What Women's Hormones Have To Do With Brain Function and How To Optimize It Transcript

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Introduction to Womenu2019s Hormonal Health

One of the greatest mysteries about hormonal health. Surrounds women's health and menopause. So for some reason, during menopause, the brain actually goes through a very massive change.

So we know there's hormonal components to it, but there's a lot more to it than that. We're going to talk with doctor Sharon Stills, and she has been featured in multiple magazines and digital media and entrepreneur journals, Women's Health Network, even men's fitness journals and men's journals and Women's Fitness and Yahoo life.

She is a natural perfect doctor, an author and an inspirational speaker, and a women's health expert. And there's no one to talk about women's health.

Then, Doctor Stills. What we're going to uncover today is, are some concepts, behind the biggest challenges in medicine when it comes to women's health and brain health. So can't wait to introduce you to Doctor Stills.

I'm so happy that you were on super excited to talk about a topic that few people really want to touch. To be honest with you, when it comes to health.

So thanks for coming on. I'm happy to be here. Always excited to to share the news about women's health and hormones and just help educate. Yeah, absolutely.

So, so I live with a lot of women, so I have three daughters. I got my wife, my mother, my mother in law. So all under one household. And so, I experience all ranges, when it comes to gender as well as, other issues as well.

And my wife's an obedient. So we talk about hormones actually quite a bit, around the household. And so, but let's, let's focus the talk about, hormones in general.

And then I'm going to dive a little deeper into the brain health. Of women and how hormones are really impacting you. And so let's, let's because I have you start like what are the most, I guess, biggest misconceptions about like, hormones in general and women's health have so many misconceptions, you know, as women get get the short end of the stick a lot in, in research and in the doctor's office.

And so, I think that one of the biggest misconceptions women are told is it's not your hormones, it's in your head. It's just you're getting older. This is just natural.

You're supposed to suffer. You're supposed to have brain fog. You're supposed to not be sleeping. You know, this is just part of life. This is stress. Suck it up, buttercup.

You got to deal with it.

Stress, Cortisol, and Brain Fog

So I think, you know, right off the start, I'd just like to say to the listeners that if you are struggling and I know we're specifically talking about brain health here, but if you are struggling with memory or brain fog or you feel like early onset dementia or just not feeling right in the brain, then you definitely want to.

You know, there can be multiple reasons for why that's happening. Typically, health is always multifactorial, as is disease processes, but you want to really think about your hormones and the impact from your adrenal gland hormones such as cortisol, which is our stress hormone.

And, you know, our brain is filled with glucocorticoid steroid receptors. So if you're secreting a lot of cortisol, you can have a decrease in your brain way.

You're going to have a decrease in resilience and how you respond to stress can have a decrease in cognition and memory loss. You can have brain atrophy.

So just starting there with stress is a is a huge piece of the puzzle. And so there's big misconceptions about how you can find out about these things and how you actually get them tested.

And so for instance with cortisol a lot of times you can get a morning cortisol in the blood. But that doesn't really tell the whole story. So I like to do saliva, cyclical testing.

So you can actually see your diurnal rhythm of your cortisol production because it's not just about how much or how little cortisol you're producing, but it's about are you producing it at the right time?

Are you producing more in the morning when you should be and less at night when it's time to go to sleep? Right, right. So let's, let's talk about that as a, as either a conception or misconception.

So basically what that means is that what came first is that the stress, the external internal stress that really started this cascade of hormonal imbalance, or does something create the hormone balance that created the stress, like how does how does the bidirectional interchange work?

Yeah, I mean, I think, you know, it's totally chicken or egg kind of thing, but I do think the stress, you know, I feel like it's the stress that sets or off the imbalance.

And we have to think about it. Stress. Like when we think about stress, we think of, you know, I'm late or. But stress comes in so many different flavors and styles.

So, yeah, it can be physical stress. You can have us a vertebrae out causing neurological problems. You can have invisible stress from emfs and dirty electricity.

You can have stress from internal metabolism type of stress. But just like computer you can have stress from you know, you're producing too many free radicals or you're not breaking down metabolic byproducts in your body.

You can have stress from the food you eat. You can have stress from the relationships you're in. I mean, there's so it's like if you're alive, you're going to have to deal with stress.

Otherwise you're you're probably just in a hole somewhere. You're not really living or interacting. And so it's really about how do you dance with stress?

What is your relationship with stress? How do you respond rather than knee jerk react to stress? Right. Oh, absolutely. I 100% agree with you there. Because, you know, with physical, emotional, spiritual stress, they all, you know, hormones are sort of like the innocent bystander sometimes where they're responding to your stress and they're responding appropriately to the stress. Right.

And so we can't, and we can't just say, hey, take some supplements and be on a good diet, and that's it. De-stressing is such an important component to, hormonal balance.

Like, exactly like your body. If you're stressed and your body's putting out too much cortisol, like, you can't blame your body for that. That's your body doing what it's supposed to do.

Protect you, trying to respond. You know your body doesn't know. I always say like, it's like your body doesn't know if you have 75 unanswered text messages, or you're being chased by a saber toothed tiger and you're fighting for your life.

And so you can't fault your body. And there's a lot of misconceptions about cortisol and cortisol being too high. And my experience is that a lot of patients are already through that stage.

And now their cortisol has crashed. And so it's really important to to take a look and see what your levels are doing. And absolutely it's not just about oh, you have stress levels.

So here take so much. We're you know, take a nice adaptogen like that would be really awesome if that's all it took to balance out your stress levels.

But when you are out of sync, yes, supplements and the right diet are important, but you've really got to start looking at your lifestyle. And we know that lack of sleep and lack of connection with nature and lack of breathing and all these things are going to impact your brain health.

Oh yeah. Oh, absolutely. You know, in the, in major medical institutions, the way that these are taught is pathologic or is it normal stress. Right. So pathologic stress as is there's some major like genetic disorder, you know, with like adrenal failure, Addison's disease or, some children can be born with tumors on the adrenal glands and secrete of this.

And this is the, the absolute like pathogenic stress. Hormones. And we're not talking about that. We're talking about, things that can be, in everyday situations.

Our bodies are responding to stress. So in conventional medicine, you know, what we were taught is that if it's not truly a pathology, we will, but interestingly enough, now most people want to understand their body.

And just because we do testing doesn't mean there's a pill for ill, right? It doesn't mean there's like a pill for it, but really answers a bigger question.

So if someone does have hormonal imbalance, then we ask the question like, what's your life like? And do you have any stressors and traumas and if, are you on screen time like 18 hours a day, like gamers see, a lot of gamers do that, right?

Which creates this huge, hormonal imbalance in the emfs that their face and stuff like that. Right. So there's a lot of things that are that are, really going on.

So I think we're, you know, conventional, medicine takes is, a lot of people ask their OB julianne's us, the doctors say, you know, what's my hormone balance?

But there's no conventional testing that specifically tests for a hormone balance is far more broad, than that. So this is where function tests like salary hormones, you know, hormones and stuff like that could be, could be useful in answering the question, not what medicine do you need, but what physiologic state are you in right now and what can propel you into the future, which is sort of the the basis of hormone balance?

Now, having having said all that. Right. Now hormones look differently, in women before, during and after menopause.

Hormones Across Life Stages

Right. And also before, during and after puberty. Right. And so, what what are changes that women go through throughout life in terms of hormones? And how does that relate to, like brain health?

Well, so I mean, when we're going through puberty, that's when we're having our surges of estrogen and progesterone and we're starting to menstruate. And I mean, women have testosterone too.

And, you know, we all like men have estrogen and progesterone. So it's just we have them in different ratios. And so women are I mean, men go through and rapports.

But we don't really talk a lot about that. It's like men's testosterone goes down as women are going through menopause. But it's not as extreme as women who are such cyclical creatures.

I mean, we are once we go through puberty and we're having a cycle, we're cycling every 28, 30 days, you know, approximately 28 days. We say then women are the ones who can get pregnant and carry a baby to term.

And so we're having surging hormone levels there. And so I always talk about because such a misconception is estrogen and so many people think estrogen causes cancer.

And I always just remind women and men that if if estrogen really caused cancer, when we went through puberty and when we were pregnant, when our levels are skyrocketing, we'd see a real high predominance of breast cancer.

And we don't we see it post-menopausal when the levels are dropping. And so it's this big misconception about estrogen because there are different kinds of estrogens, and some are really breast cancer protective for and some are definitely brain protective.

And so we we have to just think about women are going, you know, we're like roller coasters or kind of ebbing and flowing throughout our lives if we're breastfeeding, if we're pregnant, when we're cycling and menopause and all of these things are not really diseases.

It drives me crazy. Like there's an ICD ten code for menopause. And I'm like, these are just natural transitions. Having a cycle, finishing your menstrual cycle, getting pregnant, not getting pregnant.

And when there are imbalances, when you are suffering, that means that there are imbalances in your in your life, in your systems, in your hormones. And that's your body's way of saying, hey, I need some help here.

But being a woman and having hormones that cycle and do different things at different times doesn't mean there's something pathologically wrong with you.

And for we think about brain because I'm trying to focus on the brain since we're talking about the brain here. You know, estradiol, which is E2, is really, really indicated in brain health.

And we see that we see when women go through menopause and they lose their estrogen, that there's all of a sudden this explosion of Alzheimer's. And if you can replace that estrogen, then, you know, the hippocampus where you learn and you remember there's a ton of estrogen receptors there.

And so you're not going to see that. I mean, I see that I've been practicing over 20 years and I see it all the time. The patients, you know, I have patients that I've been working with 20 years and the ones who are on proper bioidentical hormone replacement as they're aging, they are not losing their memory.

They are not having a hard time retaining. They're not showing signs of early dementia as as a matter of fact, they're they're doing phenomenal things in the world.

And, and they're just really aging backwards in front of my eyes. And so we have to be thinking, you know, I think a lot of times we think about estrogen and hormone replacement for hot flashes.

And I have so many women who say, well, I don't have hot flashes, so I don't need estrogen. And I'm like, well, you have a brain, right? And you want to keep it functioning right, and you don't want to be at risk for Alzheimer's. Right?

So you do need bioidentical hormone replacement. You just need you need it properly and you need it. You know, you don't want the synthetics, you want bioidentical.

And we use a lot of real in bioidentical hormone replacement. But it's coupled with estradiol. And so there's benefits

from each. And it's the the art of knowing what percentage, which person needs to give them the support they need and also give them the protection.

Yeah. So for people who are listening to this, please work with a provider on this. This is not something there's no guesswork. That's, that's done for this because it's very delicate balance.

And you got to work with people who are who are, balancing as well and not only that, the route of assessment intake, also determines where the surgeon does the body, right?

There's, there's oral surgeon, which is very different than topical or transvaginal surgeon, you know, and we've seen a lot of studies that's really, focused on the differences between them, especially, most recently as well.

And now we're seeing trials, clinical trials, cancer trials of, adding your topical history all, and some transvaginal as part of cancer treatment in the largest cancer institutions that you can think of as part of the, conventional, phase one clinical trial.

So really exciting stuff. When it comes to hormones, I think the the way that we're thinking about hormone, the hormone replacement therapy is shifting a lot, and it will continue to shift a lot in the next few years, because now there's pharmaceutically available about denticles.

That just hit the market with the largest pharma companies and stuff like that. So there's a lot more dedication to, to, to this topic as well. I don't know if that's going to be a good or bad thing.

So we'll see what is in the future, right? Yeah. Yeah. I think in I do think, though, it's important that I like this is not DIY. You have to work with a doctor.

And I think it's important to work with the doctor who's who's open minded and keeping up. It's very archaic. Like, I still have patients who come into me and they're like, oh, my ObGyn or my primary said I didn't need any progesterone because I don't have a uterus anymore.

And that kind of thinking is so archaic. I call it sloppy medicine. And I don't mean to be disrespectful, but I mean, I took an oath and a commitment, and I'm constantly learning and going to conferences and reading and keeping up and watching summits and doing all these things to, you know, you can't be lazy and be a doctor.

You have to be constantly growing and keeping up with the science. And so you want to look for someone who is keeping up with things and doesn't tell you that, you know, estrogen is dangerous or hormones are dangerous, or you only need them for, you know, a little time to stop your hot flashes.

I mean, for example, like progesterone, you know, it's neuroprotective. It increases healthy blood flow to the brain. I mean, there's research and data showing it's really helpful in prevention from strokes and traumatic brain injuries.

And it's regenerating your brain cells and your nervous system. And it's anti-inflammatory. And it supports mitochondrial function in your brain cells.

I mean it does so much good for your brain. So when a doctor says, well, you don't need progesterone because you don't have a uterus, like, but you have a brain, so they're not thinking it through.

They're thinking very, you know, like a horse with blinders on. And then I mean, progesterone especially. And again, when I'm talking, I'm always talking about bioidentical and progesterone.

I'm talking about cream, but also oral progesterone. Because the way it crosses the blood brain barrier, it has a metabolite that is, hello pregnant alone, which hits the Gab receptors.

And gab is your major neuro inhibitory transmitter. So it's going to calm you down and help you. I mean, I don't know, I've gotten, like, flowers from lots of patients, husbands because I've given progesterone and they're like, oh

my God, thank you.

She's not you know, anxious and crazy and screaming at me anymore. Like she just like I call it natural Xanax, you know, it just really mellows you out and mellows your brain out and you need to sleep.

If you're not sleeping, you don't have healthy brain function. And often you're not sleeping because you don't have enough progesterone. And so, you know, it all just kind of ties in with each other.

It all ends up, you know, falling back on the same, the same principles of the same things. But hormones are, you know, they're not they're not everything, but they're an important piece of the puzzle that needs to be paid attention to.

Right? Absolutely. And I want to go back since to sort of this concept of, you know, you don't need progesterone, you don't have a uterus, because I think that when in the general medical societies, the word need is used very differently than like functional medicine or wellness doctors. Right.

Because, because if someone is gynecologists, then they're going to be focusing on the vagina. They should be focusing. If they're an OB, then they're going to focus on birth. Right.

And so I think the term need meaning that like without it are you going to be pathological. And that's the term need in medical societies. Right.

Estrogen, Progesterone, and Brain Protection

But but if the, the, the endpoint is different than conventionally trained doctors and other doctors because the endpoint for the word need is, is it going to worsen or create some sort of a pathology that's in their field, like that's within their field?

Right. Because if you talk to a lot of, like specialists, if things are outside the specialty, they're not you're not talking to a neurologist, then you don't have the primary endpoint of memory improvements and stuff like that as well.

Right. And so this is shifting, especially since the pandemic. This is shifting a lot. Right. And so yes, do you not necessarily need progesterone to end up in the pathologic state.

Yeah, that's probably a true statement. But the real question is, you know, what do I need doctor to to thrive. Right. And so that's a complete different, you know, question.

And so I think that, we're all in agreement in what may be needed, to thrive. But I think it really takes a good communication, honestly, between the piece and the doctor to figure out, like what terms they actually mean.

Right. And my wife is good at this because she's conventionally trained, obedient. Right. And so, you know, if she says that you don't necessarily need this from a pathologic standpoint, just like but positive hormones are great if you have like brain fog memory, she's gotta, gotta, gotta, gotta know she doesn't do booties.

But to refers to someone who does it does it very well here in Houston. And so and that's the thing to really communicate with for the doctors and for those people listening to this like make sure you have communicate what is your desired outcome, what is your tonality outcome with your doctors.

And it can guide you in the right way. But going back into the brain, you're saying that, when, women hit menopause, all of a sudden there's this explosion of diagnoses, Alzheimer's.

So that's very true. So this is not, this is not something that we just say. There's a lot of studies showing that the brain starts degenerating as fast as men, similar age after the hormones, like, comes down because the the surgeon is protective.

Now we are seeing, menopause occurring earlier in women compared to what it was like, just 40 years ago. Right. That's a big shift, right? What is happening there?

Well, and I just before I answer that question, I just want to say that, you know, that's such a good point you brought up because if you are seeing a specialist, they they often forget the hipbone connects to the, the knee.

Well and so I, I always find it funny like people like what you specialize in like helping people heal, like, you know, maybe for pneumonia, you can see me for menopause, like, because it's all connected.

So. So why why is menopause happening earlier? I mean, I think a lot of that has to do with just the toxicity. We're dealing with, the stress levels we're dealing with.

You know, we are I always say we're not our mothers menopause. And, you know, in some ways that could be that could be a good thing. And in other ways, you know, not such a good thing.

And so, you know, I mean, we see like children going into puberty earlier because they're getting, you know, so here's where it's like the flip side, like we're singing estrogen.

You know, her praises. But then there's all these exogenous toxic estrogens that are, you know, from plastics and receipts and beauty care products that are clogging the body, that are, you know, making the liver not be able to do its job, that are congesting detoxification.

And so, so it's always a very big picture. And when we are I mean, I don't know the exact number and I think I forget it because it's just so depressing.

But like babies are born in, already exposed through the cord blood to an insane amount of chemicals and a lot of them having estrogenic properties. But, you know, inflammatory type properties, not the good type of properties that ezreal or a little bit of bioidentical estradiol will do for you.

And so this is really just shifting our whole genetic expression and our whole, our whole rhythm of life. And then, you know, throw into that that we are not connected to the rhythm of life and many people and then don't get into nature or they're at their desks on zoom all day long, or they're not putting their feet on the ground. They're not watching the sunrise.

They're in junk lighting and emfs and cell phones, I mean, cell phones to the to the head. You know, you want to talk about burning your brain. I mean, so there's so many things coming at us then, you know, when life was a little simpler and we could just sit around a campfire and go to bed when the sun went down.

And, that's great that you kind of ended with the whole campfire thing, because I think light pollution is a is a huge deal when it comes to hormone disruptors as well.

Kids are having screen time, a lot more screen time these days. And a lot of that happens, you know, after sundown that completely disrupts the circadian rhythm.

The sleep cycle messes up a little bit. Just on balance decreases serotonin. And so it causes a lot of these issues to occur. And then the, we said earlier about these babies, these poor babies, unborn fetuses, there's microplastics that are in the majority of, the cord blood now.

And this is not some that I made up. Go and Google this, Google microplastics and placenta on a gold record, and you'll find a lot, a lot of evidence that this is happening, especially in the last two years, a lot of data coming from it.

So microplate leaks are a huge issue. So we know and we know that it shifts the metabolism in the liver to produce the super hormonally active bodies hormones as a gene called 16 hydroxy estrogen, which can be pre-cancer, which can create pre-cancer cells in some instances.

But this is where working with the hormone replacement specialists can really come in handy, because not everyone knows how to test for that as well. Right.

And so like there's so important and and the that you know, it always comes back to balance. My first clinic I had was called the center for Balance Living because it's really about balance.

And you know 16 hydroxy the metabolite, it can be bad. But again if you get if you drive it down too low, then you get into problems with osteoporosis.

And so the the November. Yeah it's not black and white. It's balance and it's really understanding. And and you are worth you know the people listening.

You are worth taking the time to investigate this because we are living longer and we want to live healthy and active. And with our brains functioning and productive.

There's I know many women and men who are in their 80s and starting businesses, and just so productive and contributing to society and in their passions.

And so we have to change that, that mindset that, oh, we get old and, you know, it's all downhill after our 50s and 60s. It doesn't have to be with the knowledge we have now of medicine.

You can live a very productive, very present, clear, activity filled life. But but you have to put in the effort and take the time to optimize your brain health, optimize your hormones, know that sleep is medicine and that you have to be sleeping because you need melatonin production.

You have to be avoiding your your toxic exposures. And you're not, you know, just like you're not going to avoid stress, you're not going to avoid your toxic exposures 100%.

But how can you lessen them? What can you do to make them not as bad? And so, you know, staying healthy is not, you know, stuff for the week. You know, it takes some time and effort and attention.

But the payoff is is health and vitality. And there's no better payoff than that. Awesome. Yeah. Let's talk about some natural things that can really balance our hormones.

Like sleep, for example, stress reduction, mindfulness meditation. We walk through, some of those and how they correlate with more of the home balancing as well.

Yes, I would gladly. So I love, I love waking up every morning and seeing my crown on my aura ring, that I am a queen and I got a good night's sleep.

Menopause, Toxicity, and Earlier Hormonal Shifts

And so I think, I think we have, I think we're hopefully starting to turn back to realizing that you don't need a, you don't get a medal for being like, I can get by on four hours of sleep.

Like, now I'm handing out gold stars because you're like, I prioritize my sleep and so we have to sleep. In Chinese medicine, they say every hour before midnight is like, golden and worth the equivalent equivalent of four hours after midnight.

And so I like my patients to be sleeping by ten, 1030 the latest. And if they want to go earlier, more power to them. But a lot of us seem to be night owls, and we want to pack things in the evenings, especially if we're busy working 9 to 5 and raising a family and getting to the gym and all of that stuff.

And so we really need to make sure that we're sleeping in. And I mean, if you don't get a good night's sleep, your brain, you can't function in the morning. Right?

You're tired, you can't think you're forgetful, you can't focus. And so often when patients come to me complaining of that, I'm like, the first thing is like, well, let's look at your sleep hygiene.

And if that's not handling, let's, let's, let's get that taken care of. Because maybe once that's happening, your complaints might be very different. And so, when we sleep, you know, we have different stages of sleep and we have deep sleep and REM sleep that are really important.

And it's when we get there that we can activate our lymphatic system. And our lymphatic system is the lymphatic system of the brain, of the central nervous system.

And that is when our brain detoxes. So if you want to detox your brain, the first thing you have to make sure you're doing is sleeping. Otherwise it's not going to happen.

And so you can I like, you know, you could sleep your bed on an incline to encourage that draining, but you have to make sure that you're getting good sleep, that you're having melatonin released.

And so this means sleeping in a darkened room. This means sleeping cold. Whether you're using, like, a chilly pad to cool you off or you're getting the temperature down.

But you have to make sure that you're getting the right temperature that you have. No, I always say like, you don't need to put your hand in front of your face and not be able to see it.

I always think of like when I was a child at the planetarium, and it would get really dark and you couldn't see your hand like that's how dark it should be.

You need to get the dirty electricity and the Wi-Fi off and out of your bedroom. You need to get electronics out of your bedroom. You need to get your cell phone out of your bedroom.

You need to make sure you're sleeping on healthy mattresses that aren't off gassing, and that you are using organic sheets and organic cotton, and for your pajamas and your pillowcases.

And so, you know, when you when you have Gaba, which is such a word, such a deficiency of Gaba in our society. But Gaba will also encourage serotonin to break down and make melatonin to help you sleep.

And so we have to think about what's, like what's affecting melatonin production, because the pineal gland is not protected by the blood brain barrier.

And so we get a lot of calcification from aluminum and fluoride. So then you have to look at what are you using to brush your teeth and what are you drinking. And so you can see it's like as I said before, there's a lot of pieces that go in.

But once you, you know, handle them all, then you are making a really healthy sleep environment and a healthy environment for melatonin release in your body.

So sleep is crucial if you're not sleeping. And and then there's so there's falling asleep then there's no sleep. There's getting good sleep. So I you know, you also have to be thinking about like are you waking up at the same time every night?

Well, what time is that? Because there's a thing called the cycle of tides. There's a rhythm in traditional Chinese medicine that flows. The energy flows through the organs and a lot of times patients are waking up the same time, you know, 215 every morning I wake up and that's what the clock says.

That's the time of the liver. And so is your liver congested and what are you doing about that. And so there's lots of different ways you can piece together why you're not sleeping.

And then you have to make sure also that when you wake up you feel rested and you actually got a good night's sleep. So it's it's a huge topic and one that needs so much more attention because it's the foundation, or at least one of the main foundations of having good health, having good brain health.

So that's a little bit sleep and making sure your your glimpses flowing. And I'll just add one more thing like if you have dental work or you have. Yeah.

Now games and fillings or root canals or gum disease or whatever it may be that's causing toxicity in your mouth, that's going to congest all this area as well.

So you always I often start with patients sending them to the biological dentist to get that handled. So there's a lot of pieces that go into making sure your brain is actually draining, and that you are getting a good night's sleep.

So that's I'm my answer on sleep. Yeah. I'm going to, reflect on that a little bit because, you know, we I do brain mapping in the office here. And, it's really obvious when people have chronic sleep deprivation and, I can actually see, brain frequencies where it inhibits a lot of the Gabba to induce sleep and stuff like that.

Right. And so, and everything that you're saying is so true because we can quantify the, the poor sleep, based on people's brain mapping. And I'll say this, that, we can identify things on brain mapping, such as obstructive sleep apnea, which is very underdiagnosed in women.

In fact, it's a very, very sexist diagnosis because mostly men get diagnosed with women who don't. It's because if you actually look at the questionnaire called the Epworth Sleep Score, that's given, for to diagnose, signs of sleep apnea.

The symptoms on there are basically menopausal symptoms that's on there's like denigrate it's almost like a full blown questionnaire. And what happens is that in the medical society, honestly, it's it's a very gender bias thing, is that a lot of doctors kind of blow it off. Oh, you're, you know, you're 49.

You're around that age and etc., etc., but it's not diagnosed correctly. And the other thing is that, women don't really want to be diagnosed with obstructive sleep apnea, right?

Not very. But yeah, you know, it's not. But at the same time, it's very freeing because, of sorts of sleep apnea is can be the root cause of hormonal, huge hormonal disruptions, massive hormonal disruptions and mental health issues and stuff like that, too.

But whenever we get it and diagnose and now there's different ways. It's not just about wearing that machine. There's CPAp, there's there's airway dentists that can actually have appliances and stuff like that.

And so I can't tell you how many times we're able to identify on the brain map and then send them to Airway Dentist. And then we look at the hormone levels in normal access are normalizing really, really quickly without like hormonal, building or hormones and stuff like that.

So, so I'm so glad you brought up sleep as the biggest factor.

Sleep, Detox, and Brain Health

It is my favorite topic, as well, especially since we can quantify on the, on the on the brain map for sure. And so, yeah, getting good sleep is like barn on to the quickest way for that hormonal balance.

And the other thing is, a lot of times people will get their hormone levels checked after a really poor night of sleep, which may not be characteristic for the week, maybe this length of two hours and maybe the kids are having more stuff like that, and then you get your hormone panels drawn and stuff like that, like, no, it's going to be off, you know, and so it's not necessarily a baseline, but that lab is there and they kind of carry over to the doctor's office offices like it's like, what were you doing like the night before, you know.

So a lot of what we consider like imbalance or imbalance. So depending on sleep and stress production, you know, which is a huge hallmark. So we said earlier about the lymphatic system the way we do types of brain.

So as it turns out, this is a very recent study. It takes three cycles of light sleep to deep sleep transition to activate the lymphatic system. Each cycle is 2.5 hours long on average.

And a human. So, you know, three, to that 2.5, times three, you know, that's about eight hours of sleep that people need for full lymphatic detoxification for completion of three cycles, which is very fascinating because you're going Fedex, you know, takes away a lot of the toxicity to the brain for that regenerative process, for the brain to start clearing away.

And so, so it's mainly concerning because I don't average eight hours myself. Now I really want to write, but but I think sleep is such, such an important factor for, for a lot of women, especially in women's health and, hormonal balance.

But what about other methods, breath techniques like mindfulness and anything like that? Yeah. I'm, I'm a huge fan of mindfulness. I, I don't know, I guess there's a bunch of things that I say, like, nature's the best medicine, mindfulness is the best medicine, sleep is the best medicine.

But mindfulness is definitely in there because mindfulness is a way to regulate our nervous system. And if our nervous system isn't regulated, then we can't drop into parasympathetic.

We can't sleep, we can't detox our brain. And so we need to I do, I wish I was in your office and can check out these brain mappings, but I do heart rate variability.

So I measure patients nervous systems and yeah, pretty much it. I've been doing this over 20 years and I can't even recall right now. Like anyone who's come in in the parasympathetic state, everyone comes in pretty much in sympathetic overdrive.

And and we have to learn how to how to switch out of that, how to relax and digest not only our food, but our experience and our emotions and our and our life in general.

And so to me, there's so many different tools for regulating the vagus nerve, whether it's called plunging or humming or wearing a device or any of these things.

But to me, the the foundation is mindfulness, because no matter what you're doing, if you're not doing it from a mindful perspective, then you're probably in a trauma response or in a sympathetic response.

And you're you're doing it because you're freaked out and you want to get healthy or whatever it is. And so learning to breathe, learning to harness the power of our own breath, which is how we arrive into the world, is how we're going to exit.

It's totally free. It's what sustains us. It's our friend. And so when you can learn to harness the power of your breath and you can exercise the mindfulness muscle, the attention, because I've had so many patients over the years, tell me, oh, doctor, stills, you know, I tried.

Meditation is not for me. You know, they tell you to pay attention and count to ten. And I couldn't make it to two. And I'm like, no, no, no, I'm still for you.

That's normal. Like, it doesn't just like building muscles in the gym doesn't happen overnight. You have to have consistency and attention and intention.

And so it's the same with mindfulness. And so learning to to be able to focus, to be able to bring your attention to the present moment. There's so much richness and healing and opportunity that arises when you can slow down and be present, and when you can learn to be in this place, then as you go forward on your healing journey, it's

from a place of curiosity, of a place of openness, rather than this place of fear or oh my God, I don't want to have Alzheimer's like I watched my mother, because then we get back into the sympathetic overdrive.

And so if we can breathe, and even if we do have someone who we watch suffer from Alzheimer's, we can breathe and regulate our nervous system to say, okay, you know, that was their story.

It doesn't have to be mine. What can I do different? I'm curious to learn what are the things I can encompass and invite into my life that maybe they didn't do.

And so it changes the whole energy. You know, there's, that's so true. And there's been a lot of studies ever since the 60s on meditation and mindfulness and hormonal balance.

So the associated, mindfulness of a decrease in cortisol spikes, the associated increase in growth hormone and stem cell upregulation with meditation, the mindfulness, increase in progesterone in the, in the capillary tissues, they've done in animal studies and human studies.

So from a scientific perspective, this this concept of meditative techniques and mindfulness is not as, not as sort of out there as, as we once, think it might be.

Right. And even even since the, ever since the pandemic started, there's a lot of studies done on the just mindfulness studies done on like burnout and stress reduction anxiety, but now they're looking at biomarkers and they're using hormones and cortisol as the stress biomarker.

Mindfulness and Nervous System Regulation

There's another recent 1 in 2018 that looked at thyroid, thyroid stimulating hormone that's excreted by the pituitary gland. But the brain, after five minutes of meditation, one five minutes of, meditation per day for an entire month, they actually saw this balancing effects there.

And so it's it's so interesting how much, something like meditative practices, can help. One it's free to anybody can do it. And actually and through it, you can do it anywhere.

You know, I love to do it on the, on the airplane or especially in a dentist's chair actually. So I for it's so funny because I always meditate and I'm like, I love the dentist chair.

I used to be afraid of it, but now I just use it as a meditation pod. And when we teach mindfulness based stress reduction, we do an exercise where we have the participants actually like think of a stressful event and like feel it in your body for two minutes and then kind of report what did you feel physically, emotionally, mentally.

And when all these symptoms go up on the board and you see this picture of cardiovascular disease and digestive disease, a brain disease, like all the things that you feel when you're stressed, are the symptoms you have when you're experiencing disease processes.

And so if you can simply learn to breathe and I say simply because it's not so simple, you know, being, you know, we always say taking the stress reduction course can sometimes be stressful.

But when you can learn to harness this and use this as a tool, you can totally reduce disease. Now that's that's amazing. And the fact that we can actually increase blood flow with techniques in meditation, like within a few minutes that's done on MRI studies and perfusion studies of the brain.

That's that's that's so impactful. And we, we we really have to, be careful, as well. And one of the reasons I say be careful is because I think that when people say, okay, I want to meditate, I'm going to meditate so hard.

That is something so peaceful. You know? And then we get into this, things like, oh, I can turn my brain off with meditation. It's got nothing to do with turning the brain off.

It's about accepting a piece of information, put in a way, accept another piece until you basically figure out all the pieces and get to zero. So that's another type of meditation.

And so when we do say meditation and mindfulness, your mind can be at war and you actually still can do the meditative practice. So for those of you listening out there, that's something to to think about.

Yeah, for sure. But the practice can be just I always say kindly and gently, because we could be mean to ourselves, but just noticing you're thinking about the laundry and bringing your attention back to your breath, and then you might right away notice you're back at the laundry.

But as you keep doing it, you build the muscle, you build the mindfulness muscle, and you might then be like, oh my gosh, I didn't think about the laundry.

And I got to come three breaths and that that's something to celebrate. Yeah. No. Absolutely. And so, you know, as we end off, here and we've had a fabulous discussion, I can go for three hours, but I want as we end off here, I kind of want to, hear from you.

What is something that you've learned recently, about hormones and health and that you wish you knew when you first started your practice? Oh, gosh. What is something I've learned recently?

Well, I've definitely been diving more into the connection between hormones and the immune system, because I think we don't really think that our hormones and the immune system, but, they're, you know, they're really important to have a healthy immune response as well.

Hormones, Immunity, and Closing Thoughts

And I think a lot of women who, you know, just coming through Covid who are on bioidentical hormone replacement and had healthy estrogen levels, they did much better.

And they stayed out of the hospital and they recovered quicker. And I really, you know, even more so than some of the men and so or their husbands, their counterparts who maybe aren't patients or whatever.

And so, that's kind of a new area of fascination for me. And it just goes back to what we were talking about, how it all connects. You know, it's all related.

The body is one big, phenomenal organism, and it's interacting with itself, with the Earth, with the planet at all times. And so we really just have to keep remembering we are all connected.

And and the Kneebone really does connect to the hip bone. Yeah, really. And I recently learned the exact same thing when I say recently, I mean, three days ago, someone sent me an article on the connection between low progesterone women and mortality outcomes and and long haulers and Covid, as well as low test.

We know low T is a huge risk factor for for Covid mortality as well. And so, I've recently kind of dove into the to the same thing. And I think the of the pandemic has really allowed us to really look at things quite differently, and in a good way.

And we're always learning. And so, you know, we're, we're student of life. And that's why I appreciate, you as well. But hey, thanks for coming on. This has been a fabulous discussion.

I really enjoyed it. I hope you did, as well. And I did thank me. No problem. And just, before we go, how do people find you? You other people find more about you?

Doctor Sharon Stills, Dr.. Stills.com I do host the science of Self-healing podcast, so I have lots of interesting topics on there. About bio regulatory medicine.

We didn't really get into that tonight, but that's, the field of medicine I practice that I learned in Europe from all my years of studying. So you can check that out.

But, you know, just put my name in and you will find me. Excellent. Well, thanks for being on. Appreciate you. Thanks. Thanks for doing this.