MERYL: Welcome back everybody to the Rebel Nutritionist podcast. — Happy New Year. This is our first podcast of, no, actually it's our second podcast of 2024. But I am really so excited about our today's guest, Stacey Seslowsky, registered dietitian. I'm going to call her the out-of-the-box, functional medicine nutritionist.

That's what I call myself. Because we realized fairly early on that the in-the-box traditional route of nutrition and, and the work that we did did not serve us or our clients very well. So Stacey, so excited to have you.

STACY: Thank you for having me. Absolutely. I'm really excited to be here today.

MERYL: What I didn't say and I didn't say it purposely when we started is because I kind of wanted to have this dialogue.

So I met you back in September when I signed up for your immunology for nutritionist and dietitian course. And I was so excited and I didn't want it to end. I actually like, I'm like, I got to go back and do it again. There's so much that I still need to know. But what a fabulous course you put together.

What great work you have done. You have really inspired me to want to continue. I've always been interested in immunology. I always have said that if I'm going to come back in my next lifetime, it's going to be as an immunologist because I find this area so fascinating. So tell us a little bit about how you got started in this from the traditional dietetics route. And then we'll get into it.

STACY: Sure. Yeah. Thank you. I'm So I just like you said, was really frustrated with my original education in nutrition and dietetics. It was very one-size-fits-all all. If a person has diabetes, you put them on this diet. There was no, like you said, outside-of-the-box diet. Thinking, trying to understand root causes or individualizing recommendations for each person, each unique person.

And so I kind of left the field for a little while. And then my husband was diagnosed with an autoimmune condition called Graves disease. And I was — honestly scared. of the recommendations that the doctors were making. They were recommending things that sounded actually scary to me. And I decided I was going to go back.

I was going to figure this out. There had to be another way outside of the pharmaceutical medications they were recommending, the radio therapy, radiation therapy that they wanted to do to basically Kill his thyroid. I just was terrified. So I did. I went back to school to get my master's degree in human nutrition and functional medicine, and I have been able to use food and supplements to reverse his Graves disease for the past seven years.

He has a perfectly healthy functioning thyroid, and he's not on any medication. Yeah. So I just thought, yes,

MERYL: well done. Well done.

STACY: They'll get excited. Every time he gets his blood work. I'm like, are you kidding? This is still working. But I just thought we have to just stand on a mountaintop and announce this to every person in this world who is being treated with medications that are toxic.

I mean, I'm not trying to say that medications don't have a place. Pharmaceutical medications can save people's lives, no doubt about it. But when we can use food and lifestyle to address root cause root causes and underlying imbalances, then we are avoiding not only the health issue itself, but also the side effects of medications that always occur as well.

So I, yeah, after that masters program, I still felt like I needed a little more support because it was so focused on the gut. And I just thought, yes, we could feel the gut and that's a great step in the right direction, but it's not everything wasn't enough when I wanted to reverse my husband's autoimmune condition.

And that is when I spent a few years learning from a functional medicine immunologist. I was obsessed with learning from this person. Every single lecture, every word that this person said, I wanted to memorize and learn and understand. — And then be able to repeat it in a shorter version to my peers, my other dieticians and nutritionists who also needed to have this information, but maybe didn't have three years to study immunology.

So that's sort of what got me to this point and I've really been loving the opportunity to be able to share this information with other nutritionists who are interested in similar feel like I am. —

MERYL: Amazing. Yeah. And I, your work has been invaluable. I mean, even in the few months that I've been able to implement it, it's made a difference.

So thank you. Thank you for that. — And I'm excited to continue to learn. Thank you. You know, one of the things that we had talked about in the course that I found, I was like, Oh, as soon as I heard that, I'm like, we got to do a podcast on that. You know, the whole, especially as we go into the new year and people are looking to get that, that weight loss, they want to get the holiday weight off or whatever they, they just want that, let's call it quick fix.

Right. Even though we know there's no such thing. It is a process, but **the idea of intermittent fasting has such appeal for so many people. And — yet we know that there's a definite downside, especially for women of a childbearing age**, right? Menstruating women and it can be a real, real problem. And Yeah, people always say, well, why?

And, and what, what is the issue there? And is it again, not a one size fits all approach. People are looking for the one size and it's not there. So let's talk a little bit about why intermittent fasting might not be for everybody. ——— You know, what, what are we looking at when we're talking about that?

What specifically are the markers that we're talking about? And, and how do we address that and, and help those people and help people decide, right? Is it for them? Is it not for them? Like, let's talk a little bit about that. ——

STACY: I'm so, so excited that you brought this topic up. I have this topic has like, I've been on fire about this for so many weeks and months now, because — women especially are being given the wrong information.

Unfortunately, many studies that are related to fasting and the ketogenic diet, and even exercise, they are most. With **using men as the subjects. And the reason is because women have a menstrual cycle. And that is a confounding factor that the researchers cannot account for.** You know, they can't say, well this woman was having her period at this time, and so this was gonna be a little different than this other woman who didn't have her period at the same time.

You know? So they just take women out of this. And so there's a lot of study all together and they get this read these results from the study and **then they tell women to just follow the same information because this is the way that the results the outcome showed that this would be the benefit to you as well.** 

But we cannot stop women from Follow that information because we are completely different. You know, there's another an athlete who we can learn so much from. Her name is Stacy Sims, and she, and I don't wanna I'm saying her name because I don't wanna steal her thunder, her quotes, but she always says, we are not.small men women are not men.

And it's so true. We have different hormones, we have different metabolism, we have different needs altogether. And so the whole idea of intermittent fasting, and I believe even the ketogenic diet is just completely inappropriate to women. Maybe some women will feel a little bit of benefit at First for a short while, but it will have ultimately negative effects to your health.

A couple of the things that happen when we fast, **especially if we try to exercise fasted**, — is that we trigger a stress response. What that means is because our body does not have the fuel that it needs to get you through the workout, your body will have to make its own fuel. That process to make its own fuel, make your body's own fuel, requires Cortisol. And cortisol is that, that hormone that we know that's involved. Yes, it's great when it wakes us up in the morning and it gives us energy, but it's not great when it is being hyper released in a, in a higher amount than, than it's, than what is normal. And it causes, it's a stress response. It causes inflammation.

It causes all of your body to release, release inflammatory. Cytokines. And that will ultimately be very unhealthy for our health. It doesn't allow for your body to get the beneficial parts of exercise, which is muscle, lean body mass and becoming stronger and healthier. In fact, it works against us when we exercise fasted, we don't get those benefits of muscle and strength gains. And instead we, we get inflammation. So the other thing you'll hear people, women say all the time, well, intermittent fasting is really working because it's it's, it's, I'm having less of an appetite. That's actually not a good thing. We need to have an appetite. We need to eat. You know, we need to eat.

#### If we, especially the amount of protein that women need to be able to maintain muscle and bone density as we get older, we need a really, a higher amount of protein than probably we thought in the past. And, The only way to get the amount of protein that we need is by eating regular meals throughout the day.

If we only eat two meals a day, if we're skipping breakfast especially, our body is going to be running on empty for many hours of the morning. We're going to kind of mess up our circadian rhythm, and then we're not going to get the protein that we need throughout the day to maintain muscle and bone density.

MERYL: I mean, and that's a great point. And it's so funny when you said that during the course, cause I am that person who would get up. I mean, I have my coffee. I put half and half in my coffee. Like that is my thing in the morning. I do my meditation and then I generally would go to the gym and I'm, I have, I usually have a ton of energy and I'm feeling really good. And then I come back and I do my protein smoothie and whatever. And then you started talking about that and I'm going. Yeah, because I'm not hungry. Like it's seven o'clock in the morning and I'm like, not really hungry. And I'm thinking to myself, okay, but you know, this makes sense. And I haven't really measured my own cortisol to really prove this theory, but it makes sense. So I'm like, you know what, maybe in the morning instead of doing, so I usually do an amino acid blend right after the gym. What I've been doing is doing my water and my amino acids before the gym. So since and that's the, so I didn't really need to eat, but I am doing that. Right. I mean, and maybe that's good or not.

I don't know. We, but I definitely did notice a difference in my workouts. I'm definitely feeling more energized through my workout. And so is that enough is an amino acid sort of powder you think enough for those people that are listening who are saying, well, I don't really because it is I mean, it's very hard for me to eat before I go to the gym.

STACY: Yeah, yeah, I know. So the research is showing finally, they're actually doing research on women, thankfully. And what the research is showing is that we actually do need about 20 to 30 grams of protein before and after the workout. — So if your pre workout fuel is just a few amino acids, it might not be the complete protein that we do seem to need. —

Now I get it. I also struggle to eat that much if I'm going to be working out in the morning. So what I try to tell my clients who I work with is, can you get 15 grams of protein? Can you eat a little protein bar, even though it's a processed? food. You know, I think it's still better than nothing.

Can you eat like one piece of toast or gluten free toast with almond butter? Can you get a yogurt with can you eat a hard boiled egg? So just something whole food is definitely better

than processed, but can you get something in before? And then can you make sure? That you're getting at least 30 grams of protein in a full breakfast afterwards.

And if that doesn't work, then work out at a different part of the day because, — and I agree with you, I've spent years exercising, fasted, but I was also younger and I was, seemed okay. It was like, fine. But when you do get a little older, you get into your forties, you start to not be able to exercise to that level. Fasted. And when you eat first, you notice the difference, really, just like you said, you have more energy, you gain more muscle.

And I just recently did a lecture on the fact that probably I really feel that one of the most important things that women can do to live longer, literally extend your life is build muscle.

Seriously, it's the one thing, because having muscle is the healthiest tissue on our body. It will reduce inflammation, it will burn fat, it will make sure that we're regulating our blood sugar, which is a big indicator of our overall health. It will improve our heart health, and I feel there's also a connection with cognition.So, and bone density, all these things. 100%.

So there's nothing that we can't, that we can do that could be more helpful for us than building muscle. And if that means you have to eat a little something before your workout to be able to build that muscle, then do it.

MERYL: Right, right. Yeah. And so the amino acid that I use is a full full full spectrum amino acid.

So yes. Yeah Yeah, I'm not using like branched chain amino acids. Yeah, that's what I thought you know, yeah, no, no, no, no but yes, and and I agree with you know, so I always say we are our own best and of ones I always use myself and then I you know, tell my clients. Okay. Well, I've done this for X amount of time So you should do this too.

Yeah, so Yeah, so I am Practicing what you, what you have been preaching. And I do have, and I, again, I think it's too short of a time to really notice, but in the short time that I've been doing it, I do think it has made a difference and we'll see body composition wise, but a hundred percent, I agree with you about.

You know, about the, I've been saying it for, I feel like I've said it ad nauseum for so many years about doing resistance training, how women need to do resistance training. I feel like I'm talking to myself at this point, like I just keep saying it over and over and I've said it for so many years and I'm so glad that it's starting to gain traction.

Yeah. Thank God for Dr. Gabriella Lyon. I think she's really. Put this on the map with her book and she's been all over the place and You know, and I love her philosophy about yeah women need protein too and especially as we age And yes, there is, by the way, you said you didn't know if there were studies about muscle and cognition and brain health, and there are, especially when we get to the genetics, right, BDNF, brain-derived neurotrophic factor, is affected when we exercise, so yeah, exercise, building muscle is, is huge, and I feel like So many women we say it and, and they're a little bit lost, especially if they've been those cardio women or the yoga women, or right.

I always, if you talk to a bunch of women who have done yoga and Pilates, — their response is always like, Oh, but I don't want to get big muscles because I want to have that long, slim look. And. I, first of all, okay, so your muscles will pop a little bit, which I think actually looks nicer than the slab.

But The benefits, like you have just mentioned, are so vast, and women, it is impossible for women to get that big unless they are, like, specifically training for these bodybuilding competitions, right? I mean, what do you say to your clients? I'm sure you come up against this too, or maybe you don't, but what are you telling these women? Same thing? I Mean

STACY: — Yeah, I I get, I always get that the same thing you're saying is, Oh, I just want to be lean and long long and lean. And you know, and, and there, — I just tell them like that, first of all, there's a reason why your body's — when that's what you're there's a reason why you are struggling to lose weight and that's actually the thing your b You — know, I always like t why these things become impossible because you can't Fight nature, , , **and ,** — **your body doesn't want you to be lean and long.** 

Your body wants you to be strong. And if you're not going to build muscle, then you're going, it's gonna be harder for you to get rid of fat. So it's, instead of, I, I really just tell people I'm not a weight loss dietician I tell them I am, my first focus is health. You know, under reversing underlying imbalances and optimizing your health.

I think weight is a side effect of all of that. So let's do the health thing first. And I also say if we are going to think about weight loss, I'm not going to actually use that terminology. I'm going to use how do we build muscle? How do we get stronger? And that's something that's a lot more actionable versus how do I lose weight?

How are you going to starve yourself? Are you going going to torture yourself, cut back on food that's nourishing your body? No, we need to think about what to feed your body, how to fuel your body, how to get stronger. And we'll worry about. The weight loss will be later. Let's not think

about it.

MERYL: Right, right. And I am very much like you. I say the weight loss is a result of getting your body in balance, right? The inability, the resistance to losing weight is all because your body is out of balance. Once we get your body back into balance, everything should work pretty well from there. So, — So just going back for one second into this whole like why women shouldn't intermittent fast.

So the younger women there's been this talk about — women and their menstrual cycle. So I know the cortisol connection you just mentioned, right? If you're fasting and you're not and you're producing too much cortisol, that will have an effect on a lot of things in our body. Inflammation and so forth.

But what is the connection for younger women with cycling and all of that? That becomes a concern with fasting because these young girls are doing intermittent fasting and women are trying, it's just the way to lose weight, right? People are saying, Oh, I'm going to just fast. And of course they're doing it all wrong anyway. But. —— Why? What is the concern hormonally there in terms of that?

STACY: Sure. Yeah, absolutely. So when I was, when I was younger, — there was a time period where they were telling people we have to eat every two hours. We have to eat every two hours to maintain good blood sugar and small frequent meals throughout the day.

Now, I don't think we should be eating every two hours. There's other reasons for that you know, with regards to digestion and even inflammation and things like that, so we don't need to eat every two hours. That's not what I'm saying here. But I am saying that if we do fast for too many hours each day, I do actually think that we could slow down our metabolism.

And by that, what I mean is that we have, it's called a neuro-peptide. And we have many of these types of neuropeptides. It's basically a message that your brain is sending to the rest of your body. We have neuropeptides that make us feel hungry. We have neuropeptides that make us hungry. feel full. And we have this one neuropeptide that tells your cells when they should be having a, like, sort of using metabolism and when their metabolism should be slower.

And this — neuropeptide — In women specifically speeds up your metabolism, basically sends the message to your body to use your metabolism when you're eating, not when you're fasted.

Whereas we've always used to think or now in the past 10 years, **everybody's sort of this** message that you have to be fasted to speed up your metabolism and to trigger this thing called autophagy, which is the creation of new cells.

And everyone's like very focused on the fact that you have to be fasted for all that to happen. And actually for women in particular. We do not have to be fasted for that to happen. This neuropeptide tells your body to use metabolism and to trigger autophagy when you're actually in the fed state. So what happens for women in the younger in your teen years and twenties, and even in your early thirties, when you're in years to be fertile, when you're fasted, That neuropeptide tells everything to slow down.

It tells your metabolism to slow down, it inhibits autophagy, and it tells the female body that they are not in a place that is healthy to create a baby. So your menstrual cycle is a

# little off, and your fertility is lower, and you will struggle with getting pregnant with having a normal menstrual cycle and all these things.

If you're fasted, because that neuro peptide is basically slowing everything down.

MERYL: Wow. That is a big aha, right? I mean talk about the difference between men and women. And I think the other part of this, so, so would that be different, so I'm assuming the neuropeptide that we're talking about is the kisspeptin peptide, correct?

STACY: Correct, yes.

MERYL: So does that shift when then you go into menopause?

STACY: No, it's basically the same. I mean, we might not have a cycle at that point, so it wouldn't affect. So the studies for younger women is are showing that when you are in that fasted state and kiss pepton is not doing what it needs to be doing, it is your menstrual cycle will be off and it is harder to get to get pregnant.

In the later ages, it's not going to affect obviously your fertility or your menstrual cycle, but it will affect your metabolism and your ability to go through that process called autophagy — and autophagy is is a process that is more so connected to longevity like if our cells can manage.

create, can recreate themselves, can break, get rid of the broken parts and become a new healthier cell. That is what will keep us healthy long term. That will, that is what is going to keep us living longer. And so if we can't go through that process called autophagy, then we will age quicker. And that is what Kispeptin actually stimulates autophagy in the fed state, especially for women.

MERYL: So that kind of flies in the face of all of this longevity talk about fasting.

STACY: That is absolutely correct. -------

MERYL: Wow. Wow. So we like just upended that whole thing. I mean, so, so you're saying I mean, I all of that stuff on the fast and mimicking that the research that Walter Longo has done. And, you know you know, I know Peter T is talking about and, and Butener, Dan Butener is talking about, right. All of the blue zones, all that kind of stuff. Although I don't know that he talks so much about fasting, but, yeah. But all we hear is the studies on autophagy happens when you're in a, in a fasting mimicking state or you're not eating.

So is, are you saying that is really only true for men and not for women? -----

STACY: So, first of all, I think that Peter Atiyah has backtracked a little bit on his fasting. — On this fasting conversation, but I'm not 100 percent sure on that. But yeah, Valter Longo, surely that's his product. And even Dr. Bredesen, who teaches reversing Alzheimer's disease. He's all about the ketogenic diet and those kinds of things.

So I, I have completely backtracked on fasting for women. Do I think it could be helpful for men? Possibly. I think they don't get, as the, the studies are showing that Kisspeptin, that they don't have these big drops in Kisspeptin like women do when we fast.

So that's the difference. We both have Kisspeptin, but it doesn't seem to drop as drastically in men during fasting as it does in women. So that's the problem, is that it drops in women when we're fasting. And would I go,

I really wouldn't recommend fasting for women. I really wouldn't, and I think it's mostly because there's, it's nearly impossible for women to avoid sarcopenia.

If we're going to fast and like I said, the most important thing we can do for our health is maintain muscle and I just don't see how we can maintain muscle and bone density. If we're fasting I just absolutely. I can't help myself but say be strong on that point, even though there will be, there's so there is research towards that other conversation about intermittent fasting about the reversal of Alzheimer's and the recode program and the Walter Longo fasting mimicking, but I don't know.

I don't think there's enough on just women alone and the long-term impact. Yeah. I mean, yeah, I've personally seen, like I, I'm certified in recode and I see Alzheimer's patients. And just from an anecdotal standpoint, the women that I see in that, in those programs are, they've lost too much weight. They've lost their energy.

They are struggling to sleep at night. I mean, there's a lot. We're just talking about muscle mass here, but there's a lot of other impacts of fasting You know you it's much harder to sleep at night when your body isn't fueled to keep you asleep at all night You know, you're gonna you have anxiety you have loss of energy you have cravings for sugar You know, it's another thing like a lot of women will be doing these processes and i'll say i'm feeling really good I don't have an appetite.

I'm able to wait till 12 or one o'clock. Okay, but At five o'clock, they can't help themselves but eating like a whole bag of candy, and then they can't sleep at night, and they have no energy, and like, well, maybe those things are connected. Yeah, Right.

MERYL: Yeah, yeah and that's why I always say. In this world of information overload, it still comes back to you as an individual and what works for you as an individual and why the work that you and I do in the area of personalized we call it personalized nutritional medicine personalized, right?

It's getting to the root cause of what is going on specifically for you and we are all unique. So to make these broad claims, but I love that the research is sort of debunking what we're finding out about women and, finally that, yeah, women are getting their due in the research. So wow.Fascinating topic. I would love to hear what, what my, what our listeners have to have to say and think about that. No, me too.

So, so in that vein of like, well, I mean, in terms of – trying to segue into the whole inflammation area, because I feel like as we talk about I don't, it could be health. It could be, again, we're not really talking about weight loss per se, but why people struggle with. feeling well and getting to

the root of their imbalance especially if they're following the traditional medical idea of a pill for all ill, oh, just take this pill for your blood pressure, take this pill for, and your, and your whole system is not balanced.

And we know that at the root of every disease. Is inflammation. — And yet – people, I mean, look, I think inflammation, when we learned about it it's a hard concept to, to, to wrap your head around, let's say as a practitioner, right? But when you're in the science and you're delving into it and you understand biochemistry and physiology, for those of us that do it, it's fascinating.

STACY: Absolutely, yeah. So, I'll just start off by saying, inflammation and the immune system response — They're the same thing. So anytime you have inflammation, that just means that your immune system is responding to something.

So, and what I think a lot of people don't realize is that our immune system responds. to a lot more things than we think of. And so our immune system will respond when we have a nutrient deficiency. You know, when you have a cell in your body that doesn't have enough vitamin D, it's going to talk to your immune system.

And it's going to say, I can't function without vitamin D. And that means your immune system has to respond. That response is called inflammation. — When your body doesn't get enough sleep at night, You wake up and your, your immune system is going to respond. And that is inflammation. When you are stressed, your immune system responds to stress. That is inflammation.

So inflammation is anything that triggers your immune system and your immune system is basically triggered whenever something is off in your body. So when you talk about bigger thought processes like blood sugar regulation or high cholesterol all of those are things that are triggering the immune system and all of those Are causing inflammation.

Now, we actually want our immune system to respond when we really are exposed to germs and viruses or when we have an injury on our body and our immune system has to respond to heal the injury. So we want inflammation. Inflammation is the thing that keeps us living and protects us from everything. So it's not that inflammation is all bad, it's just.

It caught when it's going on for too long when it is triggered by unnecessary reasons like an unhealthy diet, lack of sleep, stress a nutrient deficiency. Those are the things that let's, let's get rid of those things so that your immune system can focus on real threats. And not on these unnecessary triggers.

Because imagine, if your immune system is getting triggered by all these other things, a highly stressed life, a lot of alcohol drinking an unhealthy diet, a nutrient deficiency, then

how is your immune system going to be able to also focus on a virus? When you get exposed or I'm healing an injury or healing what we talk, I talk about injuries a lot throughout my course, because I'm not just talking about like falling and getting a scratch on your elbow. I'm talking about injuries that you had years and years ago that are. Still hurting you to this day, and it's because your immune system is being, is focusing on so many other things that it doesn't have the, the capacity to heal the scar tissue that you have from an injury that you got when you were in your twenties and now you're in your fifties, you know?

So basically, inflammation, like I said, is anything that is triggering to your immune system. We want inflammation when we really are triggered by a true threat. But we don't want inflammation for unnecessary reasons.

MERYL: That was a great explanation. Thank you for that.

So in the work that we do, I'm just thinking back like, with all of the clients that we work with. When we talk about root cause and we say, well, right, if you have blood sugar imbalances and you have cardiovascular disease, those are, that's the body's saying, okay, there is some inflammation going on here. What is the root of that inflammation and digging deep into Resolving that right is really where the work is — Rather than just saying, well, give me a supplement to treat my cholesterol.

I think that's where people get lost a lot of the times in the work that we do. It's like, well, they're going to come in and they're like, well, okay, I don't want to take the statin. I don't want to take any blood sugar medication, insulin, or whatever that is, right? I don't want to take XYZ medication, but give me a supplement you know?

And and, and that'll make it all better. And I say to them, it's when, when I talk to them, I always say there's, we, we work off of the five pillars of health, what, what I call, right? So nutrition and movement and sleep and stress and our mental emotional, I mean, I'm sure there's more, but right.

Like, that's what we start out with. I'm like, we have got to address all of the things in those five pillars first. And you literally just take one pillar at a time sometimes and just say, let's just get you eating real food, right? Like that's something that you've talked about. So like you said, well, there's a vitamin deficiency.

It doesn't always mean only that you take vitamin D and correct the vitamin deficiency. Yeah. Because everything else works in context. Do you want to speak to that a little bit? —

STACY: You know so I think I had another, I always like to make sure I'm giving credit to the people that say these things.

I had a teacher named Brian Walsh, who always said there's a reason the body's doing this. You know, so when you have high cholesterol, there's a reason your body is producing cholesterol. And by the way, high cholesterol is 99 percent of the time because your body is Producing too much cholesterol not because you're eating cholesterol in your food.

So your dietary Cholesterol is not what causes high cholesterol. So I should have said a hundred percent of the time. But anyway, So there's a reason your body is doing these things and if you're just going to take a pill to reverse something your body is doing, then you're

# not, then you're, then you're going against what you're, there's a reason your body wanted to do it.

Like maybe there, maybe your body was trying to heal something. Maybe cholesterol is actually an antioxidant and it was actually trying to use cholesterol to heal you from something and now you're just taking a medicine. to reduce your cholesterol. But now that now that you're taking away the tool that the body was trying to use to help you.

So we can't just treat every ill with a pill because you're really then just trying counteracting what the body was trying to do. Rather what we should be doing as practitioners and as our patient, as our clients is. seeking, why was your body trying to do that? Where was there an inflammation, a trigger to your immune system? Where was there an imbalance? What was off that made your body want to do this thing? Raise your blood sugar why was your body having trouble with — regulating blood sugar? We have to get to that root cause and reverse that and more often than not It's because of easy diet and lifestyle factors.

It's not as complicated as it may seem. People will come to me and say, Well, I'm having joint pain. I'm also having heart issue. I'm also having headaches. And it all seems so confusing. And it's like you don't need to just don't understand what, what. is what to do anymore, w and it's usually it's not as complicated as it seems. Its Happening in different, several different parts of your body and so it's it's all connected and if we just use the, like you said, address those pillars then I most of these symptoms will reduce or go away.

MERYL: So, and, and absolutely that's, that's the work that, that, and it is simple stuff and people just don't want to hear that because they want to make it so hard, so much harder because they think they want to like, Oh, what, I just have to sleep right. But sleeping for people is hard. It is a lot of people right getting good sleep and creating a good what I would call sleep routine and finding consistency in that You know, we find every excuse to not do the things that are very very simple So yeah, I mean that's always a challenge I find it's a challenge, you know people come in I had a,

I had a gentleman come in yesterday, just a quick side note, who needs to lose weight, who is actually on a semi glutide and it's I think he's overeating over the semi glutide, but you know, he came in and we started talking to him about food and he's like, well, this is, this is complicated, this and it really wasn't all that complicated, but the meal plan looked overwhelming to him because he eats a lot of processed food.

I said, let's just start with one thing. And he's like, okay. And he was just a little flustered. And I said to him, well, what was your expectation? Like, were you expecting to come in? And I was going to, what was the magic that you were waiting for? Because you know what you need to change. I'm telling you what you need to change.I'm giving you the resources to do that. And yet there's resistance, you know?

And I said, so what is the expectation? And he kind of looked at me —— I don't know, — right? It was dumbfounding to me, like, like, he really thought I was just gonna give him A piece of paper that said eat this and this and this and all your troubles will go away so people need to realize

## that yes, these, these strategies are very simple, it's implementing them and doing the work that is that is challenging.

Okay, so. Let's speak for a second because we talked about how the immune system gets triggered, but then there's all these people with these autoimmune diseases. And look, we could say cardiovascular disease and diabetes and cancer and thyroid, right? All of these are auto celiac disease, right?

They're all autoimmune diseases. Right. And so what does that mean in the context of how do you explain that to people and how can our listeners really understand if they have even arthritis, right, as an autoimmune disease in the work that we do, how can we help support them in that?

Does that make sense?

STACY: Yeah, absolutely. So an autoimmunity is when you have an immune cell that is recognizing your own self tissue as a pathogen, which means when your immune system sees something as foreign or threatening, then it needs to attack that thing to protect you. Now, we, like I said before, we need our immune system to attack real threats.

But certainly your own Organ like your thyroid is not a threat, and you don't want your immune system to attack your own thyroid. But unfortunately, we have some predispositions, genetic predispositions for this, and usually when there's this perfect storm of you had a virus, you were on antibiotics, So let's talk a little bit about how this works for six months. You went through a traumatic event. You gave birth. Actually, after giving birth, there's a bigger risk of developing that autoimmune process that maybe you already had a genetic predisposition for. It didn't necessarily have to come about, but because of this perfect storm of events, you then develop this immune cell that now sees your thyroid or your joints or your skin as a pathogen, and now you have this autoimmune process.

Now once that happens. — It's common for your immune system to now, that immune, that same immune cell that sees your thyroid as a threat, it starts to look at some of your foods and it says, wow, that piece of gluten looks just like her thyroid. And every time you eat gluten, not only will the gluten get attacked, But so will your thyroid. So I know that sounds totally wacky because it almost like you can't imagine why that would

happen, but it just does. There is a molecular structure in certain foods that look similar to your immune system as an organ in your body. And so after you get diagnosed with an autoimmune condition, it is actually helpful to eliminate some of those foods to try to calm that process down, to avoid that autoimmune reaction.

And so that's one step. I usually take out foods like gluten, dairy, corn, and soy. That's one step in the process. I do also think back to what I was saying before in how can we take the burden off the immune system from all the other things that I talked about? How can we make sure that you're getting all the nutrients you need so that you're not nutrient deficient? Because that's a trigger to your immune system. How can we make sure you're getting enough? sleep and reduce your stress, eating a healthy diet. All the things that I said

## before are triggers to inflammation. Let's avoid those triggers so that we are also avoiding the risk of that autoimmune process.

It really involves all those lifestyle factors, the dietary factors, possibly eliminating some of those triggers to the autoimmune process. And then if I were to get further and further into immunology, there are other things that we can do to rebalance the immune system to try to inhibit that autoimmune process.

MERYL: So yeah, I'm fascinating and I, I want to hear in a second your story, but or your husband's story, because I think that would help listeners, but let's go back to the gut for a moment, right? Because the gut plays a crucial role in, in the right? The, what is it? **80 percent of our immune system is inside our gut.** 

And yet most people's gut is in such disarray — But they don't know it, —right? **Because we** don't necessarily have to have a symptom. You know, when I say to someone, I'm gonna, I need to run a stool test on you to see what's going on in your gut microbiome, right? And they say, oh no, but I I, I feel fine. ———

How what is your response to that in terms of like, we've really, yes, the work that we're talking about is simple in terms of balancing lifestyle, but going deeper in terms of really saying, okay, how part of that is looking at the food that we eat and all of that. **But we know that the gut is so integrally integrally connected to our health.** 

How do you, how, how do you want to how do you address that?

STACY: Yeah, surely anywhere in our body where there is inflammation, meaning your immune system is responding to things constantly then that's we need to target that area because wherever we can reduce inflammation. then we are taking another step in reducing the risk of that autoimmune process.

They might not think they have a symptom, but they also don't realize that having a bowel movement every three or four days is not enough. And that's — a sign that there is something going on in your gut that you're supposed to actually feel fine after eating, you are not supposed to feel bloated.

You're not supposed to have heartburn. Like these are all signs that we need to pay attention to. And a lot of people feel like they've had this for their whole life. So they just don't think that it's a problem. Like, Oh, this is just me. This is normal for me. It's not normal. You know, you should not need to take a Tums every night.

You should not have to be on an antacid or a PPI long-term. So, and your bowel movements should be formed. — And you should feel satisfied when you get when you're done and all those kinds of things. So whenever any one of those little things is a little off, then there is inflammation in your gut and — get to the bottom of that.

Because again, anywhere there that we can reduce inflammation, then we're taking another step in inhibiting that autoimmune process.

MERYL: Absolutely. Wow. I mean, we could go. I'm just looking at the time and I can't believe how long we've been talking. — I mean, I have all these questions that we didn't even get to. We're going to have to definitely do a part two, but you know, I just think this is a, this is such a fascinating topic. I mean, not just to me and you, I, I think everybody else because as we talk about, even though I always say we don't get too, too deep into science, I mean, these are the things that people can understand and we come up against every single day.

And this is really where the root of the work that we do needs to start. And people should be hearing this. It's not just, oh, do this take this supplement for the bloating or do this one food for it's so funny when we talk about food. So. I love bananas, right? And everybody, so big question.

Everybody's like, I don't eat bananas. There's too much sugar in bananas, right? Like, you always hear that. So I'm like, my comment back is nobody ever got fat from one too many, but eating one banana. And so, and I can't remember the woman that does all the studies. Oh, it's gonna, she's, she's big on Instagram.

And I feel bad that I don't remember her name. — She does a lot of the studies on the sauna and the heat and cold plunging and a lot of that. And She just recently did a podcast about polyphenols and longevity and health.

No, it wasn't Cara. It was, it was this other woman. I'll have to look anyway.

And so the, and I think five people sent me this snippet because she said, well, if you have a banana in your smoothie, you're actually reducing the polyphenol content of the berries in the smoothie. — And I'm like, All right, I gotta go research this I gotta go find where So the nuances of that to me were like, okay, so then don't have a banana every day in your smoothie or find another way to get your polyphenols.

Right. But the bottom line is, I think people are so looking for one answer. They just want to know that one thing that they can do. — This what this conversation has really pointed out is that it's never just one thing. And you are unique and what makes you, you and your issues, you you've got to get to the root of that and, and whether it's nutrition deficiency, whether it's a lifestyle thing, whether Yeah, you've got to start digging a little deep into your own health and well being and where those disconnects are so that you can function and be healthy and feel the way you want to feel. —

STACY: Yeah, yeah, and to that point, also, — listen to your gut no pun intended, listen to your gut, because we have to question everything. I don't care the name of the person that they graduated from, every lvy League college that existed, and they are the top doctor in this and that place. They, you still have to question, everybody has their biases and — — you, and because they're saying something that is, this study showed this and that maybe it's great for a huge population of people, but then it does not mean that it works for you or that it is good for you.

And you do, you need to think of yourself as a unique individual and question everything that you see and read. And, and really seek out alternative ways of thinking about everything.

Because there's, we've, we've spent too many years listening to, Oh, we should be avoiding every bite of fat in our diet.

You know, because fat is terrible for us. And so instead we all lived on snack wells and sugary foods, and then we, now we have all diabetes and heart disease it's like, we can't fall for these things again and again and again.

I guess the only other thing is if you're not getting what you're seeking from your current practitioner you're going to a doctor and they are just not, they're kind of sticking to their, One size fits all protocol, things like that, then seek out another source.

You know, just look for a different person. Look for somebody that is thinking about root cause medicine, underlying imbalances. I mean, I think everyone you Meryl, and everyone who's in your world is now thinking about functional medicine and integrative medicine. And I think that's really the way to go.

MERYL: Yeah, absolutely. 100%. Thank you for that. One other thing I just want to end with real quick because I'm sure I know I'm curious when people always say, all right, well, I healed this autoimmune, right? Like you helped your husband heal this Graves disease, which is an autoimmune disease. Can you just give us sort of the cliff note version of what was it that he needed to do to avoid medication, avoid the radioactive iodine that he was able to heal his body, help his body heal on

its own.

STACY: Yeah, so I don't know that you can ever use the word heal with autoimmunity. I think you can manage it, you can reverse it. I don't know. I hope you can. I really hope it's healed. And I hope I don't ever have to think about it again. But cause we do, we test for antibodies, what's, which is that.

That immune cell that I told you that attack health tissue. We test for that, see the level and he doesn't have those antibodies right now. But does he have a tendency towards making them? Probably. And if he started to do all the things that promote his inflammatory processes, then likely he would start to make antibodies again.

But a big part of it was taking out those foods that I knew his immune system was seeing as his thyroid. And so that was a big trigger to that autoimmune process that we were able to clear out of his diet. And now when he eats a food that has even a tiny bit of soy or a tiny bit of corn or any of these things, he immediately feels it immediately.

Almost. — Thank, thank God, because that's the way that we know when you're eating something. So I'm always saying, you see, like, thank goodness for these signs and symptoms, because it's your body telling you that you're doing something that's off. And right. Otherwise, he keep eating it. And we wouldn't know it was causing a problem.

So So taking up those foods **replenishing so many different vitamins that I could tell from his blood work, like B12 and vitamin D and a lot of these nutrients that are all important for immune processes, for something called methylation, all the things that are important for you know, for all the different functions of the body.**  These are all the things we have to address and check off the box that that's being taken care of and then I'd say I've certainly used some of my immunology you know supplements and things that I knew we would need to use to balance his immune system because there is a part of our immune system that has a tendency towards promoting autoimmunity. So we take things, certain supplements that will dampen that part of the immune system and that's another piece of the puzzle. So it's really all of these things you can't choose one, just as you were saying, the supplements wouldn't do it alone. If that was the only thing we were doing, that would not be enough.

But it's the entire picture. It's all the pieces of the puzzle and it's every year checking his blood work and every year making sure we're looking at all the different possible triggers to inflammation and making sure we're just checking off those things all the time to say We're good. You know,

MERYL: absolutely. And love to hear that. So many more questions. It's not enough time. So we will definitely be doing a part two. I, I would love to talk about the whole genetic piece and stuff and even the mental emotional, I mean, so much that the immune system can teach us and tell us about our own health.

So thank you so much for your time today and your. Your knowledge and your insight. It's been truly amazing. I think I think our listeners are going to love it. And yeah, until next time Really, really appreciate all this great info. So definitely leave us some feedback as always. We offer a 15-minute complimentary consultation for anybody that is looking to gain more insight information into the work that we do.

And if any of this is. Interesting to you and you want to learn more, please reach out and we can schedule that and make sure you check out our supplement of the week. I actually think it is an immune support formula, so that'll be good. And make sure you get your discount code. Stacey, thank you again.

STACY: Absolutely. Thank you for having me. It was really great to be here. I appreciate it. MERYL: Absolutely. And as always, make it a great day, everybody. This is your rebel nutritionist signing off.