Fear, Facts, and Faith

So replace fear with facts and faith. And if someone, I don't care what, how many followers they have or how cool their videos are that they had someone else make, if they're eliciting fear as a way to get you to comment on their reel or sign up for whatever, don' buy what they are selling.

Don't buy if it's fear because that nervous system that you are going to pay the cost for that. Hi, welcome back to the podcast and welcome to part three about histamine.

Today, you've probably been waiting for this, we're gonna talk about hormones and histamines and midlife. And this is why perimenopause can trigger new reactions, new symptoms that you never had.

Histamine, Hormones, and Perimenopause

So stay tuned, this episode is gonna explain how estrogen, progesterone, and cortisol is influenced by mast cells and why some women suddenly develop these histamine symptoms during perimenopause.

Many women reach their 40s and say, I suddenly react to wine. I can't eat leftovers. My allergies are worse. my skin is breaking out. i wake up at three in the morning, but my heart is racing.

This might be not random, because nothing's random. Mass cells have receptors for sex hormones and stress hormones. Mass cells are hormone responsive.

We usually think of these as separate. But mass cells, they express receptors or response signaling involving our hormones like estrogen, progesterone, glucocorticoids, steroids, CRH, thyroid-related signaling and other mediators in our endocrine system.

So this makes the mast cells part of a broader neuroendocrin immune system network. What about estrogen and mast cells? So estrogen signaling may increase mast cell reactivity in some tissues.

And I've seen this clinically so many times. So some of the effects of this, of estrogen signalling, it may lower the threshold for activation of mastcells.

This would be increasing degranulation or that erupting of that mast-cell. increase the histamine release so then you have more of these symptoms and then this would actually amplify the allergic inflammation going on.

And this may help explain symptoms flares. And you might see these flairs around ovulation or during those estrogen surges. This is where perimenopause gets worse because there's highly fluctuating cycles as that estradiol goes up and down and is more erratic.

Also during pregnancy in certain conditions, we can have more of a histamine flare. hormone therapies, so women that are taking hormones that is overdosed, which happens so many times.

So this doesn't mean estrogen causes MCAS in every woman. This just means that we see more flares, and estrogen may press on the mast cell accelerator in susceptible women, especially during perimenopause.

Estrogen, Progesterone, and Mast Cell Reactivity

I know personally I started getting some allergies when we moved to Tennessee when I also hit that perimenopause late and I was also under a lot of stress.

So it was really interesting and it will be interesting to see this spring if now that my stress is under control and my hormones are a little bit balanced if my allergies do not surface because I've never had a seasonal allergies before.

Well, we talked about estrogen. Let's talk about progesterone. Progesteron and mastoidal stability. And progeterones has shown to have an inhibitory effect on mast cell secretions in some of these experimental settings.

I see this clinically too. So projesteron's benefits include reducing that mast-cell degranulation or when the mast cells explode and release all those cytokines we spoke about.

Progesterone supports GABA related calming pathways through allopregnenolone. This is why oral progesteron is so nice when it breaks down to that allo pregnenolo and activates those GABAA responses.

And these women have less histamine like responses and release and activity when they're taking pro gesterones. Progesterone is improving sleep in some women and supporting that parasympathetic recovery.

This also reduces stress sensitivity because remember mast cells in your neuro system, they're communicating. So progesteron can calm. Now some woman have this paradoxical effect where you give them progesterone and it actually causes them to be more, have worsening symptoms, more anxious.

And this is a rare amount of women. Usually when I switch them topical proesteroin, it does help. Progesteroine may act like a break in this histamine response that is more variable in perimenopause.

So perimenopause is so much different for women because it's not just simply a low estrogen state. Remember, we have this erratic estrogen, the surging and dropping.

There's an earlier decline of the progesterone in relation to estrogen and perimentopase. So that's another thing that is just more confusing in permenopaus.

We will also have more anovulatory cycles. So what does that mean? A woman in perimenopause may skip cycles that they actually release an egg and ovulate because they are having a decreased reserve of eggs.

That is part of getting closer to menopausal. You have less suitable eggs, less egg release. Sometimes you release too, and that's why sometimes people get twins in parimenops.

Perimenopause also has more sleep disruption. Remember in the previous episodes we talked about histamine and these mast cells and MCAS syndrome where if they get into this high histamines state, it kind of just keeps feeding itself and more stress can make it worse.

There's also just increased stress sensitivity, impairing menopause, once again, just making everything harder and worse. And then you also have a greater glucose variability as these estrogen fluctuations and our insulin sensitivity can fluctuate more.

Perimenopause Symptoms and Pattern Recognition

So this kind of creates this perfect storm and perimenopause. We have estrogen fluctuations plus lower progesterone plus poor sleep plus midlife stress plus then you have an environmental or infectious triggers like we spoke about.

mold stress, you know, that travel baseball schedule, a new job, all the things. So this all equals then a lower threshold for mast cell activation. And this is why so many women in perimenopause all of a sudden declare they have MCAS or get treatment for that, but they're not looking at that root cause.

So hormone histamine, the symptom, that pattern. So we wanna look at patterns. Like if you're thinking, is this possibly me, then we want to start investigating patterns, I love patterns when I treat patients, because not only do I look for patterns I want them to recognize patterns because I am not there with them every day, they can be their

own doctor and help figure this stuff out.

So my job is to teach our doctor in Latin means to teacher. Some patterns could be around ovulation. If this is more of a histamine response to, there might be a round ovulations, migraines, flushing, itching, palpitations, anxiety, breast tenderness.

A lot of different symptoms there that could point to more histamines. If it's pre-menstrual, so this would be that luteal phase, usually though about four to five days before a new menstruation, a cycle before the bleeding, what I see in women.

So you would have the symptoms such as poor sleep or mood changes or food reactions more so in that stage, in the phase. You would get hives for no reason, headaches, maybe just some increased congestion just that week before your cycle.

So use that as clues also. Now during perimenopause, what this might look like, a histamine intolerance due to these peri-menopausal hormone shifting can look, like I see this all the time, new alcohol intolerant, okay?

Yes, yes, this is big. So maybe just put the towel in and give up alcohol. Another one, new sensitivity to fermented foods. So fermented food are just pushing them over that histamine load.

And this is a bummer because fermented things are so good for gut health. Once again, we have to go back to root cause and tease that out because we should be able to tolerate fermented Worsening allergies I brought that up my personal story moving to Tennessee when we moved here I mean my eyes were like glued shut almost I'm like what is going on?

But think about it. I moved I was already in perimenopause and the stress of moving pushed me probably to have some an ovulatory cycles and my progesterone was just not showing up and So this is all things to think about.

Unexplained rashes. I always go back to mold and testing mold, but this can indicate just sometimes even just more stress, right? You're ramping up that neurohistamine feedback and things are just getting worse.

Nighttime palpitations can be a new symptom in perimenopause. I hear that a lot and it's super frustrating and scary. Insomnia, that is so common. Heat intolerance, where before this wasn't a problem.

And then just a weird one that I see is increased reactivity to medications or supplements that they have been on for a long time. So these can all just be really subtle ways that might indicate something going on with histamine.

So there is a hormone nervous system mast cell loop. So estrogen fluctuation in perimenopause lead to a greater mast-cell reactivity in susceptible tissues.

Histamine Intolerance vs MCAS

That then leads to histamine and inflammatory mediators. which then lead to poor sleep, palpitations, flushing, anxiety, all these different sensations, then that leads to more sympathetic activation, that fight or flight activation.

And then, leads more CHR, corticoperative releasing hormone and nervous system signaling, and then that leads to further mast cell activation. So see, we get on this kind of terrain of chaos and women feel so gaslit when they talk to their primary care doctors about this, even when we go to allergists.

Allergists don't understand how complex this is and how you really do have to dig into the root cause. So then at the same time, when all of this is going on and kind of imploding on itself, declining progesterone, which happens first in perimenopause, may reduce some of that calming support, that calming nervous system, GABA-assessive support that's provided during this time in our cycle where it gets worse, the week before our period, And that progesterone is stepping in during sleep to calm and the GABA receptors.

So then you're having that disruption with that decline or anovulatory cycles. And you just feel bad. You just fell bad! So this is so common. I hear it every day in my clinic with patients.

But you can feel better. So let's talk about two different distinctions, histamine intolerance versus MCAS or mass cell activation syndrome. Histamine intolerance may involve breaking down histamine, particularly from food.

So some of the contributions would be a lower intestinal DAO activity for many reasons. It could be gut inflammation, which can be temporary or permanent if we don't work on the root cause.

Medications that influence histamine metabolism is a big problem. If you're just having high histamines food intake all the time, like leftovers all of the times, aged meat, fermented food just all time just high-histamine plus you have a lower intestinal DAO activity, that can be kind of a perfect storm.

Alcohol, alcohol can really contribute to this histamin intolerance and a dysbiosis in the gut can prove to have a higher histamine intolerance. So this histamines intolerances, it's kind of like a buzzword right now.

But a lot of those things that I indicated were a cause, you can work on them, right? Not that everyone wants to, but we can. And I do believe that our body is a temple of the Holy Spirit and we should be good stewards and that God provide us with a body that can heal.

So MCAS, Mass Cell Activation Syndrome. So this involves inappropriate mass cell activation and then endogenous mediator release. This person, they may have histamine intolerance without MCAs, or they can have MCA without significant dietary histamines intolerances, Or they have both at the same time.

So this is when you want to work with someone like me or one of my health coaches to really teeter out what it might be and get to the root cause. So DAO with food, so it's diamine oxidase.

It helps break down histamine in our intestinal tract. So supplementing DAOs can be useful before higher histamines meals for some individuals. And then the DA may help reduce histamin coming from the food.

But DA, this is not what you give for MCAS. This doesn't prevent mast cells throughout the body from releasing histimine. There's supplements that can help with that.

But DAO, that can help lower the histamine arriving through the front door, through food intake, but it doesn't stop the cells from producing histamines inside the house, inside your body.

So that was a lot of information and I want to now let you know what you can do to to help.

Reducing Triggers and Stabilizing Mast Cells

So the goal is to reduce the total burden of histamine of these mast cell mediators of the inflammatory cytokines while investigating what made the system become reactive in the first place because we shouldn't just put a band-aid on it.

We have to say what is reacting, this is a symptom. MCAS is symptom, it's a symptoms of a trigger being there. It triggered something. So we need to reduce the clear triggers, things that are obvious.

So one of them is mold to a water damaged environment. You know, my office that got a tree fell in it. There is a mold in the flooring there. It only took 24 hours, you know.

The whole rain went through the hole and it's stuck in that floor. There's no way to get that dry unless you pull it out and mold was created there. So that is why I'm recording in my dining room now for everything because my podcast studio is trash.

That is one clear, clear trigger. Another is high histamine food during a flare if you're flaring or maybe in the luteal

phase where you know You are more histamines sensitive.

Well, don't eat an aged steak leftover with Sour grout just don' do that or or take a DAO enzyme if your gonna do it another clear trigger alcohol ladies, we just You know, I mean the Lord slowly just started reducing alcohol in my life until my husband and I just decided we were done.

So alcohol. Heat. Sometimes I'll have patients and i'll hear of women where taking a hot shower it just flares them. It creates that histamine so heat is a clear trigger.

Medications or exposures, if you know that your body is reacting to them, just reduce those triggers. It's not good. We want your bodies to stop healing.

we don't want it to be on that cycle that I spoke about. And then sleep deprivation. Get off night shift. If you're impairing menopause and working nightshift, get off of it.

if your not sleeping, If your partner's snoring, you wanted to get a new puppy, no. Like if already struggling, Get that out. get it in someone else's room.

Kick that dog or cat out of your bedroom. So let's clear those triggers. Next, we want to block or stabilize the mediators when appropriate, okay? This is someone in a big flare.

This someone that we're just still working on that root cause. And this would be things like H1 or H2 antihistamines, this will be stuff like cromulin, KPV is a peptide that I will use to stabilize things, quercetin, my supplement histate and histrate junior, we use those to stabilise the mast cells.

So this is either blocking or stabilising these mediators because we don't want them to keep on that cycle of affecting them. And so those are ways that we can step in if something's really bad.

For women, we want to support hormone stability. So this would be where we would evaluate cycle patterns. I like to use the mirror data or sometimes saliva testing, but we can see these patterns if we look at their cycle and what's going on.

and start to see where we can step in. And we wanna see if their symptoms that they're having correlate with ovulation or if they are in the luteal phase and this leads to individualized hormone therapy.

This is not what you're gonna get from a book on Amazon that says put an estrogen patch on everything and blanket coat everything or yam cream. No, this is something that you need to work with a board certified integrative physician that has Extra hormone training.

Okay, this is not someone random off the internet. This is something that you don't want to get information from unless they're a board certified doctor.

I can't say that enough. Do not go to a med spa for your hormones. Don't go to the internet from your hormones. You have to go a trusted source. This is why in my hormone certification program, which is faith-based, I'm teaching these coaches to look at red flags.

There are so many red flag right now in the hormone world. So this is very important. Individualized hormone therapy. This goes with like, you know, avoid assuming every patient needs estrogen because this is what's happening right now to women in perimenopause and they might feel good for a little bit, but then they fall off a cliff and women are just not getting good care right in the hormone space.

And, you know, we do want to consider progesterone, too, because that can be really helpful. But I will say I've had women that they have mold and mold exposure, then they're colonized with mold, and putting projesterones on top of that, cause they've went and they'd gotten that.

They've gotten all the hormones.

Nervous System Support and Root Cause Healing

And it didn't help because it wasn't fixing the root cause, which was the mold. and the colonization with the molds. So this is complicated, but also you just need to go to someone that can help you put the pieces together and then you can also look for patterns, okay, and advocate for yourself.

So thank you for being here. This is missed by so many people, this part of helping with histamine intolerance and MCAS and that is supporting the nervous system.

this means making sure you're sleeping and getting restorative sleep. But this getting morning light. best way for that is get some chickens and then you can go out and let them out you get your morning light you Get your breakfast all good Breathing practices go.

I have box breathing four seven eight breath work. i have all that on my youtube you guys can watch it prayer prayer Go pray for someone else too Walk up to a stranger at the holy spirit's prompting and say can I pray?

for you and with you it's it'S relaxing and They usually say yes. So, gentle movement. This would be walking. To me, lifting weights. That's more gentle on the nervous system.

I'm saying no to HIIT workouts. If you are in a histamine mast cell flare, no, you don't need to do HIIt workouts, and you may want to them because you're gaining weight, but that is going to be counterproductive, okay?

Safe relationships. So if you are having like a lot of stress at your job or there's something going on with someone anywhere at work, at the playground, social media, then take a break from those relationships, pray about it.

Ask the Lord to show you what to do, okay? But we need to feel safe, especially when we're working on MCAS and histamine because the nervous system and the limbic system is very distraught.

And then make sure you're getting appropriate therapy. I have mold and my mold protocol, I've so many protocols on my website, so much resources to help everyone.

And you want to, with who you are working with, investigate all the different contributors to this mast cell, to the histamine and that would be mold, infections, autoimmunity, gut dysbiosis and dysfunction, nutrient deficiency, problems for medication effects, thyroid disease and hormonal fluctuation like perimenopause, PMOS and menopausal.

So we definitely, people need to know that MCAS is real, histamines and tolerance is But not every symptom is MCAS. Not every patient needs the same expensive detox or treatment.

You know, not everyone even has mold. Sometimes it's not that. Restrictive diets can be harmful and actually do more harm. So this is another thing that I see people really polarizing to on the internet or in practices.

And fear, fear this can reinforce that nervous system reactivity that is spiraling during histamine and MCAS problems. So this is what's really hard is because when I click on the internet and why I did some of the series is everyone is trying to make you scared of these symptoms that God gave us to figure out what was the root cause and what is wrong.

So replace fear with facts and faith. And if someone I don't care what, how many followers they have or how cool their videos are that they had someone else make.

If they're eliciting fear as a way to get you to comment on their reel or sign up for whatever, don' buy what they are selling. Don't buy what they're selling if it's fear, because that nervous system, that you are going to pay the cost for that.

So don't sign up for their crap.

Closing Thoughts and Resources

You don' need that, just go to the word. Go to someone that follows the Lord. So, mast cells are not the enemy. The Lord put them in there for a reason.

Because we live in a broken world, they will get a little rambunctious, but they're trying to protect you. Our job is to understand why they no longer feel safe enough to relax.

That is the key with mast cell. Thank you, I'm Dr. Jen, a double board certified physician. If you'd want to work with me, please go to healthybydrjenn.com and click work Dr Jen.

if you want me to mentor you and you wanna step in and learn things like this and how you can help other women be a part of my faith based hormone certification program.

It is a coaching certification. I would love to meet you, to get to know you to pray for you. To be in community with you and things are just getting started.

So I am so grateful. Please share this. please comment below with what series I should do next. And thank you so much for being with me.