well as the.

in between stage, between the fertile years and perimetopause. But when we're looking at like the fertile years, one, what age range do you usually like kind of put people in for the fertile years?

Yes, it's going to average and be dependent person to person, but there's, you know, an average age range.

Fertile Years and the In-Between Stage

What would that be for the early years? So I would say anywhere, I mean, I don't want to go back into like the teens, but realistically by 18, 20, right?

Realistically. Yeah. I mean, even some 16 year olds. Yeah. But I would say honestly, even to up to age 40, like I know, I believe that advanced maternal age is 35. So I believe when you go into like traditional healthcare, if you're over 35, you're flagged as advanced maternal age and things like that.

I think a lot of factors come into that, you know, how well you're taking care of your body. You have insulin

resistance. You have other comorbidities going on.

That's all going to play a really big role. But I think even, you know, we're kind of talking about that in between stage, right? Fertilures and perimenopause.

You know, you were talking about. having issues with sleep, that seems to be the first thing I see in patients is maybe a little bit more increased anxiety and a little bit more sleep disturbances and things like that.

And a lot of times that's because our progesterone and that is the hormone that tends to start to deplete first. before any of the other hormones. But that's not saying that you still can't be fertile, right?

So we can give you a little testosterone and up that and you can get pregnant. So yeah, it's just that 35 or around that age, we're all born with a certain amount of eggs.

And so when we reach 35, we've now we're starting to decrease, whether it's like the egg quality, which there's ways to support egg quality and just the release and things like that.

It's just, it's what happens with aging. So it doesn't mean that you're not fertile. You are, we are, right? It's just that there's other things that you want to consider, you know, taking CoQ10 and a prenatal and, you know, going on, like I was looking at fertility journeys and stuff like that.

And even if you're on a track and if you're getting off, or if you're in that age range where things might start to decline, again, I think it's like the three month rule you were saying, like start a fertility or like a proactive lifestyle supplement, work with your healthcare providers on hormone balances.

I'm definitely on progesterone right now. It's saving my life. Days 14 through 28, I can sleep again. There's so much that we can do to maintain the quality, the health with proactive plans.

It's just things to consider. And for those of you out there, just a quick little hormone basics. Estrogen is going to be for your mood, bone, brain, and metabolic support.

Progesterone is going to be calming, sleep cycle regulation. Testosterone is going to be your energy, your libido, muscle motivation. And so just if anybody's curious out there.

So in the fertile years, what are your hormones doing versus what they are doing when you get into this pre perimenopause stage? Yeah. So I love how you just described the hormones and I am a very visual person.

So I like to think of like your estrogen is going to be kind of like out of three friends is going to be kind of like the ringleader. So she's the one that takes charge, makes the decisions and things like that.

She's got a very bold personality. And then you always have to have that second person that's going to kind of tone that first person down, right? So you have the best friend that comes in and she's a little more chill, more calming, more nurturing.

That's your progesterone. And then you have that super energetic friend. That's going to be your testosterone. That's giving you all of that energy. So that's kind of like how I like to visualize the three different hormones and things like that.

So when we're thinking of just the fertile years and how our hormones We're seeing fluctuations through the whole cycle. So day one of your cycle is the first day of your menstrual period.

Now this I think can be confusing because when you look at a pill pack for people who are on birth control, your sugar pills are at the end, right? So when you get your period, you're like, oh, it's the end of my cycle.

And then you start back at the top. And that's actually wrong. But I think that just, that was always ingrained in my

head before I started like doing this.

I was like, what? That's the beginning of your cycle? No. Yeah. Day one is the first day of your period. And that generally, I'm going to generalize it on like a 28 day cycle, which is generally average.

So days like one through five is you're in your menstrual period, you're shedding the uterine lining, you're bleeding. Your hormones are pretty much at baseline.

They're not really doing much. They're kind of taking a little break. Everything is kind of resetting if you want to think of it that way. And then when we get into our follicular phase, which is generally about days six to 12, again, it's going to be a little bit different for everybody.

Then we're going to see a little bit of an uptick in your testosterone and your energy. Yes. So you're going to start to get a little bit more energy.

And then you're going to see the estrogen start to rise. So estrogen, again, that's that dominating friend that's going to come in and she's really going to get everything going.

She's going to be like, okay, we have to start thinking about dropping that egg. How are we going to get it fertilized? All of those types of things. So we see an uptick in estrogen at our ovulation, which is generally about days 12 to 14. That's when we are dropping that egg.

So there's a couple different signals that are happening. Testosterone is at its peak. That's where you get your higher libido, because your body is like, all right, fertilize me.

And that's where we see that higher. And we also see estrogen at a high level at that point as well. So then you drop an egg. And then your body is thinking, okay, it's hoping that this has been fertilized.

So then we're gonna see a little bit of a rise in progesterone because again, this is that calming, nurturing friend that's coming in. She's the one that's opening the door to the uterus and is welcoming you with a blanket and a cup of tea.

And let's watch a Hallmark Christmas movie, like come in, let's be all cozy and stuff like that. So then when there's nobody coming in, then we see a huge decline in progesterone as well.

And that decline in progesterone is generally where we see a lot of the PMS symptoms when people talk about that week before. And that was always the worst for me.

When I was growing up and I was in high school, my brother literally, and he was seven years younger than me, he would have it on his calendar to leave me alone that week before.

He knew that was called bear week at my house We don't have a name for it in my household, but I do share like my tracking app with my husband. He knows.

They deserve to know, right? They deserve to know. Because we can't control that. And it's that sudden decline and that drop in all of the hormones that really is what causes that to happen.

So that's what's happening on a normal cycle. So when we get into that in between phase that we were talking about, like I said, progesterone generally seems to be the one that people notice first and notice to decline first when we have that huge spike.

after ovulation, it's not as big, right? We're not getting as big of a spike. We're getting more of a drop. We're losing sleep. We're becoming more anxious.

We're losing that calming hormone. You might also start to notice maybe your libido isn't as high. Everything isn't

hitting a top peak as it had been when you were super fertile.

You're still seeing the fluctuations. You might still be getting a period. But those peaks are not as high. So we're not seeing as much energy. We're not seeing the higher libido.

We're not seeing the calming sleep. And that's where you might see like the sleep disturbances or increased anxiety or just like restlessness in general too.

is a big one because that progesterone is that calming regulation. So if we're having a dip in that, it makes sense that you might experience sleep or restlessness or maybe increased anxiousness, something like that.

Well, again, still having your period. And I think that's where, but I love how you talk about that in between stage because you're not perimenopausal.

Cycle Phases, PMS, and Progesterone

You're not having irregular periods. You're still regular, but you're starting to feel the effects. And that's why it's because you're just starting to get that slight decline, but still, you know, ovulating and having a period and things like that.

At Forum Health, we uncover the why behind your symptoms. With advanced lab testing, hormone optimization, and cutting-edge therapies, we help you heal and perform your best.

And now, through shopforumhealth.com, you can access physician-grade supplements trusted by our providers, supporting everything from adrenal health to focus and longevity.

Learn more at forumhealth.com and explore supplements at shopforumhealth.com. Oh yeah, absolutely. So how do you help women with these imbalances without disrupting other hormones or the body systems?

Yeah. So there's a couple of different things that we look at. One that I look at really heavily and I think is a big problem for people through entire years.

And this is going back to even the adolescent, teenage years is that estrogen dominance that we were talking about. So estrogen dominance is when estrogen is more dominating and progesterone has to come in.

They have to be a yin and a yang. If we have too much estrogen, we're seeing… Estrogen and progesterone? Progesterone. Yeah. Yang and a yang. And when we see too much estrogen, we're seeing heavy bleeding, clotting, inability to lose weight, PMS and things like that.

So there's a lot of really good things we can do and easy things we can do to make sure that we're metabolizing estrogen appropriately. Making sure that you're having daily bowel movements.

People forget how important that is, especially when it's in relation to hormones. Women always think, you know, it's hormonal, it's hormonal, it's hormonal, but if your gut isn't adequate and you're not having adequate detox through that, we're not going to have optimal balance in our hormones.

So really making sure gut health is, is where it needs to be is a really, really big one. And that also is going to help us get rid of any extra estrogen that we might be holding onto.

There's a couple other supplements that help with that. And then also just coming in with a little bit of progesterone. Like you had mentioned, you know, you're on progesterone and your sleep has been amazing.

It's crazy what a little bit of progesterone can do to help with that quick. And it's, it's bio identical. So, you know, it's your body recognizes it as what it had been producing.

Just coming in and women can be on progesterone for years and not- There's a lot of studies out too now on progesterone. We will have a side podcast I feel like just on progesterone.

There's so much great research coming out right now for progesterone preventing or having a hand being preventative in cancer and things like that. So there's so much that progesterone does for us.

And I can tell you when I know when I'm getting into like my PMS phase, because that first night it, it's kind of like night and day, the night before to the, to the next night.

And it's just like, why am I sleeping so bad tonight? And it's just like, I'm in the. luteal phase or, you know, whatever phase, what phase is it for PMS?

Yep. So it's kind of tricky. So the luteal phase is really from like day 14 to 28. But I like to break that into two phases. I like to have like your early luteal phase where you're still feeling pretty good, like might start to be a little bit more tired.

But really, it's like that day 21 to 28 is really where women are like, oh, okay. Here's the phase. Yeah, so I really think a lot of times when we have women start to increase their progesterone, and I think you touched on this like day 14, right?

After regulation, just to kind of build that up and give you a loading dose before that decline. But I would say when women really start to feel it, it's like day 21. Okay, I'm more fatigued.

My muscles are more achy. I can't sleep. I'm crabby. I don't know why I'm crying. that type of thing is really like. Why am I so emotional? Yeah. Speaking of the different phases, and I 100% agree with you on the luteal phase having like a different feeling in the beginning versus the end of that phase.

I dove in the last several months and most of this year into cycle syncing a little bit. And it's really helpful in eye opening, but it's also, if you take it too literal, you're not listening to your body.

That's where, you know, if I'm in the luteal phase right now, which I am, I, you know, should be resting and stuff. But like the first few days of my luteal phase, I am so productive.

So I track now everything and I'm starting to learn which parts of my phase that I'm more productive and it still varies month to month with like stressors and things like that.

And like, obviously hormones continue to change, but I'm so fricking productive in the beginning of my luteal phase. I can't take the traditional like, oh, you're entering your luteal phase.

It's time to, my brain and my body doesn't want to rest. It wants to be attention to detail. It wants to, you know, be out there and doing other things.

But I still think that there's still a lot of truth and guidance that cycle syncing can help women with when they start either if they're just getting used to their hormones again, or if they're feeling different changes in their emotions and things like that, just tuning into where I am in my phase and things like that.

But what do you think about cycle syncing? I love cycle syncing. And I think you hit the nail on the head when you said you have to listen to your body because everybody is different.

So just a quick backstory on how I, I didn't even know cycle syncing was a thing until honestly about a year and a half, two years ago. prior to having my daughter.

So I have a two-year-old now, but prior to having my daughter, very active, I was running 10 Ks, half marathons. And when you train for something like that, you have a schedule and that's what you do.

It doesn't matter how you feel. So looking back, I can remember having runs where I was like, Oh my gosh, I feel like I have a hundred pound weights on my legs.

like my time is terrible, my energy isn't there, but it was just maybe I slept bad, maybe I didn't eat right, like maybe it was just a bad day at work, whatever, tons of excuses.

But looking back, I'm like, you know what, I probably was in my luteal phase. And all those excuses and stuff, they all have validity as well, but they're also impacting you and you recover differently in different phases.

You perform differently. Like you said, like testosterone, when that like goes up, like go and do your max like lifts and stuff like that, build that muscle.

But when it drops, You wanna do more like muscle maintenance and yoga and things like that too, but. Yeah. 100%. And when I was pregnant, that was the first time I had to listen to my body because I was still running and I was 16 weeks pregnant and started having like terrible cramping.

And you couldn't just push through it anymore because you've got… Right. I was scared of it. You can't just follow your training plan. I know when I used to do triathlons that like, oh man, today is not the day that I want to run and swim.

Yeah. You power through when you're training for something, but when you've got something like, I'm growing a little human here, now I do have to slow down.

Yeah. Cause I was like, oh my gosh, I don't want to jeopardize my health, her health. Like my job now is to grow her and give her, you know, the adequate space to do that.

So I had to stop running, still stayed very active, whatever.

Cycle Syncing, Nutrition, and Self-Awareness

Went into postpartum, had a very, I would say a very long labor in delivery. Went into postpartum, but in my mind, I was like, okay, I was active the whole time.

Like, I feel like I'm bouncing back like six weeks. I'm going to get that clearance, right. And I'm going to be good to go. And I was like, no, no. Cause my body was like, slow down.

Like you're not going to go back into what you were doing. And some women can, some women can jump right back in, but my body was telling me that I couldn't.

And that's when I dove into cycle sinking and I was like, Oh my gosh, this makes so much sense. So for me, same thing. I even towards the end of like the menstrual phase like when I'm getting close to being done with my period more energy I can go for a nice jog I can start lifting heavy and that ovulation like you said that's the hit like I have energy to a 45 minute workout and I'm on top of the world and then beginning of the luteal phase pretty similar for me like still mental clarity is good but when I hit truthfully for me it's like day 21 and I'm like okay day stretching, like, and I, I never in this, some people are gonna look at me like I'm crazy.

And I know I was but when I was in the hardest, heaviest days of training, yoga to me was not a workout. Yoga was like, I had to sweat, right? I had to sweat and be fatigued in order to it's a mental It really, it's not just your body.

There is such a big, and I dealt with that too when I started doing like the cycle syncing and stuff like that. And I was trying to be more intentional and like really giving it a try.

The mental shift that you have to make on some of those days, because we just, we're not used to it. We didn't listen before. there's such a big mental component to it too.

Exactly. And I will say, you know, for when, when you really listen to your body and you figure out, you figure this out and it takes a while. Like I, like you and I think we both can attest, it's not like you did one cycle and you're like, okay, I know where everything is.

I'm still learning. I've been doing this since like January, February, and like I'm still dialing, like, and it gets better every single month. So if anybody's out there, Learning how to listen to your body again, it takes time.

Yes. Be patient with yourself and with your body. Every cycle is different, especially if you're entering into this mid-20s era. I think that one, symptoms hit harder.

Yeah. And it's a huge mental shift. Be patient with yourself, for sure. And I think you're interested too, each month can be different, right? If you have different outside, just the weather, like where we live, not in the starting seasons, but like colder and we're going to hit daylight savings time and it's going to be dark at five o'clock.

And so all of that plays a role into what you've been going on and how you listen to your body. But I think ultimately it's learning to listen to your body when you really do.

you might be able to agree with like I felt closer to myself once I finally was like okay I'm listening to my body I was like oh my gosh like I saw my body differently than I ever did before and I think too when you start to think of like foods too like all of a sudden I was like during my menstrual phases I'm not a huge steak person my husband could live off of steak every day like the man loves to grill But I was like steak, but when I was like, okay, there was one day I was like, like a steak sounds really good.

And I was like, wait, I'm in my menstrual phase. Like I need more iron. And I was like, what? Oh my gosh, that makes sense. It can even help with like meal prepping and stuff like that.

Because if you aren't eating those iron rich foods, you're going to have. So one of the things that I dived into more while I was cycle syncing was the nutrition part of it in different phases.

And like, like you said, like the meat and stuff in your during your menstrual phase, cause you're losing blood, you need that iron to be replaced. But also like pre that I was, I started adding in and doing more recipes for that have fiber and different like phyto nutrients and stuff.

And I did this like little experiment on myself for. one month and then compared it to the next month where I didn't, I intentionally didn't check in.

Well, not, not check in, but I didn't plan my food around necessarily like my cycle. So I had a lot more fiber in. I made this really great like red lentil soup.

It's soup season here in Wisconsin right now. And. I love soup, but really like rich in like broccoli and those cursiferous veggies and fiber and my PMS symptoms that month, which they're, they're hitting a little bit harder than the normal or they have been for like the last like year or so than what I was used to, but my bloating significantly decreased and There's also the period poops, if anybody out there knows what I'm talking about.

If you know, you know, women, those period poops. But those were also just like way, way better as well. So I do think that there's a lot that, that you can do from a nutrition standpoint for different point pieces of your cycle too.

The iron, if you aren't getting it, you're going to be craving different like salty ish type things. And it's easy to give into cravings, especially during that time of the month too.

So and I think cravings too, when you do kind of a deep dive into cycle singing, and you can find articles and stuff on this too. But if you're craving certain things, you're lacking like magnesium, you're lacking different nutrients and electrolytes and things like that that if you know your body is craving that for a reason right now yeah and a lot of people crave like the sweets and the sugars and a lot of times the craving for chocolate is that your brain your body's signal for magnesium exactly right and so yeah totally Yep.

And I supplement with magnesium every night. Like, it's just, I always up it when I'm getting close to my luteal phase. And I noticed a huge difference.

And honestly, my, my chocolate cravings are kind of non existent now, because I've dove into that. I'm like, why was I craving that? Oh, yeah. And now I have my magnesium.

And wow, I do feel better. And not saying that you're gonna feel 100% all the time, right? Because you're not. But No, you're still going through a menstrual cycle.

At the end of the day, your body's focus is regenerative. The reason you're feeling so tired during your menstrual cycle is because your body's focus is on replenishing that iron and gearing up for the next cycle and your body recovering because your body just spent its entire cycle preparing for implantation.

But we didn't give it to it. Yeah. So now it has to recover and plan for that all over again. That's just how our biology works. And I think once you dive really deep into this too, like you get a different love for the menstrual cycle.

I think we grow up in this traditional mindset of like, it's a burden. It's annoying. We can't do certain things, you know, oh, it's swim season and I have my period and things like that.

But It can be, right? It can be annoying. It can be hard to deal with, but also at the same time, when you truly think about what's happening and how your body does that month to month, like it really is incredible that our bodies are designed to do that.

So it kind of gives you a different look at the menstrual cycle as being instead of a burden, more of like this amazing gift that we're able to even do this.

Yeah, I've been really embracing. And I do think that there's a point in this journey where it becomes Super empowering. Yeah. Yeah. I mean, I, I think of my cycle now as my superpower.

Like my menstrual phase is not a disadvantage for me anymore. It's the time where I intentionally in my month get to sit back and really prioritize myself and my self care.

And I put a little bit more focus on me and attention on me, which is one really beautiful to do. Yes, and we need to do it more often.

Stress, Sleep, and Hormone Balance

But then it like there's a lot of things that I do during my menstrual phase that sets me up for success for the the next phase to like, it's a great time for me to nest and plan ahead and reflect and see how this past few weeks went, whether it's work personal, or even like body physical mind and body, but like, it's my reflection period so that for my next cycle, I'm growing and planning and using those times of the month where I have that extra like sparkle of attention to detail or that extra burst of creativity that I get during different phases.

And it's really become such a, honestly a superpower for me. There comes a point in this journey that this is, man, you wish you were me. Yes. Maybe they don't.

But you can just like, I can see the love that you have for yourself and your body, right? Like you have found how to make it your superpower. And I think that when we really look at it, like we can instill that in women in a teenage years too, you know?

And I think it's just something that is really beautiful once we kind of embrace it. Yeah. We spent a lot of time today really focusing on those fertile and that like in-between period today.

I did have a question for those women who are tuning in and men who are tuning in also, I didn't mean to exclude you guys, but what role, cause I do think that this is important, especially with this age frame that we're talking

about too, the role that stress and sleep play in maintaining hormone balance.

I think our stress resilience as we age declines. And I think that just plays it such an important role in here too. So for those people, when we're thinking about that, like in between fertile and perimetopause, those mid 30 times stress and sleep, what kind of role do those play?

That's a huge role. And when you think of like your mid thirties, you know, some women have kids, some women are really deep in their career. Like you're, you're pretty established.

Most women, you know, feel pretty established at that point. And if you don't, that's okay too. None of us haven't figured it out. When you think of sleep as a really, a really good topic, like our bodies are designed to rest.

Our bodies are designed to reset. Like we need that. You know, that's why we sleep. That's why we can't go 24 hours, seven days a week because our bodies weren't designed to do that.

So we need to reset and so do our hormones. And when we, I like to think of, when I talk to my patients about hormones, I talk to them about a triangle and we have thyroid hormones and adrenals and they make this triangle and they all play off of each other.

And if one is imbalanced, the odds of it fluctuating the others are super, super high. What do the adrenals help to control? Our stress. And if we are under constant stress and we don't know how to rid our body of that stress or deal with that stress, our adrenals are eventually going to teeter out and they're going to need extra support.

And when they don't get that support, we are going to see issues and changes with that, which then will factor into the hormones. And again, we get to that other part with the thyroid, they all work so, so close.

So in order to have optimal balance, we really need to work on sleep. And again, that's even if that means trying progesterone to help give us optimal sleep, like that's okay.

And that's what our body needs. And same with stress. What can we do to help relieve some of that stress on our adrenal glands? Because I think a lot of times when we think of stress in general, we think of it as a mental thing, right?

Like, oh, I'm so stressed. I feel it in my shoulders. But we don't think of it as being anything more physical than that. We think of it's just mental.

But what it does to our bodies and to all of our organs and things like that, we tend to forget. But it's doing something to our whole body. So we really need to figure out how.

Everybody at some point in their lives are super stressed, right? Teenagers are stressed, parents are stressed, perimenopause, metamos, everyone has different life stressors.

Some are going to be higher than others. They're going to be different in different stages of life, but figuring out how to best balance that. And I think too, when our hormones are balanced, that can help us deal with stress better.

I think that that's kind of a statement that we can say if our progesterone is well balanced, we're not as anxious, we can think clear about the situation.

A lot of times we can handle stress a little bit better than if your thyroid's off or hormones are off. Everything just is in complete havoc. We're not going to be able to balance it out.

So it's kind of, you know, working together, balancing stress, balancing hormones, and we can do both. We're going to be in like the best optimal health.

Yeah. For our listeners out there, women's health and women's hormones, that's really your sweet spot that you

love to treat. Can you tell our listeners a little bit about who you work with and what you do?

Yeah, so I work with women across the whole lifespan. I would say majority of my women are women in that middle stage, perimenopause and menopause, as we're really starting to notice a lot of those changes.

And I always tell all of my patients that we can't prevent that middle stage perimenopause and menopause from happening. Our bodies are designed to essentially have this life cycle.

I like to think of our ovaries as having a life cycle. We start with adolescents in our first period, we go through the life cycle, they start to decline.

So we can't prevent that. Nobody has come up with a great pill or peptide yet that has prevented that from happening. But we can help make that transition a lot easier.

And when we think of hormones, you touched on it too. They're so important for our anxiety, for our brain health, for our heart health, for our muscles and things like that.

When we think of menopause and the decline, yes, that's going to happen, but we're also seeing a lot of other risk factors pop up when you look at. You know, the risk of heart attack.

Before the age of 60, men are at a higher risk. After the age of 60, women are. Why? Because they're not producing any more estrogen. So it's super important to help that transition, but also long term to keep your body.

Even like bone mineral density and like heart health, bone mineral density, cardiovascular. estrogen plays a huge role in all that for women, I think, and I will not quote myself on this, but when a woman hits menopause, I think their bone mineral density can decline, like, I don't know, 10 to 15% within the first year or so.

Yes. Yep. You're right. And it's estrogen. Estrogen does matter. Yes. And I think estrogen has such a bad rap, right, with some of the studies that will come out.

Who Alicia Treats and Final Takeaways

And that, I feel like, is a whole nother topic. Oh, it is. Don't worry. There will be a follow-up to that, guys. Don't worry. But it does so much. Like you said, you know, the heart health, the bone health, so many things that we need for our daily lives to be optimal and balanced.

So it really is a key factor. So to kind of go back to your question, majority of the women I see are perimenopausal, menopausal, really helping in that transition.

But I also see, I mean, I see some teenagers that are dealing with PCOS, endometriosis. That type of thing, like we can work on, we don't have to wait until that middle ground perimenopause and menopause to work on balancing out hormones.

We can start that at 16 and getting you feeling the best and, you know, working on insulin resistance and things like that. But some women are experiencing at 16, they get put on birth control, you know, the whole heavy act.

But I work with them in that young too, to just get balanced through all, all the stages. Love that. And you're currently working and expanding our virtual clinic.

So right now you're serving patients virtually for hormone balancing and female optimization, really any age range, but you're serving patients right now in Wisconsin.

And what other states are you currently licensed in? I know that we're always expanding your reach, but. I apologize if I missed them. So Wisconsin, Tennessee, California, Florida, Nebraska, Iowa.

I think, I don't think I'm missing it either. I know we're working on Illinois and Texas as well. So those should be coming. pretty quick, but yeah, I mean, I utilize a lot of different, a lot of different ways to help through supplements, bioidentical hormones, through creams, oral injections.

Like there's so many different ways to help suit everyone individually because that's what it is. It's individual care. Like you said, not one person is the same.

So I don't prescribe the same thing for any patient because everyone's going to be different. I love that. Thank you so much. I think we're going to have a few follow up episodes to this.

I know we dived a lot into that like middle thirties, mid thirties and a little bit on the fertility side of things, but I feel like this was such a productive and such a great conversation.

I think The takeaway for me is that hormones do change throughout your entire life, but you can work with your body and you don't have to work against it.

And you can start by just understanding your natural rhythm, supporting your lifestyle, seeking the right care when you need it. There's options like form health with Alicia that are available to people, but you know, these functional and integrative and hormone centric practitioners are all over the U S as well.

And you really can feel vibrant and empowered at every stage. And I want to challenge all the women out there to turn your, turn your cycle into your superpower.

It is so life changing when you shift your perspective that way that highly, highly recommend. Yes, I love that. Yeah, Alicia, it's been wonderful having you on today and helping us understand more about hormones and how they change over time and some of those gaps that aren't really talked about as much.

So thank you so much for your time today. Everybody, don't forget to share this podcast with somebody who could listen to it. Follow, like, share. We wouldn't be here without you and stay tuned for our next episode.

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