Women’s Guide To Thyroid Health: Restoring Hormonal Balance Naturally Transcript

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Introduction to the summit and Dr. Gersh

The immune system is modified in a bad way in women with PCOS to become more reactive or more inflammatory. So once again, the perfect storm for creating autoimmunity, The most common being Hashimoto's thyroiditis.

so women PCOs must be tested and they're not. They're really not routinely tested for this condition and the incidence is enormously higher. This is Dr.

Talks. Hello everyone, welcome back to Reversing Hashimoto's and Thyroid Disorder Summit. I'm your show host Dr. Anshul Gupta and I am really excited for today's discussion because we are introducing a great speaker who has years and years of experience in integrative medicine and functional medicine, and has helped countless number of patients, you know, heal their Hashimotos and hormonal imbalances.

So this today is all about hormones so please stick together but let me introduce my speaker first before we delve into the discussion. So Dr. Gersh is a multi award-winning physician with dual board certifications in OB-GYN and integrative medicine.

She's a founder and director of the Integrative Medical Group of Irvine, a practice that provides comprehensive health care for women by combining the best evidence-based therapies from conventional naturopathic and holistic medicine.

For 12 years, she taught OBGYN at Keck USC School of Medicine as an assistant clinical professor, and now she serves as affiliate faculty member at the Fellowship in Integrated Medicine through the University of Arizona School of Medicine.

She's a prophetic writer and lecturer who speaks worldwide on women's health and regularly publishes in peer-reviewed medical journals. she's the best-selling author of the PCOS SOS series and her latest book Menopause 50 Things You Need to Know.

Dr. Gersh, welcome over here. Well, I'm thrilled to be joining you for your wonderful summit. Absolutely. I really admire the work that you have been doing.

The majority of this work is science based and research based. And a lot of us are labeled that things that we are doing do not have any research backing.

So people like you are publishing more and more research studies of how we can handle Hashimoto's, PCOS, menopause in a more natural way. Thank you for doing that.

And just before the interview, you actually came to know that, yourself had Hashimoto's disease. So why don't we start with your story, your personal journey in dealing with health struggles.

Well, like so many physicians, our interests often lay in sort of a coherence with what we have dealing with in terms of ourselves or our family members.

Dr. Gershu2019s personal Hashimotou2019s and PCOS journey

For myself, I ultimately self-diagnosed my PCOS condition and then had to look for my own holistic and natural ways to deal with it because nobody was there to help me.

And everyone just said, go on birth control pills, which did not agree with me, even though at that point I didn't realize all the negative things associated with them, particularly for women with PCOS.

But I know my body did like them when I put them into my And then I found out years later that I actually had Hashimoto's. And the way that came about was I have a cousin, a first cousin who was diagnosed with very severe celiac disease, which is gluten autoimmunity.

And so I learned a lot more about that and then recognize that if you have a first or second degree relative with that condition, then those relatives should be tested.

And I was a second-degree relative. So I said, okay, I'll just get my gluten antibodies tested through the standard Celiac panel through Quest. Oh, my thyroid, rather I started with my, gluten, antibodies, transglutaminases were way elevated.

So I realized that I was on the road to potentially developing celiac disease. I immediately went gluten-free and watched over time as my antibodies to the gluten particles went away.

That's what's supposed to happen. If you go gluten free, then the antibodies will disappear from your system because your immune system isn't being stimulated by that antigen.

Well, then I learned about the connection to Hashimoto's. So I said, okay, I feel fine, but I'm going to test my thyroid antibodies because nobody ever tested them.

That wasn't and still isn't typically standard of care, which is, of course, not what I agree with. I had my antibodies tested and they were very high.

They were over a thousand. for both my anti-TPO and my thyroglobulin antibodies. Like, oh no, I have Hashimoto's. And I saw that my thyroid hormone levels were in the very bottom of the reference range.

So I watched it and it didn't take long before I fell below the Reference Range. It's like, okay, i need to take matters into my own hands. I had to go on a little bit of thyroid supplementation.

And then I went out through the functional medicine, integrative medicine arena to look for solutions to reverse my Hashimoto's. And I not only had been gluten-free, but I then went on a very strict plant-based diet.

I eliminated every processed food. All the things that I talk about in my books. Okay. You know, all the lifestyle things, because you know many doctors don't quite live the hype that they put out.

They're not always the role models for what they tell their patients to do. But I became the roll model for when I actually tell my patients do and advise all the time.

And yes, I'm very proud to announce that not only did I get rid of my gluten antibodies, but my thyroid antibodies completely resolved as well. So it's really apparent that these are conditions that, especially in the earlier stages, they are actually treatable and even reversible.

So that's why I was so thrilled to be on your summit here, because this is information that is not getting out. No one is talking about screening. no one in conventional world is taking about reversal.

So that's really a very key issue. And in terms of women, and we'll talk about more, with polycystic ovary syndrome, the most common endocrine disorder of reproductive age women.

The most cause of infertility for women is very associated with a higher incidence, much higher than in the general population, of having autoimmune thyroid conditions.

Absolutely. First of all, I just want listeners to again pay attention that there is a possibility of reversing your

disease. Remember, like you know, her antibody levels are more than thousand and she was able to come back to normal levels.

Yes, you have to put in the effort and do the right things to make it happen, but it is the possibility. So very important like you know points you put up that you first of all testing that most people are not getting their antibody levels checked.

They missed the diagnosis. The diagnosis is delayed for a lot of reasons and then in the end they are told that nothing can be done to lower these antibodies.

So these are issues which are still happening with the regular doctors and even endocrine doctors. So I'm glad that you're talking about females today so that they can help to lower these antibodies.

But first, let's talk about this connection between PCOS and Hashimoto's because you said that females with PCOs has higher chances of getting Hashimoto's.

What is the connection? Well, condition PCOS, polycystic ovary syndrome, is not well understood. So just as a quick overview, Polycysteic Ovary Syndrome is really a condition of estradiol, that's the estrogen made by the ovaries, insufficiency, and testosterone excess.

What's going on is in the ovaries, you have the production of certain hormones. The most key one is estradiol. Now the preliminary step to producing estrdiol is for the ovaries to make testosterone.

So all estridiol, known as E2, the estrogen of the overies, comes from, derived from testosterone, So there are certain cells in the ovary that make testosterone.

Then it goes down like the assembly line and to a different group of cells.

Why PCOS increases Hashimotou2019s risk

And through the action of an enzyme called aromatase, testosterone is converted into estradiol. We now know that women with PCOS genetically, so it's probably inherited kind of a trait, have a little insufficiency or less ability to activate that enzyme to convert the testosterone into estradiol.

But fast forward to now, to the present, that little defect, which was probably of no great significance and probably a benefit in the past by slightly higher levels of testosterone, making women stronger and bolder and braver and maybe slightly, but just slightly less fertile.

So they had a little built in birth control because pregnancy is a dangerous state, especially thousands of years ago. But now, because of our change in our diet, our lifestyle, and those what we call ubiquitous endocrine disruptors, chemicals that interfere with the normal function of hormones, in this case, the most researched one is bisphenol A, BPA, that is in everybody.

It's a question of how much. And it's what's in hard plastics, cash register receipts, can liners. It used to be in baby bottles, but it is in all the hard plastic.

And everyone has some in them, it just a question of how much. in the fetus. So the levels in mother are significantly less than the level in fetuses.

It's a real problem because that's what during fetal hood is when the endocrine system is developing. Women with PCOS may have a little bit lesser ability to eliminate.

Their elimination pathways may be not as proficient as other women, and they bioaccumulate more of these endocrine disruptors. And so what happens is that women with PCOS have an even greater difficulty of converting testosterone into estradiol, which relates to the hormones called the gonadotropins that come from the pituitary.

So they tend to have high levels of luteinizing hormone. That's the puttuatory hormone based on the instructions from brain that triggers the production of testosterone, but they have too little of follicle stimulating hormone, FSH, Which triggers a conversion from testosterone to estridiol.

So the brain says, which has sensors, hey, ovaries make more estradiol. The preliminary step is making more testosterone. So it's like an assembly line where you have a little glitch here.

You end up with too much testosterone and not enough estridiol, well, the testosterone creates its own set of havoc in the body, sit on the sidelines for the moment in terms of Hashimoto's.

But it turns out that the lower levels of estradiol lead to a whole host of metabolic dysfunctions in the body involving the immune system. Every immune cell in body has estrogen receptors.

So the immune system becomes more pro-inflammatory because estradiol controls the on and the off switch for inflammation. So you want to have inflammation if you're in an injury accident or you have an infection like pathogens, viruses, bacteria, fungi coming into your body, the inflammatory response is your immune system acting to protect you.

But when you don't have the right amount of estradiol, which is what women with PCOS are having to deal with, then the immune systems doesn't the have right on-off switch and it goes into a more on switch pro-inflammatory.

And that leads to a lot of issues increasing the risk of overactivity and autoimmune development. Now, in addition, back in 2015, the first research came out of China that showed that women with PCOS have an altered gut microbiome.

And I bet that's been touched on because the gut micro biome is critical for affecting the immune system. because 70 or so or more percent of the immune system lies around the intestine, around gut.

They call that the gut-associated lymphoid tissue, the GALT. So when you have an impaired gut barrier because of not having the right bacteria, which we call dysbiosis, you don't have the production of this protective mucus coating that protects the lining cells.

So toxins from the gut get right up to those lining cells, degrading the little fibers that hold these cells together. They drift apart, which we then call leaky gut, and these toxins which include viruses and bacteria get into the body itself where the immune system is sitting.

And theimmune cells react with, whoa, like lots of inflammatory cytokines creating total body inflammation and also producing antibodies to the bacteria and virus getting in as if it's a chronic infection.

So it is the same kind of a thing and over time those antibodies can cross react with our own tissue, the most common being thyroid because of similarities in the nuclear structure like the nucleotides because all living things on the planet have the underlying structures that they build cells and DNA and RNA from.

So that's called molecular mimicry. Women with PCOS, they inherently, because of not having enough estradiol, we know that estrogen Hormones, including testosterone, have a big impact on the gut microbiome.

So these hormone imbalances of women with PCOS lead to this problem, which is exacerbated by what's called the standard American diet. All the chemicals in our food and the lack of proper fiber and nutrients.

It's like the perfect storm. for getting this impaired gut barrier, dysbiosis, leaky gut. And then the immune system is modified in a bad way in women with PCOS to become more reactive or more inflammatory.

So you have the, once again, the perfect storm for creating autoimmunity. The most common being Hashimoto's thyroiditis. So women with PCOS must be tested and they're not.

They're really not routinely tested for this condition and the incidence is enormously higher. And then on top of that, we have the issues that we could talk about regarding the role of estradiol on thyroid production.

because antithyroid gland has estrogen receptors and also thyroid hormone receptors, which are not working properly in an absence of adequate amounts of estradiol.

And then these endocrine disruptors that are so ubiquitous can not only affect estrogen, but also thyroids. It's like You know, like everything that can potentially go wrong seems to potentially wrong in women with PCOS to create low thyroid production, thyroid receptor malfunction, and autoimmunity.

So it's a huge deal for women PCOs to have this evaluated so you can identify it. And then I always say the first step in solving a problem is to identify and understand the problem.

And that's where we must start with our patients with PCOS. Absolutely. I mean, most people will not even understand, the pathophysiology of what PCOs is and what is the underlying issue, because everybody's talking about excess testosterone, but also estradiol deficiency is a huge, huge problem, so thank you for clearing that.

and also explaining it so beautifully of how the estradiol is linked to thyroid autoimmunity as well as thyroid hormone production. So it hopefully gives a good overview to people of these two conditions, PCOS and thyroid is interconnected, and how everything in your body, the gut microbiome, gut permeability, like the xenoestrogens, as the food that you eat, how it all comes together to impact the PCOS and the Hashimoto's.

So as you were talking about the testing, so you said, what you felt was that any PCO patients should also be tested for thyroid autoimmunity through the antibodies.

Is that correct? Absolutely. Absolutely it's, you can't know unless you test. Absolutely, you know, that is so correct because a lot of people when we talk about thyroid testing and when they go to the providers, they will only get a TSH maximum or maybe a t3 and t4.

Nobody will ever check the antibodies. So make sure what Dr. Gersh is talking about is actually thyroid antibodies that you check those, obviously along with your hormonal panels so that, in early stages, if you have Hashimoto's or not, because as she was talking, the earlier you get to know the easier it is to reverse it, right?

Absolutely. And another really key thing with everyone, in particular with women with PCOS, because they have alterations in their gut microbiome.

Testing thyroid antibodies and full thyroid labs

That study out of China was replicated multiple times over, so there's no dispute about this. But because, they can have problems as well with gut motility, it turns out that the autonomic nervous system, that controls all the things in our body that we never think about, which includes things like our temperature, our pulse, whether our arteries are contracted or relaxed, and our motility of our gut called the enteric nervous system.

The neurological system of the intestinal tract is regulated by the autonomic system, which is actually basically regulated by estradiol, the neurotransmitters of the autonomic nervous system are really modulated or controlled in many ways by estrodial.

So women with PCOS have problems with proper regulation of their autonomia nervous systems which translates into changes in gut motility which can cause things like SIBO, CFO, you know, small intestinal bacterial overgrowth of bacteria or fungi or just irritable bowel syndrome.

This is all documented that women have these gut problems when much higher incidence with PCOS and that can translate into problems with digestion and absorption of vital nutrients that are required for both the production of thyroid hormone and the conversion of T4 to its active form So if you have these nutritional insufficiencies, then on top of everything else having PCOS, you can also have an inability to optimally produce thyroid hormone because

you don't have all the building blocks to make thyroid hormones or convert it from T4 to T3.

So these are added problems for women with PCOs. In addition to testing for the thyroid antibodies, You don't wanna just test for TSH, thyroid stimulating hormone.

You want to test free T4, which is like the storage form of thyroid, and then the active form, the free t3, because the feedback loop to the brain for the TSh is t4 not t three.

So you can have actually adequate amounts of t four and have a so-called normal Tsh and have suboptimal or even really low amounts of three. So you won't know.

Once again, you can't this intuitively. You have to test. And so that's, these are very, very important things. In addition, we know that there's a very.

Important link between stress and thyroid and that when you have high levels of stress, T4 to T3 less because the body goes into that stress state, which is like prepare for famine.

That is only one stress date. And that involves reducing your metabolism, your rate of producing energy. which is like burning fat. The body wants to be thrifty and conserve energy, assuming you're going into a famine.

So if you have a lot of stress, it can lower your conversion of T4 to T3. Women with PCOS because of their autonomic dysregulation, tend to have more activation of the stress part of autonomia nervous system, called the sympathetic.

So I say, S is not about sympathy, like, oh, I'm so sympathetic, it's about stress. Think of sympathetic S for stress, And that increases the adrenergic part of the stress response, which is adrenal, adranergy adrenal.

So you produce more cortisol, and then chronically high cortisol which has now been studied and documented in women with PCOS. leads to a reduction of the conversion of T4 and also aggravates leaky gut as well.

Lifestyle and diet strategies to reverse PCOS

So you can see how complex this really is and how there are a multitude of reasons why women with PCOS will have suboptimal thyroid levels, production, function, and autoimmunity.

Absolutely, so there is no doubt and I think anybody's mind right now that these two conditions are connected, the PCOS and thyroid and the way forward or getting better is actually addressing both of them because you know they are similar root causes or things which are affecting each other.

So I think now people want to know what they can do because you know it's such a complex situation and condition and obviously they want feel better. So obviously sometimes they need help with a practitioner like you or me to kind of get out of this whole mess.

But what can people do right now that can at least get them on this healing journey of reversing all of these issues for them? Well, definitely there's a lot that women can do for themselves.

The first thing, you know, You've got to start somewhere. And there are so many ways that you can start. But I usually start, which is where many people in our profession start is the gut, right?

So we're going to work on trying to restore the. Gut integrity and the microbiome of the guts by nurturing and feeding the, gut microbiomes. So it turns out.

that the food that these microbes love is fiber. And they also love polyphenols. That's like the special sauce that comes in different plants. They actually dance with each other and they work with other because the gut microbiome It's like the biggest factory system ever discovered that the gut microbes actually make

neurotransmitters and hormones and vitamins, but they can't do it unless they're properly fed and nurtured.

So I recommend my PCOS patients, if they are willing, to go on a high plant-based vegan diet for about six months. I'm not into long-term vegan, but for six months because they do not metabolize animal protein properly and they can make actual carcinogens and toxins to the cardiovascular system like TMAO and other bad nitrogen products.

So it's best to either limit to like no more than three ounces a day of a healthy type of plant, a rather animal protein, or best just for six months to go vegan.

And lots of plants, all kinds of plans, like we talk about the colors of the rainbow, because every kind of color of a vegetable or fruit has different magical polyphenols, many of which are phytoestrogens.

It turns out that many the so-called superfoods are really phytoestrogen foods and high fiber foods. So you have, like from the legume family, you'll have isoflavones, which are actually fertility polyphenols.

We know that when you organic soy, and soy has been so maligned, but when have processed soy it's bad, Whole organic edamame or tofu or miso or tempeh, those are actually fertility foods.

And they have a lot of these isoflavones, but so do all the other beans. If you look at one bean that's great for the gut microbiome, it's like garbanzo beans!

also known as chickpeas, they are fantastic. So you have that whole group with lentils, which are wonderful. I hope everyone has a favorite recipe for like lentil soup.

It's so delicious. Try these foods and if you a wrong gut microbiome and you say they make you gassy, go little by little because you'll have to reconfigure your gut microbial population.

And then look at seeds like seeds and nuts. They have what are called lignans. The most famous is flaxseeds. And in fact, taking two tablespoons of flex seeds a day and grinding it up and mixing it in with like cereals or like, you know, ancient whole grains, which also can have the lignans and you grind it upwards.

I like to sprinkle it on a salad. These are actually also known to be fertility foods. It's actually published articles that adding faxy. improves fertility.

These are full of lignans, these phytoestrogens. And then you have various fruits and vegetables like apples, onions, and garlic have quercetin, which stabilizes inflammatory immune cells like mast cells.

You have red grapes, the still being family. Those are like resveratrol. And there's a lot of data that resveratrol is really wonderful for women with PCOS.

It can actually lower testosterone. it's phytoestrogen. And in addition, you have pomegranates, which is a source of illagic acid, Which can be turned in in some people, but not too many.

They don't have the right gut microbiome into urolithin A. which is a mitochondrial rejuvenator. And that's very critical because women with PCOS, their mitochondria, that what controls the production of energy like burning fat.

80% of women PCOs are severely overweight and obese because they're not good at burning that. That's a function of the mitochondrion. Also under the purview of estradiol.

Urolithin A, which is a phytoestrogen, can rejuvenate and enable mitochondria to work better. So we can use food as medicine for women with PCOS. Eating all these foods and eating more in the morning.

It turns out that when you have all this inflammation in your body, it increases insulin resistance. And most women, with do have too high of an insulin and they cannot regulate their glucose level properly.

That's called insulin resistance. In fact, women with PCOS by age 40 have seven times the incidence of diabetes as the average population because of this inflammation-driving insulin-resistance.

And as well, estradiol is critical for the glucose transport system in the body. So we have additional complicated kinds of factors that come into play.

So it's really important to try to eat most of the food for women with PCOS in the first half of day because everything in their body is on the clock.

There's circadian rhythm and our immune system is different in morning, our motility of our gut is in different morning. Our insulin resistance is difference.

In terms of food intake, motility and gut function is better, digestion is in the first half of the day, and our insulin works better in our first day.

So you'll have less rises of insulin and of glucose. Insulin, which is essential for life, is also the hormone that is behind producing and storing fat.

You cannot multitask, you cannot lose weight. gain weight at the same time. So if you have too high of an insulin, you will be storing and producing fat, not burning fat.

You can't easily lose weight, at all, when you are high insulin. There was a study done in Israel, a number of years ago, with women with PCOS. Where, and this was a study, so I know it's really hard to do this, but in that study they had the women eat two thirds of their food for like a late breakfast and one third for a like late lunch or early dinner, okay?

And in just a very few weeks, their testosterone dropped by 50%, their insulin dropped 50% which is amazing. And they started having regular cycles. It's, this is just from changing the time that you eat.

So we call that in the 24 hour time restricted eating and trying to have at least, at, least a 13 hour fast from dinner to breakfast. Okay. And then as time goes by, as your gut gets better, you can even include fasting, mimicking diets.

So like, you know, like the, what was developed at the university of Southern California Longevity Institute, where you eat food for five days, but your body thinks you're fasting.

So those are, more advanced levels. so that's, that where like food is so pivotal. The time you and what you. Is so, so important. And when you, eat at, the right time, You help to promote proper appetite signals and controls.

Because women with PCOS have, because estradiol is key for appetite regulation in the hypothalamus, the signals, and also GLP-1, you know, like all these people are getting the shots like Wigovie and Zep-Bound and all.

Well, estridiol, is the key to the production of this peptide, GLp-I and GIP. So, by adding in phytoestrogens, your actually and eating fiber, Increasing your natural production of GLP-1, which helps regulate appetite.

Because women with PCOS have high incidence of binge eating disorder, Which has actually been shown to be treatable by an estradiol patch. So estridiol is key for regulating appetite and then you want to add in all the other things for lifestyle.

You know, you wanna add-in steps and exercise, work on sleep hygiene and work-on stress. and avoidance of chemicals, get plastic as much as possible out of your life.

So you want to include all and every lifestyle piece to optimize health. And then, and this is not a self-help thing, this requires a physician or someone who's a prescriber.

I actually now, instead of giving birth control pills, which have a whole host of other problems in terms of it actually does not improve gut microbiome.

It's actually pro-inflammatory. Increases blood clots because it is pro inflammatory, Which women with PCOS already are. They don't need more inflammation in their bodies.

And there are some advantages because birth-control pills will lower testosterone. production from the ovary and increased sex hormone binding globulin which holds tight, which binds up testosterone.

But there are other ways to do that too. And when you give bioidentical estradiol and progesterone, they're not making progesterone. Women with PCOS don't make progeterones if they are not ovulating and not having cycles.

Progesteron down regulates testosterone receptors and estrogen increases sex hormone binding globulin, which lowers the amount of free or available testosterone to cause acne and facial hair and hair thinning, all the things women with PCOS suffer from and change the quality of their life for the worse.

You know, horrible ways. So by giving bioidentical estradiol and progesterone, instead of the fake hormones from birth control pills, I can improve fertility and I could improve all these other aspects of.

The female body, if women with PCOS that they're dealing with, which are a multitude of things. And we touched on a lot, but there's even more, you know?

Because estridiol I always say over and over. is the hormone of life, it's the hormones of metabolic homeostasis. Remember metabolism, which we talk about a lot with thyroid, metabolism is a production, storage utilization, distribution of energy.

And estradiol and thyroid hormone, they work in synergy together to manage metabolism. And when you give back the vital estridiol, this hormone of life, you can help manage your thyroid much better, the gut microbiome, and then you add in all the lifestyle pieces.

focusing first on the diet, and you can actually tremendously, I don't say cure, but you reverse almost everything that we're dealing with with PCOS and improve fertility, improve cycles, improved health in every aspect.

That is awesome. I think that was one of the best kind of stepwise plan that I've heard for a long time where you touch in so much detail especially about the different dietary aspects.

Hormone therapy, fertility, and closing advice

You know how different foods will be useful, how to include you know like fasting you in your daily routine as well as you how the calorie distribution should be happening.

where you are eating two third of your calories or majority of the food during the day and not in the night. And then obviously other Lysel factors of exercising, stress management and sleeping.

I was actually going to talk about the birth control pills which you already answered that those are the synthetic hormones but you have the option of doing the bioentical hormones which are completely safe and great.

So that was a complete guide in terms of people knowing what they can do today to get this condition better. So thank you for sharing that. I think we can keep going on and on, but you know, with the context of time, you, know and effort, I, think people still will have to listen to this talk multiple times to, get all the great information that you shared.

Anything else that, that have any kind of parting tips or anything else you want to share with people? Well, I want every woman out there who has PCOS to know that the goal is to reverse the PCOs of today back to the PCsOS of your ancestors.

That those women who had that slight increase in testosterone and not any really dramatic decrease in estradiol that had any major impact, they were the leaders of their tribe.

They were dominant women, who were bravest, boldest, the fearless, so that's who's inside of you. We just need to have that woman be reborn and come out by just doing all the things that we discussed and inside you is the most amazing person that ever could be imagined and this is who you are.

Absolutely, those are great words. Where can people find you and where can they find more information about working with you or even kind of knowing the work that you're doing?

Well, I'm a practicing doctor, so I have an office in Southern California in Irvine called the Integrative Medical Group of Irvine, where I see patients all the time, work one-on-one, and I can often do telemedicine as well.

And in addition, Instagram Live and I have a YouTube channel and my PCOS books, which I'm so proud to say are number one, Amazon Best Sellers. My first one which is like I would say the Bible of PCOs, it's the book, is PCO SOS.

And then the secondary one is which PCSOS Fertility Fast Track. which is a week-by-week guide on how to really optimize and get fertile fast. So you can get that baby.

And even if you ultimately do need to have IVF, which does happen sometimes, you'll have a much greater success rate because PCOS women have the highest failure rate of all groups of women undergoing IVS.

Even if that's necessary, we want to get you success. So my books are out there. And then if you are in the older age strata, which every woman gets older, then I have my Menopause 50 Things You Need to Know, Which was rated a couple of years ago by Good Housekeeping Magazine as the number one best menopaus book on the market.

So I'm here to help. If you go to my website, I guess you'll post all these things, you can sign up and I send out newsletters and anything new that comes up.

Lots of information. getting lots of information out, whether you are my patient or not. Absolutely. And we are going to share all of this great information in the description.

So please check it out. Follow her on Instagram. Obviously, the great informations she's sharing. Dr. Gursh, thank you so much for coming over here today.

My pleasure. All right, guys. This is it for today, great, information. Please listen to it one more time if you can. Thank you for tuning in to Doctor Talks.

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