Unlock Your Energy: The Hidden Impact of Fatigue on Diabetes Transcript

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Introduction and speaker background

Hello, everyone. Welcome. Welcome to the Reversing Type 2 Diabetes Summit. I am your host, Dr. Beverly Yates. This is our Summit 2.0 Edition. And I have the amazing, wonderful Dr. Evan Hirsch here to talk to us about the issues that go on with fatigue and how fatigue is a key root cause issue that has to be addressed and successfully dealt with when dealing with diabetes and glycemic control issues.

It's one of those things that really isn't talked about a lot and not anywhere enough. And I've seen clinically what a difference it makes when people's energy systems start to really reengage and they feel better in such a fundamental way.

And for people who don't have diabetes, they don't really understand what a struggle the issue with fatigue is. It's central. So, Dr. Evan Hirsch, would you give us a little overview of your background as we get this talk kicked off?

Absolutely. So I'm the EnergyMD, and my story really started when I had a functional medicine practice and I got chronic fatigue. And unfortunately, I went to 20 different practitioners and I couldn't find help.

And I realized after napping under my desk for the thousandth day in a row that I had to do something about it myself. And so I kind of went on this journey and I knew that if I could find all of my causes that I would I was going to be successful.

And so I at this point, we're looking at 38 different causes of fatigue. And so everybody that I see who has chronic fatigue has a combination of these causes.

So it's never just one thing. And people who have diabetes, they definitely have these causes as well. And so then I wrote a book about it, and now it's been my mission to help these people resolve their chronic fatigue.

Right. What a wonderful mission. You know, these issues of fatigue have been around for decades. And originally some of the biggest messaging that people got was that their fatigue was quite literally all in their head.

There are some medical doctors whose careers started that way and who are quite famous for talking about how fatigue, just like for yourself, chronic fatigue got them started on this path.

Right. It's interesting when it's personal, because I think that makes it more real sometimes for those of us who are health professionals who maybe aren't particularly always naturally empathetic, but then when it's real for us, then suddenly now we can hear it in the people that we serve, right?

And then some of us are already empathetic. We don't have to have the problem to understand that it's real for the person we're serving. What's one of the things that you really want people to take away from your session here as we get started as a key understanding around fatigue, as it applies to pre-diabetes, type 2 diabetes and diabetes more broadly.

Fatigue as a root cause in diabetes

So I think a lot of people may understand that when you have hypoglycemia, when your blood sugars are too high, that potentially you can have fatigue.

But a lot of people also don't realize that when your blood sugars are too low, you can have fatigue. And you know, when people have diabetes and others or other blood sugar irregularities, you're kind of going through this flow where you're sometimes you're too high and sometimes you're too low.

And then that really brings things back to diet, which is such an important, important component of this, where you want to make sure that the blood sugars are released very slowly into the bloodstream.

And that means that the any foods that you're consuming, that maybe are hypoglycemic, that you have to make sure they're bound up to protein or they're bound up to fats.

So I think that's an important point. And then I think the other thing, too, is that if people have regulated their their food and their and their diabetic and they're still fatigued, there are other things that could be happening and we can definitely go into those as well.

All right. So let's take a look at that, because I know that for some people who are on the, you know, reversing type 2 diabetes journey, their own health journey, they've been on it for a while.

We've had some successes and they've had some things not go the way they would have preferred. And one of the things that I think gets stuck is sometimes people are eating what appears to be a healthy nutritional plan.

They are physically active. They're working on exercise, and they're consistent with it, which is so key. Right? They're doing strength training. They're paying attention to the two most basic building blocks.

But those aren't the only pieces. What are some other things that people might be missing when it comes to fatigue? Because I'm sure some of this is not obvious to the general public.

Yeah. So I like to look at this in the realm of causes and I break them into two categories of deficiencies. These are things that are not in the body that are supposed to be there or not in their life.

And then toxicities. These are things that are in the body that aren't supposed to be there. And when we look at deficiencies, there can be deficiencies in hormones like like adrenals and thyroid and sex hormones.

And we can look at deficiencies in mitochondrial function, which is found in every cell in the body except for red blood cells and makes about 70 to 90% of our energy.

We can have deficiencies in a lot of lifestyle habits like you were talking about. You know, sometimes people aren't getting enough good sleep. They're not getting enough good food, they're not getting enough good movement.

And so as long as they you know, and so those are the things you have control over, those lifestyle habits. But some of those other things might be off in terms of the deficiencies.

And then with the toxicities, the big ones really are what I call the toxic 5. Heavy metals, chemicals cause molds, infections and trauma. So all each of one of those things will cause stress on the human organism and consequently will cause a lot of the deficiencies that we mentioned.

And then what's really interesting is that, you know, if you have stress going on in the body that's trying to be regulated by the adrenal gland, the adrenal gland makes cortisol.

Cortisol manages insulin, insulin regulates your blood sugars, and consequently you may have blood sugar issues, even though you think your diet is perfect.

And sometimes it's because you have one of these stressors, whether they're mental, emotional or a physical stressor, like these toxins that I'm talking about that can be causing some of your blood sugar issues.

Yeah, definitely. Those are factors right at a root cause kind of level.

Deficiencies, toxicities, and root causes

Are there any simple ways that people can, like, do a self-assessment or sort of check in to have a better

appreciation for whether their issues might have to do with deficiencies or the environment side of this?

Yes. Fortunately, about 75% of these causes, of these 30 plus different causes, 75% can be determined by symptoms in history alone. So we actually have a a checklist on our website that people can check out.

Don't go there now. It'll still be there after this talk, but it's called step one checklist. And it kind of goes through a lot of these things. Just based off your symptoms, you're going to be able to find 75% of these causes.

Great, Great. I think that people really appreciate checklists. Kind of gives folks a chance for that self-reflection to say, oh, okay, you know, this is great, or, oh, I didn't know about that, or oops, I forgot.

That's right. Dang it. I was supposed to be doing that. Right. All of those things can apply, I think, for any category. We're all busy people and there's just sometimes a lot of conflicting information.

When people look at the environmental side and when they look at the deficiencies side, let's look at the efficiency side first and then we'll move to environmental.

We look at the deficiency side. Are there any common myths out there where people may be getting a lot of conflicting information that you would like to just, you know, clear up while we're here together?

Well, I think there are a couple. And I think that one of the big ones probably has to do with the hormones where a lot of people think that, you know, if you fix your hormones, then everything gets better.

And part of that is true. But it's important to remember still that those of those deficiencies, that they're still Band-Aids, they're natural Band-Aids by optimizing the adrenal gland and the mitochondria and the thyroid and and the vitamins and the minerals and etc., you are going to feel better.

But there's still Band-Aids and you still have to come back to those root root causes. The toxic five that I talk about. I think the other thing too, is there is misconceptions about laboratory testing.

So a lot of laboratory testing is highly imperfect. And so for things like thyroid, we do what we call a subjective ramp up. So we ramp people up to an ideal dose and that's their optimal thyroid dose and that everything works better.

It regulates blood sugars, better decreases inflammation, decreases heart attack and heart disease decreases cholesterol. I mean, optimizing thyroid is amazing.

And unfortunately, with thyroid lab testing, a lot of it, you know, lags behind several months and it may take a year or two in order to figure out your ideal dose based off of kind of like what I learned in medical school, which was you change somebody's dose if their thyroid numbers are off and then you wait for two months and then you you do the lab again and then you take a look and then you change the dose again.

So instead of doing that, we do a bit of a ramp up. We get them to their ideal dose. If you go beyond that, you feel hypothyroid. We feel like you just drank a big pot of coffee and then you can kind of back down to what we considered to be your optimal dose.

Okay. Okay. So that's one area I'm sure of confusion and also where people sort of feel like they're not sure who to listen to. The area of thyroid is famous for this kind of problem and has been for decades, that's for sure.

The lab tests sometimes are not as helpful as they could be, and the interpretation of the lab test is also sometimes not as helpful as it could be. People's lived experiences don't always, unfortunately, align with whatever the diagnosis may be when it comes to the thyroid realm of things.

What are some other areas of misconception or myths? Understanding? Because when we're talking about fatigue, this like so many things with blood sugar, there's this thing around type two diabetes or pre-diabetes where people are often blamed for their diagnosis as if they somehow awakened in the morning saying, Let me screw up my

health.

How can I do it today? Right, exactly. Underlying nastiness and presumption in many people who have this diagnosis worked really hard, surprised, really hard at being healthy.

And they're not getting the help that they so richly deserve. Right. So one of the reasons why we do these summits is to bring together experts and to dispel myths, to give people hope and inspiration and clarity.

So is there another element of fatigue that underlies the issues with blood sugar regulation here that people really need to have better info on where you feel like there's a lot of conflicting info out there and it would be so good for people to say, Now I understand why this is or isn't working for me.

Yeah, I think there's a couple. I think another one that I would touch on would be this idea that there is one cause, you know, and that's really, you know, for those a lot of those people who are, you know, who are fixing their diet, they're doing all the lifestyle things and they're still having issues, whether it's blood sugar issues or whether or whether it's fatigue, is that there are you know, we're looking at these 30 different plus causes and there's always this combination.

Myths about hormones and thyroid testing

So unfortunately, what doctors learn in medical school is that generally there's a unifying principle or there's like one cause that's causing most, if not all, of your symptoms.

And so that's a really important thing. And so you have to be curious and you have to look for what are these other causes. The other thing, too, is that a lot of people don't believe that they have mold issues.

You know, oh, not me. I don't have any mold issues. But the reality is, if you've ever lived in a home that ever in its history had any sort of water damage, whether a busted pipe or a leaky roof or a flood in the basement, that it's highly likely that you came in contact with that with that mold that will increase inflammation in the body.

And what needs to mitigate that inflammation? Well, it's your natural anti-inflammatory called cortisol. Right. Which which works with the immune system and cortisol is also supposed to be managing your insulin.

And so if it's over here, it's not going to be over here, it's not going to be increasing. Your energy is not going to be managing your blood sugars. So it's important to remember that about mold.

And then I think the other one is also trauma. You know how trauma really stays in the body. You don't have to have some really significant abuse or what we consider significant abuse, anything we call that like big trauma as opposed to little tiny trauma where you can have it, you can have different things happen in your life that change the way that you see the world and makes makes the world feel unsafe.

And then consequently, that creates an ongoing stressor on your body, mental and emotional that ends up increasing the inflammation in the body and and inflammation effect on the immune system, on all the hormones and consequently on your metabolic self and your blood sugars, etc..

Absolutely. Those things can live on in the body and they have their own memory, if you will. It almost seems to me like it's both a physiologic pathologic interaction as well as an energetic imprint interaction too.

And I think that trauma is underappreciated in terms of both its impact on our health going forward and what it's going to really take to improve things and to undo the impact.

It's non-trivial. And because it isn't often neatly inside of clinical assessment, like we don't necessarily have a lab test per se to objectively a measure that, you know, under the whole idea of tests on gas, it's like, well, okay, but meanwhile these things can live on and make a huge difference in how people's lives unfold and can be.

Frankly, I think the wildcard where if the person's doing all the other things like it's certainly worthwhile to look at that because, you know, we all have different vulnerabilities, that's for sure.

One day someone could insult you and you don't care. You're like, you just you just blow it off and another day someone insults you and it really wounds you. Right.

And I think that people that lived experience around trauma can kind of be like that just depends. Okay. And I think I think we have to assume, too, that everybody has trauma.

And so for people I mean, I never thought that I did. And then when I started to look at it, sort of work with a trauma coach, I was like, Oh, yeah, there are certain ways that trauma has affected my life and consequently I need to look at those things and it ends up improving my life for the better, better and decreasing the stress that I feel chronically, like you said, energetically on my life.

Yeah, definitely. I think that, you know, these conversations are going to be evergreen and probably even more enriching. And so anyone who's listening, you know, if you would take a moment to just reflect and listen to what Dr.

Hirsch is saying here around this topic and just, you know, consider and please don't minimize whatever your experience has been, Sometimes we get shined on we get gaslit about this.

And, you know, if this is true for you or something that's happened in your family or something that you are sensitive to or you often notice that you just can't sustain attention on, it may be something worth taking another look at, you know, definitely.

Okay.

Mold, trauma, and hidden stressors

So other aspects, when we're thinking about fatigue and the body's energy system, I've always thought that it's profoundly, profoundly unfair that when you think about all the things that go on with diabetes, anything about blood sugar regulation, you think about issues with chronically high blood sugar or chronically low blood sugar, because people can crash up or they can crash down, right?

You have hypoglycemia up and hypoglycemia down because our audience here is both a general consumer as well as fellow colleagues and health professionals.

It all represents energy, but yet it's not available to people in a useful way. It's just kind of ironic what are your thoughts about that? Yeah, I mean I think it's really true and so much of it has to do with, you know, how the rest of the systems are working.

You know, we talked about cortisol, we talked about insulin. You know, a number of things have to be working right in order for it to lead to energy, you know, so your blood sugars have to be shunted with the insulin into the cells in order to be able to do what it's doing.

And when the levels are too high and it's knocking on the door and and the cell is saying, hey, no more, I'm now insulin resistant right, then consequently you're going to have problems.

And then when the blood sugars are too low and you really need the sugar into the cells and it's not there, you know, And so when you when you've got that yo yo going on, it's really hard on your fatigue.

It makes sense. It makes sense. People start to feel maybe a little bit of happiness and then they're dropped back down again. What has you what have you experienced for the work that you do around fatigue when people who have diabetes say that they just can't get up off the couch, they don't have the energy to exercise, they have the will and desire the intention, but they're just so exhausted.

Any thoughts about that? Yeah, I think it comes down to the beginning. You know, the OR where do we start, you know, And so we have a four step process that we take people through where the first step really is to figure out what causes they have.

And then the second step is to start replacing the deficiencies. Now, if you haven't guessed yet, I believe that the toxins in step four are actually most important the toxic five, the heavy metals, the chemicals, the molds, the infections and the trauma, because that causes most of our other issues.

However, the first thing that we can do that I believe is most helpful for folks to get up off the couch is to work on the deficiencies and what I call the big three, which are the adrenals, the mitochondria and the thyroid, because when they're optimized, everything works better.

The adrenals manage stress, they give you resilience, they help with your sleep wake cycle so that you're able to fall asleep better in the evening. You don't have that second wind at night and it's easier for you to wake up in the morning.

The mitochondria boost your energy in the morning, also help to create that circadian rhythm. And then the thyroid is wonderful for all the other things that I mentioned before.

But taking those things first thing in the morning is really great for giving people an uptick in their energy. So if their energy is like a three out of ten where ten is ideal energy, when they first start the program, we do this and step two and then I would say probably 70% of the time, depending on how severe the toxins are, we can we can notice a significant uptick of one, maybe two points going to four, maybe five out of ten, so that they can then pay more attention to their food.

They can start in on the mindset practice that we talk about. They can be organizing around their supplements and around all the lifestyle habits that they need to be doing.

And it just makes the rest of the process that much easier. It totally makes sense. It's such a fundamental issue and I've found that it's an obstacle.

If you're really fatigued, if you don't have energy, it's hard to concentrate, to focus and to get up and get going and to do it on a consistent basis.

It is literally too hard. And once that and that is cracked when you get your energy back, oh boy. And unlocks all the other goodness. Right. Okay. Let's take a moment and start having a look at what goes on on the environmental side of it, because I think in today's world, we are inundated with all sorts of things, many of which we probably aren't even aware of that make a difference for fatigue and certainly can affect it, frankly, interfere with blood sugar regulation.

Yeah. And I think what's important for people to realize is like, what are the different avenues that you're being exposed to things? So there's the air that's around you.

There's the food that you eat. You know, when I'm looking at air, it could be, you know, there could be mold in the environment. There can be other toxins that kind of blow over.

Oftentimes, if people are living near farms, you can get pesticides that are in your home that you're kind of breathing. There can be, you know, lead paint in your dust if your home is, you know, earlier was built before 1970s.

Right. Um, there's the food and so there's the pesticides that are potentially also in the food. There's things that are in the soil that you could be exposed to.

There's the water that you're drinking.

Blood sugar swings and energy crashes

There's a great site called EED by the Environmental Working Group, which is EWG Dawgs Tap Water Tap w a tr, where you can put in your zip code and you can see how toxic your tap water is.

So it's just a good reminder that we really need some kind of filter. You know, I've got a black carbon filtration on my home and then I also have distillation to make the water as absolutely pure as possible.

So, you know, where are we getting toxins from? Is it from there? What about things that we're putting in our in our bodies topically? What about the soaps that we're using or the, um, the cosmetics that we're using?

You can also go to EWG, Dawgs, Skin Deep Sky and DDP, and you can look at how they've ranked all the different cosmetics you can put in your cosmetic and you can see how it's ranked on a scale from 1 to 10 with one being the least toxic.

And they even have products there that they consider to be EWG, Environmental Working Group certified or verified, which are the least toxic available.

So I do recommend doing this for sunscreen. That's the main reason why I do it. I'm not wearing makeup, but any sort of shampoos or anything like that that you're using.

So those are some other ways that you might be affected. And then in your home, in terms of we talked a little bit about mold in the air, but it can be behind your walls.

As we kind of mentioned before, a lot of people don't believe that they have exposure and you could have had exposure, you know, when you were five years old.

That still could be in your body today. So it doesn't necessarily have to be the mold that's in your current home or that your home has any sort of water damage.

It definitely could be in the past. And so I think those are probably most of the exposures that we have, the things we drink, the water, the oh yeah, and there's old and and making food choices, you know, So are what are you drinking?

Is it just water? Are you drinking lemonade with obviously high amounts of sugar, other products that really aren't the best thing for you. So what are you putting in your mouth in terms of food, in terms of liquid?

What are you breathing in? Um, I feel like I'm missing something, but those are the main things in terms of exposure. So, Dr. Hirsch, you were talking about the environmental side of things.

Let's continue that discussion. One of the things that I think people could use a lot more info, and I know you have a really deep expertise here is around the infectious side of this infection that might be leading to fatigue and having interactions with people's blood sugar in life seem like regulation.

I'd love to get your thoughts about things that folks should be looking for absolute. So when we talk about infections, we're looking at viruses, bacteria, yeast, parasites.

Sometimes they're spirochetes, which are like type of bacteria that change their shape and any infection that's in the body. And there's acute infections in chronic infections.

So acute infections are like you get a cold, you get over it, and then it's gone out of the body and the immune system has the memory of it. The chronic infections are infections that get in the body and stay in the body, and the immune system is trying to get rid of it, but it's not able to.

Rebuilding energy with the big three

And usually it's because these infections are good at hiding themselves inside the body in different compartments. What ends up happening is that the immune system is then stuck in the on position because the immune system's whole job is to remove things out of the body that aren't supposed to be there.

And so it's reacting to these infections that it just quite can't quite get to, and that's called inflammation. And so what ends up happening then is that cortisol made by the adrenal gland, which is our bodies may an anti-inflammatory among some other hormones are dealing, trying to deal with that inflammation to kind of bring down that inflammation.

And consequently then that has that effect we talked about before with cortisol and insulin and blood sugars on the blood sugars. So consequently then you're going to have a problem with your blood sugars.

And so once again, it's another stressor that is affecting potentially affecting the blood sugars. And when we're looking at these infections, you know, the biggest one on the block, new newcomer on the block is COVID.

So we're having we're seeing a lot of people with long COVID now where they kind of start off with just some sort of little virus, but then their symptoms persist and sometimes the symptoms go away for a month or two and then they come back and their weird symptoms, there can be over 250 different symptoms associated with long COVID.

So that's one that I just kind of want to point some attention to. But fortunately, among these different infections, most of them can be determined by symptoms alone.

So a lot of people will have some testing done. And like I said, a lot of testing is imperfect. And so you may say, well, you know what, I had some testing for COVID and I don't have it.

I don't have long-covid or I had some testing for Lyme. I don't have it on. Fortunately for a lot of these, I had some testing for parasites. I don't have it.

Unfortunately, the testing really isn't good for most of these infections. Some of the testing is called serology testing, so it's looking at the immune system's reaction to these bugs.

But if your immune system is dysfunctional because you have heavy metals, chemicals, molds, infections, trauma, whatever, and it's not operating at its best, you're asking a dysfunctional immune system to give you an accurate response or an accurate test.

Right. Right. And it just doesn't work well. So you really have to look at that yet. Your symptoms and your history. And even the CDC in Atlanta says that most of these infections are considered clinical diagnosis.

So based off of your history and your symptoms by a clinician who knows what they're doing to help you determine which of these that you have. Yeah, it makes sense.

And I can totally see where this is an area where people might get quite confused. And some of these illnesses, whether it's parasites or some of the chronic viral loads, other things, they kind of wax and wane. Right?

They don't they're not a steady state or they don't make themselves obvious. Is this part of what you're talking about when you say that testing is imperfect?

There definitely can be part of it. Yeah.

Environmental exposures and toxins

You know, when some of these infections do cycle and so sometimes they are going to be in more prevalent at different times of the month or, you know, depending on how much inflammation you have in your body or what season it is in the calendar year.

So that can definitely be part of it. But some of it is also actually, you know, the testing itself. So we talked about kind of the the issue with the serology testing or the immune system.

But the other thing is that sometimes we're doing testing with what's called PCR or like a DNA test where you're looking at a particular infection. And a lot of this has to be done in the compartment where the infection lives.

So for example, if you are doing a PCR test in the blood and you're trying to test for something called Bartonella and Bartonella oftentimes lives in the muscles and it can cause like pain in the bottom of the feet, usually misdiagnosed as plantar fasciitis or or muscle pain, usually misdiagnosed as like fibromyalgia.

Then if it's in the muscles, it's not going to be in the bloodstream. So unless you're going to do a muscle biopsy, which nobody's going to do on you, you're not going to be able to find the bartonella.

And even if you did that, it still probably wouldn't be a great test. You're not going to be able to find a lot of these really small infections that are living in these different compartments that aren't necessarily where the testing is being done.

That's a really fine example. Thank you for explaining that. I was thinking of some of the people over the years that I've heard who say that they were told they had plantar fasciitis, but yet any of the treatments that they went through never seemed to resolve it, you know, and people did not think over know, hey, this could be Bartonella, right?

That could be like a classic example where one disease entity mimics something else. And so it's is a misdirection clinically. People think they're looking for and assessing one thing when actually is something else completely different going on.

Yeah. And it leads to the point around like, what should you be looking for, a diagnosis or a cause? Because oftentimes you can have a diagnosis like plantar fasciitis or fiber myalgia, and you still don't know what the causes are.

Notice I said causes not cause, right? It's always a number of these different causes. Right. But that's why it's so important to make sure that you're focused on what your causes are.

And even though it sounds overwhelming, like there's 30 causes and everybody's got 15 or 20 or whatever, the reality is, is that you can work through a process of just matching up a treatment for a particular cause that you have in order to be able to reverse it.

And then you're kind of done and you've and you've actually fixed the root root causes and you don't have to deal with this diagnosis, which is just the combination of symptoms generally or laboratory tests that are pointing to the particular pain that you're having.

Yeah, I mean, that just makes sense, right? I again, I can see where there is a confusing can just pop up left and right both for the clinician trying to guide this as well as the person who's asked for help.

I'd love to get your thoughts on how fatigue applies when someone has diabetes.

Infections, long COVID, and testing limits

Do you feel like it is a good idea for them to try to push through or should they instead consider the fatigue as a primary symptom and that they really need to check out root cause options?

Absolutely, yeah. They need to you know, you need to listen to your body and pushing through. And fortunately, it really doesn't do you any favors because the reality is, is that your adrenals and your mitochondria and all these other things are already compromised and so you're not able to make the energy that you need.

And when you push through, you're just increasing stress. You know, we're talking a lot about stress today, but not in ways that maybe people have spoken about before.

You know, there's mental and emotional stress. There are physical stressors, there are energetic stressors. There are spiritual stressors. And any of these stressors can end up compromising the the hormones, the mitochondria, a number of these things that we're talking about.

So if you try to push through, which would be a physical stressor or maybe a mental emotional stressor, if you're doing a job where you're thinking a lot, consequently it's just going to push you back further and further and you're going to keep getting worse and worse.

And so you have to take care of yourself. And this is part of the reason when people come to see me, is that oftentimes they've been pushing through for years and the human organism, you know, you can only push it so far until it starts calling out for help.

And, you know, as clinicians and, you know, we've gone through medical school and residency and and clinical practice and working really tough jobs or whatever.

This is a story for so many people in our society. There are so many stressors that we have to deal with on a regular basis, and we're really required to continue to push through in order to continue to function in society.

And unfortunately, I just don't believe that society is made for humans the way that it should be. And so trying to recreate your life for what is ideal and changing your mindset into into envisioning what your ideal life would be are really things that I encourage people to do.

And so trying to create their life around and their work around what they want their life to look like as opposed to fitting themselves into their work.

Those are great distinctions and I really feel like it's life affirming and it means that people have more of the opportunity to have their lifespan and their health span be the same.

Many people lately are finding that their health span is nowhere near long enough for the life span. I cannot tell you how many people in my life, Dr. Hirsch have said to me who've been folks in their seventies, eighties, nineties that they got older and older, that if they'd known they were going to live that long, they would have taken better care of them.

Listening to fatigue and closing remarks

Yeah. Right, Right. No one has a crystal ball to know when their expiration date is. And so today, since so many people are living longer but not living better, this is part of that secret sauce.

And this issue with fatigue is fundamental to diabetes and blood sugar control, that's for sure. Thank you so much for being our wonderful speaker here and partnering with me on this mission.

Dr. Hirsch, where can people find out more about you if they want to connect? So I'm at EnergyMDMethod.com. We're on everywhere on social media. It's I think it's @evanhirschmd.

from most of our channels. And then you can also text me from our website. It comes directly to me. It's on the bottom right hand corner. You can click on it and go ahead and do so really transparent about our programs and our pricing.

And at this point, we have a program for almost every single budget to help people figure out their causes and resolve them. So thanks for having me on. It's my pleasure.

Thank you for being a partner in this. And friends, please share this session with Dr. Hirsch has shared so many

wonderful pearls of wisdom here with us.

Share it with everyone shared on social media email. Tell your besties about it. The more people in your life understand what you're going through with diabetes, the more they can help you and support you and understand what it might be like from your point of view.

One of the things that's so interesting about Type 2 diabetes, despite how common it is around the world, the explosion in this is really pretty, pretty amazing.

People feel very lonely and isolated as if they the only one with the problem, I assure you you're not. Now is the time to connect up with the people that care about you.

So they have good information, too. All right, Thanks, friends. Have a beautiful day.