Why Protein Is Brain Medicine with Laurie Hammer Transcript

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Opening on fasting and amino acids

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And part of that rebuilding process is, you know, using the amino acids, but it greatly affects, you know, your cognitive function. Your cognitive function slows down.

You can't emotionally regulate. you know, the way that we need to respond inappropriately to situations because you're so hangry, because your glucose, your glucose is tanked, you know, you're just, you know, you just depleted your body.

So I love fasting, but you have to do it correctly. You're listening to the Lifestyle Medicine podcast with Dr. Ivan Rusilko, brought to you by Access Lab, where we explore new perspectives at the forefront of personalized health care.

Welcome back to the Lifestyle Medicine Podcast. I'm Dr. Ivan Rosilko, your host. We're brought to you by Access Medical Labs.

Podcast intro and guest introduction

If you are not getting your diagnostic test done with your doctor, then you're not seeing a doctor. So today we got a very special guest. Her name is Lori Hammer.

She's a functional nutritional therapist, and she is a guru on amino acids, which is great because for myself, I've kind of unbeknownst to me, been growing up on this with the whole bodybuilding and the whole diet and exercise type thing that I do.

So it's great to have an actual specialist in this. So Lori, thank you so much for being here. Man, thanks so much for having me on. I appreciate it a lot.

Well, good. There's so many different areas I want to dive into, but I mean, I just don't know where to start. Where would you start when it comes to amino acids?

I'm curious. Well, I always start with the brain. So when we're using amino acids, I'm using targeted therapeutic doses of amino acids to help to balance the brain, to balance the neurotransmitters, to nourish that so that it's easier for the body to heal.

So that's where I start. Oh, I love that. And do you have specific ones that you like? Obviously there's nine essential ones that are super important, but are there specific ones that you really focus on?

Yeah, I do. So I focus on serotonin, GABA, endorphins, catecholamines, and then we work with glucose regulation. So there's amino acids that kind of fit into all five of those categories.

So like serotonin, we've got tryptfan or 5-HTP that works. GABA is, you know, taring, GABA, theanine. And so there's a whole host of them that I use to balance those neurotransmitters.

That's cool. Is there a way you kind of decide, do you do testing for it? Do you just go off of a patient's history? Do you just go off of age or what they're trying to accomplish?

So I actually have a form that I use. So it's a questionnaire divided into those five different categories. And it's

based on symptoms. And so then we rate those symptoms on a scale of one to 10. And then when you're my client, I send you a kit of the amino acids in the mail.

Using amino acids to balance the brain

And we actually get on a call, you know, like a Zoom call and sublingual test the amino acids. Oh, that's fast. Yeah. And so then your body responds to the amino acids within two to five minutes.

So then we find which ones you respond to. And those are the ones that we start with. Okay. If you had to pick your favorite one, which would you say it is?

I'm curious and why. Oh, I love tryptophan cause I mean, church fan's the best. Yeah. Church fan's the best. It makes you feel the best. Yeah. That one's my favorite.

It's like the sunshine. So I love that. I love it. Now, can you explain to everybody listening why tryptophan? It makes you feel so good. Well, it converts into serotonin.

Serotonin is our inner sunshine. So that helps with anxiety, depression, OCD, hyperactivity in the brain, PMS symptoms. So it just makes us feel happy.

So your glass is full instead of empty. Yeah, it's just good stuff. So you also work a lot with high achieving moms, correct? I do. Yes. Do you find that there's specific, I guess you say, amino acid deficits for them compared to when you're working with athletes or males or anything like that?

Does the working mom have a specific cocktail that you kind of point yourself towards? You know, everybody's a little bit different. That's why I test all of them.

Um, but I would say almost a hundred percent of the time there's always a serotonin deficiency. And especially since like SSRIs are so rampant right now.

Um, I would say, I would say probably the catecholamine, so L-tyrosine or DL phenylalanine. Um, there's definitely deficiency in most people with those as well.

Um, the other ones kind of just kind of come and go. come and go. And when it comes to the athlete, I know like the branching amino acids, you always hear about those you hear about people taking just mouthfuls of powder of all kinds of different sorts of them.

Is there a specific blend that that you kind of focus on?

Testing symptoms and choosing amino acids

Obviously, things like you know, losing nice and losing balance are always important when it comes to that. But are there other other ones you kind of want to add in there?

Well, I mean, Cause I work with the brain, I work with mood. So a lot of, you know, is what I'm trying is to balance the brain. So we're still going to target those five areas and they're still going to fill out that questionnaire.

So, you know, athletes, I don't see, you know, everything varies from person to person. They're still very deficient in serotonin, just like, you know, high achieving mom would be.

Um, most of the time, a lot of GABA issues, um, I would say L-glutamine glucose issues. Um, if you're not training very well, if you're a high level athlete and you don't keep your glucose stable, you know, that can be an issue for you.

So L-glutamine is really helpful for those kind of things. I don't have a specific blend. I mean, I love total amino

solutions, which is all of the amino acids, you know, not just the essential ones, which I think is helpful for everyone.

Oh, that's great. Can you overdose on amino acids or no? Um, if you get too, too much L tryptophan, you might feel spacey or you might get a headache.

You just might feel just a little off. Little off. Okay. Well, good, good, good. Um, and when it comes to sleep, when it comes to sleep, I'm super important because sleep, I think personally, just with, uh, uh, with my practice is probably the most important thing that we actually treat.

And the amount of things, you know, I'm always encouraging patients to take specific types of amino acids before bed, especially with what, with what their goals might be, whether it's physical, mental, emotional.

sexual, there's all kinds of different things that we actually look at at actually my clinic here. How important is sleep when it comes to just overall neurotransmitter propagation, your dopamine levels, your serotonin levels, epinephrine, norepinephrine, GABA, glycine, all those different things?

Oh yeah. If you don't sleep, you don't heal and you need the amino acids in order to heal. So sleep is key to, I think, foundational to everything. So I love the fact that you focus on that.

I use a lot of L-Tript-Fam GABA to help people with sleep.

Tryptophan, serotonin, and mood support

So it's paramount. No, it is. And again, fiening is probably one of the most unique, I think, amino acids when it comes. You can take it in the morning to feel good, you can take it before bed to actually feel good.

Yeah, I love that amino acid. Could you kind of explain, I'm curious, and actually just for myself, I'm very curious, how does L-fiening kind of, how can it be used both in the morning to calm as well as at night and it not cause that drowsiness throughout the day?

Um, I think it's just the way your circadian rhythm, I think plays a huge role into all of that. So as your cortisol is rising and you know, you're during the day, the sunshine, all those kinds of things.

I think theanine and I don't know this a hundred percent sure, but this is what I've seen over decades. Um, it just goes with your rhythm, right? So it's just relaxing to the body.

And then as your own circadian rhythm kind of calms down for the day, it just kind of naturally helps that whole rhythm. So I just think it, I just think it works with your body really well.

No, yeah, super, super cool. And again, so for amino acids and everything's basically dopamine, I think when it comes to at least Miami Beach, you know, I mean, everybody's so focused on dopamine.

Everything is dopamine, dopamine, dopamine. Like, no, there's more. There's more than more, you know what I mean? There's a bunch of them. But for dopamine, what's probably the healthiest way to keep these levels normal?

Because again, you're on your phone, it's a whole dopamine spike. Your outside is a dopamine spike. You're getting a like this, that and the other. You know, people burn through dopamine so fast.

Do you find different things, especially when you're testing? Are you finding a lot of dopamine deficiencies or a lot of dopamine excesses? I would say I have more dopamine deficiencies than excesses.

And I just think it has a lot to do with our lifestyle, right? So people are stuck inside. They're stuck on their phones. They're stuck on their computers.

They're not exercising correctly. They're over fasting or they're under eating or there's just so many different things

that affect our dopamine regulation.

But if you're not eating enough protein, I mean, you're just not going to get enough tyrosine, right? You're just not going to get enough of the amino acids.

And I think that's a huge factor in all of that. What are your thoughts on supplementation versus actually good old-fashioned food?

Working moms, athletes, and sleep support

Well, the goal is that we take the therapeutic doses of the amino acids, get you to be stable, and then you can maintain it with food, and then just use them periodically as therapy whenever you need it.

No, I think that's great. Again, I'm a huge fan of good old-fashioned things. I mean, the less supplements, the better, right? Exactly. I mean, people don't realize that everybody wants a pill or something.

It's like, just go and have a steak. Go and have something to eat. We need to go have a steak. I have people that don't eat hardly any protein. We come in, I say, okay, first thing tonight is you're going to have 30 grams of protein because maybe they only have like 10, right?

And all of a sudden they'll be like, oh my gosh, my brain is tingling. I'm like, I know because you just fed it. Your brain's happy, finally, by God. You know what I mean?

Your brain is happy. This is good. Like, I feel really good tonight. I slept great. I look, I know, because you ate protein. Exactly, you're built for it.

You got canines for a reason, you know what I mean? So that actually brings me to another question I have for you. When it comes to intermittent fasting, where people sit there and they just deprive themselves for 14, 12, 16, whatever, 24, sometimes three days of food, what do you see, or what would you theorize, I don't know if you see a lot in your practice, how does that affect your, especially the actual brain chemistry when it comes to how amino acids work, not only in being built, but actually how they are, their functionality?

Oh, absolutely. So I love fasting. I love intermittent fasting, but I think you can overdo it. So, you know, we really need to be mindful of all those things.

If you over fast, you're just depleting your body and then your body is just using, you know, it's just breaking yourself down. And so then you don't have enough amino acids, you don't have enough protein, you know, to function well on.

And so I see a lot of people who over fast intermittent or, you know, extended fasting. And they come to me, they're anxious, they're depressed, they're exhausted, their adrenals are shot.

And we have to rebuild them. And part of that rebuilding process is, you know, using the amino acids, but it greatly affects, you know, your cognitive function, your cognitive function slows down.

You can't emotionally regulate. you know, the way that we need to respond inappropriately to situations because you're so hangry because your glucose, your glucose is tanked.

You know, you're just, you know, you just depleted your body. So I love fasting, but you have to do it correctly. No, you could be more right on that one.

I'm a big fan again, like, you know, there's the aspect of, you know, carbohydrates versus fats versus proteins, and what truly breaks a fast. So usually when I have patients that come in, or we're trying to do this, because I put patients on different types of hormones, different kinds of peptides that are increasing their natural metabolism and trying to build muscle, this, that and the other.

So but you know, some people are just so dead set, like I need to fast, you know, I mean, no matter I was like, okay, it sounds like you're in a cult, but okay.

Theanine, dopamine, and protein intake

But the aspect is, you know, when it comes to the actual supplementation of the various types of peptides, whether it's in the morning, before breakfast, or if you're not even eating, or before bed, do you find there's a specific time that you actually want to supplement the right amino acids?

Or is it just any time during the day? So I usually space them out, you know, two to four times a day, depending on the person and what they're, what they're going through.

So tryptophan I'll use all during the day. Cause like, again, just like theanine, it kind of just goes with your circadian rhythm. Um, but like L-tyrosine, you know, probably won't give them, you know, that to them after like two or three, cause that could be just more like uplifting, stimulating.

Um, so yeah, you have to, you know, time them correctly. No, for sure. And how much does mindset come into this? You know, the overall aspect of you wanting to actually do this properly and like, you know, you have the things like the dopamine for the drive, the serotonin for the happiness, the Gavin, the glycine is kind of the relaxation aspect.

How does one's emotional health or their kind of their state of their current mind affect how neurotransmitters are both created and actually utilized?

Oh my goodness, I think it's a key factor in all of that. So when people come to me and they're having anxiety, depression, of course, they're negative.

They're not having the right thought processes. They're not talking nice to themselves or to other people. So there's a whole host of that. And I really think that depletes your neurotransmitters.

So which comes first, the chicken or the egg, the thought or the depletion? I don't know. Um, but I think, you know, you get on this hamster wheel and you can't get off until you fix that depletion.

And then once, once your glass is no longer half empty, you know, it's half full and it starts to overflow. You know, then that helps your thought processes and then it helps you stay healthier.

Okay. And, uh, how are you testing your actual, um, uh, the actual neurotransmitters, amino acids you're doing through urine, are you doing through blood, saliva?

No, I'm just actually using the questionnaire. So I have a questionnaire. I gave everybody divided in that five categories and it works really well. It's super easy, fast.

I can do it in the appointment and we don't have to wait for results. Oh, I love that. It kind of goes along with the whole thing of treat the patient, not the lab.

You know what I mean? Yeah, exactly. Labs are fantastic. I use them all the time and I find that this just works better. I find a lot of times like the urine, There'll be like an excess of serotonin, but their symptoms are all deficient serotonin, you know?

And so when we sublingual the L-tryptophan, we get really great results. But if we just went off the lab, they would have said, oh, we can't do L-tryptophan because this is going to send you over the edge and make you more anxious.

And I just haven't found that to be true. Oh, yeah. I love that. Again, so how long have you been focusing on the amino acid brain connection for? Oh, for a couple of decades.

I love that couple of decades. I started using for myself in like 1996. And then I was like, I was giving amino acids out like candy to everybody I knew.

So like, Oh my gosh, you won't cause it saved my life. So I was so passionate about it. And finally I went back to school. Yeah. Finally went back to school and became an official practitioner, but I've got, I've been doing this for myself and everybody since like 1996. So.

Oh, that's awesome. Very, very cool. Good for you. Good for you. It's a great, I guess you would say because I think nobody really gives protein or amino acids.

Everybody's worried about carbohydrates and fat. Yeah, protein is great. Just eat some chicken, you'll be good. But the amount of mechanisms and the amount of things that protein does in the body, I mean, it's almost unfathomable.

Fasting, timing, and mindset

I mean, how many things it actually does? Enzymatic reactions, I mean, you know. Yeah, you can't digest, like you just said, enzymes, hormones. I mean, all of those depend on amino acids and, you know, protein.

No, yeah, for sure. Now, have you seen a specific population, like if you see vegans and vegetarians versus people who eat regularly versus the elderly?

I mean, do you see any correlation with that? I mean, obviously everybody's different, but when it comes to like, you know, obviously vegan and vegetarianism is going to have a much different, I guess you would say, amino acid profile, at least I would theorize internally than somebody like myself who's out there eating meat for, you know, breakfast, lunch and dinner.

Yeah. So if somebody comes to see me and, you know, people might get mad about this, but you can't stay vegan if you come to see me. Like if we're going to work on, you know, anxiety, depression, you know, mental health issues, you can't stay vegan.

Like we have to actually have some animal protein, you know, and we can work around it, whether it's yogurt or eggs or whatever. Um, and I've only had a couple of people over the years like, well, then I can't work with you, but.

I just don't see good results unless people implement animal protein into their diet in the mental health world. Oh, for sure. I mean, it's a true complete protein.

A lot of people don't know the difference between an incomplete protein, which is all plant protein, and then you have basically a good old steak where you get all the goodness all in one.

You know what I mean? Right. Exactly. So it's crazy because we'll see here because I'm huge in overall testing for everything. And whenever somebody comes in who's a vegan or vegetarian, I mean, obviously there's a lot of hormonal issues.

But when you sit there and see how many people come in that are pre-diabetic now, just because they've switched those strictly, they're like, how am I pre-diabetic?

I'm like, you do nothing but eat sugar. I don't care if it's broccoli or this, it's a sugar-based diet. And when you see people actually start to understand what those type of diets are, then it's unique.

Like, you know, you start to teach and, you know, give a man a fish or, you know, teach them the fish. And you can only imagine like what that does in the biochemistry, you know, internally, I think it's fascinating that such a diet has caught such fire that is just, there's so many complications from it, not only from a protein thing, but when it comes to protein balances, it's scary in a way, right?

Yeah, it is. And they're B vitamin deficient. So if you don't have enough B vitamins, you can't make your stomach acid. You're deficient in zinc because you're not eating enough meat.

So just your basic digestive functions, I see with vegan and vegetarians, is just like nothing. And you can't repair. You have to have all of the amino acids in order to repair from head to toe.

That's basic science. You know what I mean? That's just basic science. There's no way around it. Now, did you couple your therapies with anything else?

Are you giving them different types of minerals, vitamins, anything like that, or is it just straight amino acids? No, no, no. We incorporate minerals, vitamins, herbs, just depend.

I do a lot of detox once the body's ready for that. So yeah, we incorporate a lot of fatty acids, all the foundational stuff, and then we see what's left over.

And I'll do testing. I'll do Dutch testing, blood work, all those kind of things. All right, have you found any unique correlations between various hormones or things like that?

Do you say, oh, this person's deficient in testosterone, their dopamine is going to be in the toilet or any kind of unique little caveats over your decades of doing this?

You know, sometimes I'm like, oh, I think, and then I'm like, no, not really, no. A real hodgepodge, who knows? Yeah, it's just kind of a hodgepodge. I know people say, oh, if you're deficient in serotonin, your estrogen's really low.

I don't see that all the time. Can it correlate? Certainly can. Or if your progesterone is super high, you should have plenty of GABA. I don't see that.

So no, it really haven't.

Diet, veganism, and nutrient deficiencies

Yeah, I'm glad you brought up GABA. I've seen a lot of people kind of bastardizing GABA, you know, online and whatnot saying there's too many people that are just overdosing on it.

Did you find that to be valid or is that kind of just like, you know, people see GABA, they think that turns you off and you're going to go to sleep easy yet if you have too much GABA and not enough lysine or this that or the other, do you think there's no problem with that or?

Yeah, I don't think there's any issue with GABA for the most part. I mean, that's why we do the sublingual testing. Do you respond to it or do you not?

You know, does it give you a negative effect or is it positive? Some people, you know, GABA, yeah, it's relaxing. It helps your shoulders. It really helps with the physical tenseness and those kind of things.

Some people, it just helps their brain be really, really sharp. So it doesn't come off as relaxing. It comes off as like really focusing for people. So there's lots of difference.

Why would that be? I'm curious now because that's counterintuitive of what GABA is. I'm curious. Do you have any theories on that? I think their body is just so tense and so wound up, but then you finally be able to unwind it with GABA and they can actually focus.

It like calms the noise down and so then they can be present in the situation. Decreases the static in a way, right? I was actually right right right in a paper about because there's some things kind of kind of similarly that THC for some people was an actual memory booster and then for other people And it's funny if you take a look at what THC

and Adderall together do, you know Adderall can slow us fast mind But if there's too much static, you know, if you put THC with it it was kind of this very unique paper that I was actually looking and kind of Do you find any combinations of things?

So somebody's on Adderall, THC, avid drinker, cocaine, anything like that. Do you find correlations between various drug usage and actual neurotransmitter depletion or anything like that?

Yeah, for sure. I mean, like if you're on cocaine and stuff, it's probably a catecholamine issue, you know, a depletion there. If you're kind of more going towards, you know, THC, smoking some pot, that kind of stuff, that's serotonin, GABA.

So yeah, there's some correlation there. Correlation. Okay. Did you ever counsel people to try and stop things or maybe even start things occasionally, depending on how they're feeling or what they're doing?

Even as far as drugs go or? I mean, anything. I mean, anything. Discussions. Yeah. I don't do a lot of THC. So, you know, unless somebody comes to me on it, but the goal usually then is to get them off of it so that we, you know, use the amino acids instead.

So there's no addictive substance there. So that's usually my goal is to get people off of whatever is addictive for them. I love that. Okay. Cool. Cool.

Cool. And where do you source your, your amino acids from? Um, so a couple of different companies, um, honest to goodness now brand is great for amino acids.

I'll use biotics. I'll use, you know, other brands as well. Um, I love lid key brand for all tryptophan and the DPA. Okay, super cool. Very cool. Okay.

And I'm curious. So how does like, if you just like met me on the street, was there some type of thing that I would, whether it's forgetfulness, whether it's just not paying attention, can you tell somebody who is in a neurotransmitter depleted type state?

I'm just by how they are how they act? I mean, I'm curious. Yeah, it's really funny. Party trick, you know, like a party trick. Yeah. I mean, my daughter will be with her.

She's like, Oh, my gosh, mom, that person needs some gaba. You know, Oh, I love that. It's so true. You're talking to somebody and they're just like super intense.

They're kind of looming in into your face, you know, all that kind of stuff. You need some GABA. Can I, can I give you some GABA? It's like, I really want to carry some in my bag all the time.

Or to somebody who's just, just naturally negative. And you're like, Oh my gosh, this person is draining. They really need some tryptophan, you know, let's boost their serotonin.

Hormones, GABA, and drug correlations

Um, so yeah, there's definitely some pretty key indicators. Um, kids that fidget a lot or even adults, you know, they just can't sit still. You know, we've got some catecholamine issues going on.

Do you actually deal a lot with kids with either ADHD, autism, things like that? Yeah, I do. And usually, what's kind of the main neurotransmitter in that situation?

Could it be like a glycine GABA to kind of slow down? Yeah, GABA. Usually, we do a lot of tyrosine with them. Yeah, I have this one little kid. He came in.

Usually, like we talked about before, like tyrosine will kind of boost your mood, gives you a little uplift and those kind

of things. But this little kid was so wound up that when we gave him tyrosine, he like literally went to sleep.

Cause it just like took away the noise, unwound him and he just like, so his mom actually gives it to him at night and he sleeps through the night and he hadn't slept through the night in eight years.

What? Yeah. I know it was just crazy. Yeah. Cause if you did blood work on him or urine, you probably wouldn't have gotten those results. Um, but we just tested it on him and he, he's like, oh my, he told me he's like, I feel calm.

That's what he said. I feel calm. Okay. Great. How old was he? He was seven. Oh, wow. No filter either. Boom, I feel calm. I feel calm. Yeah. All right.

Cool, cool, cool. So most of what you do is sublingual then, not oral, not injectable, nothing like that? No. I mean, we test them sublingual and then when they actually take them, you know, they take them orally.

Orally. Okay. So, Pearson, if you tested them sublingually, why would you then switch to an oral? Is it just preference or? Just because they taste so bad.

I mean, the amino acids, most of them, they just taste bitter. They taste like plastic. You just wouldn't have very high compliance. Exactly. That makes complete sense then, for sure.

It's unique though, because I do a lot of IV therapy at my clinic. So, I mean, like all kinds of really unique things. We're doing polyphenols. We're doing all kinds of unique things like ALA and high doses.

Oh, fun. Yeah. ever could be. And I remember back in the day, they've taken them off the market, they used to have glycine, you could do actually IV, they had GABA, you could do it.

It was pretty intense, actually. And I must say the glycine was probably my favorite. What's your thoughts on glycine? You haven't mentioned it too much today.

Oh, I like glycine and I think it's great. It's great for so many things in the body. It's really calming to the body. It's great for muscle building, brain health, all those things.

So I just don't find that it shifts mood very much. And since I focus on mood a lot, I generally don't use a lot of glycine, but I love it. It's great.

Okay. No, that's unique. So it's more of a, you'd say more of a weaker one because it is not really moving the mood or? Yeah, it just doesn't move the mood as much.

Okay, what about things like, um, uh, so, so obviously dopamine serotonin are the ones that we have here that we also test as well, uh, that we always find.

I usually find people who have bad sleep have always basically burned out their serotonin or dopamine. It's always at the wrong end. Horribly on that one.

And I've seen that once we try to correct the actual, um, uh, the, uh, the adrenal fatigue that's always kind of goes hand in hand with that, even though, I mean, we do supplement a lot with that.

We actually have a product here that's specifically, you know, all the essential amino acids. We found that once you fix the actual adrenal fatigue, you start to see better neurotransmitter production, kind of as a byproduct.

So when it comes to, when you're doing this, how much of what you do is actually counseling when it comes to diet, you know, emotional health, sleep, sexual, you know, vigor, all that kind of stuff.

How much does lifestyle factor into how you actually help people correct their actual deficiencies? Oh, lifestyle is key. Like lifestyle is totally key in all of this.

So we're going to work on the diet, we're going to work on exercise, we're going to work on sunshine, grounding, you know, your thought processes, all those things, because you have to shift those in order to heal.

Yes. Like you said, I know the whole mindset aspect, I think is super important. You can't save somebody who doesn't want to be saved.

Kids, testing methods, and glycine

There's a lot of people coming to want a magic border. They refuse to change their diet or whatever it could be. And it's funny. I see that here because you know, we were an expensive clinic and you know, we're the heart of South Beach and all that kind of stuff.

And when you see people come in that are just like, I just here's, here's money and fix me. It never works. You know what I mean? It never, never works.

So I'm guessing it's the same with you. You have to have that, that need, that want that manifestation. to really want to get better, to actually have these neurotransmitters, these amino acids and everything do what they're actually exposed to, correct?

Yeah, a thousand percent. Yeah, no, it's unique. And again, every patient's different, like you said, you know, and it's, you know, people come in, they're so wound up.

And all of a sudden, you take a look at their, their labs are just like, holy cow, I really got that wrong, didn't I? You know what I mean? So yeah, it's definitely different.

The whole neurotransmitter market is something that you don't really hear too awful much about, especially, we just got back from the A4M in Vegas. I don't know, did you go to that or?

Yeah, I was there. Yeah, beautiful, right? It was crazy. I mean, it was almost too much. It was too much of a basically an overload, I guess you'd say.

Definitely an overload. Yeah, you didn't really hear too much about neurotransmitters, which was surprising. The years prior to that, there were certain people coming in, like, you know, here and there.

This year was all kinds of NAD and this, that and the other, which, you know, has been beating, beating to death. But it was just kind of unique. Do you see the whole neurotransmitter market making kind of a swing?

Because everything comes in waves. Methylene blue was last year, then this, that, the other. Did you see the whole neurotransmitter kind of coming back and making this gigantic push in the industry again?

I honestly think it might take a little bit yet because, you know, then they had the studies that come out that said, you know, mental health is not all about neurotransmitters.

So then people stopped talking about neurotransmitters, but you can't forget the neurotransmitters. They're still really, really important. They're so important.

I mean, like, so important. So, and they play a key role in, you know, You know, people are talking about, it's not all about serotonin deficiency. No, it's about serotonin regulation.

So if you don't have the tools, you don't have the tools to make the correct amount of serotonin, then you still have to help people in that manner. Right.

So it's no, it's not all about neurotransmitters, but it is still all about the regulation of them. If you want to be a happy, healthy person. No, for sure.

What's your opinion of SSRIs? I always like people who are in this industry and I always like to ask that question, especially when you focus on it. They come in and they stop your body's own natural process of processing serotonin and norepinephrine and who knows what else.

We don't have enough studies on it or they've been blocked from us seeing these studies. It shuts down your reuptake. it stops the recycling. This is what our body is supposed to naturally do.

And so I see so many people who are so sick from being on the SSRIs. I mean, they came out in the late 80s, early 90s, and I see people who have been on them since then.

Do you know how messed up they are? My goodness, I can only imagine. Do you know how messed up their gut is? I mean, it's like taking an antibiotic since 1990. I mean, it's destroyed their microbiome.

great correlation, great correlation. You couldn't be more right on that one. And it's scary because people come out like tip tacks, you know, everything's that if you're depressed, it's always serotonin.

It could be an excess of this, it could be deficiency of this. And then I mean, that's just the neurotransmitters, heavy metals, the nutrient deficiency, blah, blah, blah, blah, blah.

So it is definitely scary that you know, physicians are taught, you know, first line, just give them an SSRI, they'll be fine in two weeks, if not change the SSRI.

It's just like, what? I mean, it's crazy.

Lifestyle medicine, SSRIs, and withdrawal

It is crazy. And I mean, so especially the SSRI usage in women is about twice or more than men. And you know, we have a hormone issues going on. We've got kid issues, you know, the SSRI use of women my age around 50 is just skyrocketing.

And then I see all this ADHD medication as well. When you're 40 to 60, Your parents are changing, your kids are leaving, your hormones are changing. Maybe we should check out these things.

And people are just being left on these medications. And now we're seeing all this protracted withdrawal. We're seeing so many significant issues from trying to get people off of these medications.

And it just breaks my heart because there's so much damage that's been done, Ivan. Yeah, almost irreversible at that point. You know what I mean? It's crazy.

I wish, this is why I thank you for letting me on your podcast, because I have no studies to support that, because of course they've never studied that.

But I can just say, in my own practice, I have never seen protracted withdrawal with somebody who uses amino acid therapy and then gets off their medication.

No, it's, again, like, you're basically, it's almost tight trading up and basically tight trading down, which is what we do with hormones. We do that with everything in this industry.

So to see that it's not done… Why doesn't that make sense? It makes too much sense. And the one thing that's not common anymore is common sense, which is just sad.

You know what I mean? It's terrifying. It's terrifying. But now I have a question. I always ask everybody who comes on two questions at the end of the podcast.

First one is, if you are a patient who's looking to walk into this industry when it comes to the wellness industry, and

you have some type of mental issue or an emotional issue, whatever it could be, What is your best advice when it comes to not only finding a practitioner, but really sussing out the correct practitioner for you when it comes to actually going from the whole traditional based, you know, pill, pill, pill, pill market to like more precision root cause medicine, which is what you, uh, which is what you actually prescribe.

Yeah. Um, I mean, just, just find a person that believes in head to toe, like that everything is actually connected. So, um, if, if somebody's like, oh, we're only going to work on the gut.

Yeah, that's not the person for you, right? I mean, you have to have somebody that can assess how does everything function from head to toe. I love that.

And again, I always tell people the more specialized a physician or a healthcare practitioner or somebody in the health field gets, the stupider they get.

You know what I mean? Like, it's like this view, it's like, no, look at it from 33,000 feet and see everything, which nobody wants to do anymore. So that's a super, super great answer to that question.

So thank you for that. Secondly, if you're a practitioner, a physician, a person who's just enthusiastic about this, it doesn't matter who you are, if you're in this industry or trying to get into this industry, what's the best advice you can give to them to not only get into this industry, but also stay in the industry at a very high clip, like 20 years, you know what I mean?

So what is your, I guess, your tips, your tricks to people who are looking to do kind of emulate what you were doing? Right. Well, you know, find me. You could take my course.

That would be great. Oh, okay. Little little plug in there. I love it Right, but just stick to what you love like stay in your lane I Mean that's all I've done is amino acids you like well, don't you do peptides?

No, I think peptides are great That's not my lane. My lane is amino acid therapy that I work with mental health I help women with hormones and we do lots of foundational stuff.

Choosing the right practitioner and closing

I mean, that's what I do That's what I've been doing and I just keep doing it on a bigger and bigger scale. So don't jump ship If you love peptides, great, stick with peptides, but don't jump to MTHFR and then don't jump to this thing.

Just stay and tweak it as society changes a little bit. Jack of many trades versus a master of none. That's the whole thing there. Okay, good. I like that.

Very, very good. Well, I got to say, it's been an absolute pleasure having you on. Amino acids are one of my favorite things. I lived and breathed in my entire I guess you say athletic career.

So what you're doing, I think, is fantastic, especially for the powerful women that you're focusing on, too. I think that's awesome. But again, thank you so much for coming on.

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