THE MODEL HEALTH SHOW

EPISODE 454

The Surprising Truth About Thyroid Health & The Thyroid Reset Diet

With Guest Dr. Alan Christianson

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Shawn Stevenson: Welcome to The Model Health Show. This is fitness and nutrition expert Shawn Stevenson and I am so grateful for you tuning in with me today. I'm so pumped about this episode, we're talking about a subject matter in an organ, in the human body that is definitely getting a little bit of abuse today. It is a very, very powerful organ, having a huge impact on our overall metabolism, also on our cognitive function, even it's related to our ability to manage stress, and that organ that I'm talking about is the thyroid gland.

Our thyroid, metabolic powerhouse, determining so much about what's happening with our metabolism, and today, I think you're really going to have some truly eye-opening moments and possibly your mind-blown in understanding the role that the thyroid is playing and how a specific nutrient that's largely considered to be the ultimate solution for improving thyroid function might be the thing that's causing the dysfunction. So super interesting stuff. When talking about our various organs and our metabolism, the sun rises and sets with the function of our thyroid. It is truly the big player that's regulating so much with our metabolism, and speaking of sunset, I just had my first experience.

I've seen a couple of sunsets here and there sprinkled around, but never one like I saw just a couple of days after the release of Eat Smarter. We went to the ocean. I took my mother-in-law and my wife. And this was the first time I ever saw the sunset on the ocean, that's a different thing. That's like that grass-fed sunset, that's like a whole different level of sunset experience, and it just helped me to really reflect on where we are and the things that we've accomplished that can so easily get overlooked. Coming from where I'm from, I never thought I would have even seen the ocean in my life, it wasn't even an objective or a goal. I would look up in the sky and see planes flying over me. I never saw myself being on an airplane before, it just wasn't something anybody I ever met did. So to be in that place where I could see what I saw with my own two eyes, and to have my family there was really remarkable.

And what really got to me was the fact that I want... Whoever wants that experience to be able to access it, especially again, coming from where I come from. For me, it was exposure and getting exposure to ideas, getting exposure to opportunity,

there's so many wonderful people from where I'm from that just need an opportunity, they just need to know what's possible. I didn't know what was possible outside of the walls of my community, and so it just really set another level of intention and fire inside of my soul to continue this mission and take it to another level and make a bigger impact.

So thank you guys so much for all of the love and response with Eat Smarter. It's a national bestseller, USA Today, all that good stuff. But more so the last week, it actually sold out, it's out of books, Amazon completely sold out of books and some folks might, That's amazing. No, we want people to be able to get the book. So the publisher was rushing trying to get more to Amazon, so as of this recording, they're back. You can pick up your copy of Eat Smarter through Amazon, but also of course, Barnes And Noble, Target stores, all the good stuff. Keep the momentum going. We've shown Eat Smarter was top 10 of all non-fiction books sold in America.

Alright, on that top 10 list, Obama, President Obama, Matthew McConaughey, Eat Smarter, we're not playing. This is the impact that we can make, and this isn't about fanfare, it's not about politics, it's about health, and we are showing that it matters. So again, this isn't just a book, it's a movement. Continue to show what we're about, make sure... If you don't already have your copy for some crazy reason, get your copy today, but also gift this book. I've seen so many people, just floods of messages of folks who've received it as a gift and they've had their entire lives change in a positive way. It's such a powerful experience. So, I'm just so grateful. And again, we're just getting warmed up, and today we're taking it to another level, another dimension, and looking at the function of one of the specific organs involved in our metabolism that has epicaloric control.

And we're going to talk about it with the guy, leading expert in the world in this subject matter, so I'm really pumped about that, but also of course, on the nutritive side, if you want to know what I'm doing to get my mind right to get that energy, that mental clarity, all that good stuff, real food first, hydration, movement, all of these important tenets. But there are things clinically proven from the world of real food that are shown to heighten our brain's capacity, and one of those things, this was published in the peer review journal, advanced biomedical research, found that Royal jelly has the potential to improve spatial learning, attention and memory.

And just for emphasis, it was also found to have antimicrobial, anti-tumor and anti-inflammatory action. Royal jelly has been found to facilitate the differentiation of all types of brain cells, and to top it off, researchers in Japan recently discovered that

Royal jelly has the power to stimulate neurogenesis in the memory center of the brain, the hippocampus. Ramen noodles can't do that. Cheerios cannot do that. This, royal jelly, is one of those incredible things in nature that we have access to, that has these powerful effects on our brain. So for me, I'm using the B.LXR formula from Beekeeper's Naturals, because they also include in this formula bacopa, which is one of my all-time favorite things that I've been using for many years.

And bacopa, in a randomized double-blind placebo-controlled human trial, gold standard, every box checked. This was published in 2016, found that after just six weeks of use, bacopa significantly improved speed of visual information processing, learning rate, memory consolidation, and even decreased anxiety in study participants. Come on. This is what we have access to. B.LXR from Beekeeper's Naturals. Go to B-E-E-K-E-E-P-E-R-Snaturals.com/model, and you get an incredible discount. You're going to get 15% off anything that you purchase. Their Superfood honey is out of this world. The B.LXR, their incredible propolis spray, so many good things. Pop over there, check 'em out today, beekeepersnaturals.com/model. And now, let's get to be Apple Podcast Review of The Week.

iTunes Review: Another five-star review titled “Great Podcast” by Amanda Heart belly dance. "Thank you for calling out the BS. I recently enjoyed Episode 433. The Model Health Show is my new favorite. Shawn is inspiring to listen to and he motivates me to be a healthier, better person."

Shawn Stevenson: Thank you so much for leaving me that review over on Apple Podcast. That's what we need more of, real evidence-based science and advice, things that we can do in the real world that can keep ourselves and our families healthy and continuing to thrive and to take steps to become even more. We have so much potential with us, but to access those things, we've got to change the conditions around us, from the environmental conditions to the conditions with our food and so much more. And today, you're going to discover why this matters even more so today, with our special guest. Our guest today is Dr. Alan Christianson. He's a board-certified naturopathic endocrinologist who focuses on thyroid care. He's a New York Times Best Selling author whose recent titles include The Metabolism Reset Diet and The Thyroid Reset Diet, which is out right now. Dr. Christianson has been featured on countless media appearances, including Dr. Oz, The Doctors, the Today Show and more. And he's the Founding President behind the Endocrine Association of Naturopathic Physicians and the American College of Thyroidology. And I'd like to welcome back, Dr. Alan Christianson. My friend, how are you doing today?

Dr. Alan Christianson: Hey, Shawn. I'm doing awesome. Happy to be here with you again.

Shawn Stevenson: Me too, me too. Your new book has just blown me away, I've just got to tell you.

Dr. Alan Christianson: Cool.

Shawn Stevenson: And it's one of the biggest issues right now in our world, really, that you're addressing. And that's the thing about you, your work seems to be coming along at the right time, when we really need it, with real answers. And in the video, people that are watching this on YouTube, you could see a little plushie back there of the thyroid gland itself that Dr. C has.

Dr. Alan Christianson: Right about there.

Shawn Stevenson: Right about there. This is why I'm so grateful to talk with you because we can help to kinda demystify the thyroid itself and then dive in deeper. So can we start off there? Can you give us a glimpse into the world of the thyroid gland? Just talk a little bit about what it is and the roles that it plays for our health.

Dr. Alan Christianson: Yeah. It's a little thing, think about a bow tie in terms of size, shape and location. So it's about there, kind of shaped like that, and it controls how we burn energy, how we repair our tissues and how we send nerve impulses throughout our system. So a lot of really big stuff it's in control of.

Shawn Stevenson: Wow. That's crazy. And it's also on... Is it on the HPA axis, it's connected to all of our other endocrine system function, right?

Dr. Alan Christianson: It's an honorary member nowadays. They talk about the HPAT axis, they put a lot of letters in that, because you're right, they're totally connected.

Shawn Stevenson: And of course, and I know you know this as just working in your practice, that for years iodine has been one of the big things. And if folks are dealing with thyroid issues, sometimes haphazardly start throwing iodine at it, but you really bring to the table in the new book some of the really concerning things about iodine. And the relationship between iodine and the thyroid is remarkable that you're sharing, and in many ways, unexpected. So first of all, most nutrients are used by the body for producing countless reactions, but

can you share why iodine is very unique in the roles that it plays?

Dr. Alan Christianson: Yeah. So that's a big one, like you said. Magnesium, Zinc, they've got hundreds of jobs. Iodine has one, best we can tell. And the other thing that's weird about it is that the amounts used are so infinitesimal, the body has to have this massively powerful pump to pull it in to get it to the concentrations needed. And that's not true for any other nutrient. So, yeah, just one job, just one part of the body, and then that concentrating mechanism, totally different.

Shawn Stevenson: So when you say a pump, can you... What does that mean?

Dr. Alan Christianson: They call it NIS. Yeah, N for short for sodium, Na, so the sodium/iodide symporter. And basically the amount of iodine in the blood is always too small for what the thyroid needs, and so the body can regulate that. So you pull it in. And what's in the thyroid can be 50 or 100 times greater than what's in the blood stream. And iodine has two chemical forms. To be really precise, iodide is what we ingest, but after we concentrate it, then that turns it into iodine. Iodine is a hot potato. It's this massive source of free radicals. It's pretty much like bleach. So you've got to have it in controlled environments. I imagine the scientist with the big tongs and the smoldering little cauldron. Your body does that with iodine.

Shawn Stevenson: Wow! That is such a great imagery for that. And so it's used almost exclusively by the thyroid, and what is the purpose? What is your thyroid really using it for?

Dr. Alan Christianson: So the thyroid hormones, you mentioned how they control the metabolism, tissue repair, nerve conduction. They do that by thyroid hormones, and these thyroid hormones enter the cells, and the thyroid hormones are just a special protein with four iodine atoms stacked up on it, and the body pops those iodine off as it uses it up. So yeah, iodine's the backbone for the active thyroid hormones.

Shawn Stevenson: Wow. And again, it's very rare as far as so many other nutrients that we know about for the human body, because iodine is for this specific purpose. Now, can we talk a little bit about the concentrations in the thyroid itself of iodine, because again, I know that a lot of what's in our blood stream, for example, these are the nutrients that we need for different tissues to function, we have some storage capacity, but there's a big difference in the concentration that's

needed and that's held in the thyroid itself.

Dr. Alan Christianson: Right. And that's the thing. So like magnesium or zinc, there's a certain amount in our bloodstream and that just washes through our muscles, our liver. You can imagine like you've got, I don't know, something in a sink and you throw the sponge in there, and there's a little soap in the sponge, so that's how nutrients work, but iodine's not like that, it's got to be pumped in. And the weird part too is that along with that, most nutrients you've got this pretty big range. You can sure get low, but it's pretty easy to get enough, but not get too much. You've got a pretty safe target to hit, but iodine has the narrowest of all by far.

Shawn Stevenson: Let's talk more about that. That's exactly what we need to get into. Because again, I think folks knowing like, "I need iodine," or "I might have too much iodine," it is such a narrow... And this is one of the big things I got from your book, probably more so than any nutrient, the range of what's optimal and what is in a place that it can't hurt you is very narrow compared to other nutrients. So can we talk a little bit about that?

Dr. Alan Christianson: For sure. So like bottom end and top end, in the bottom end, it's probably somewhere around 50 mcg per day, which is not too hard to get in the modern world. The top end, here's where it's interesting, this can vary, so some people have different levels of iodine tolerance. There doesn't seem to be a big difference in iodine requirements. There's no real people that we know of that need massively higher or lower amounts for that low end, but some people can tolerate more and do fine with that, but many cannot and those are the ones prone to get thyroid disease. So that upper limit is probably somewhere around 200 micrograms for those who are more sensitive to it, so it's an insanely narrow window.

Shawn Stevenson: And just overall, you gave the analogy of a lentil, the size of a lentil as far as the amount of iodine that we'll need for an entire year.

Dr. Alan Christianson: Yeah. About a teaspoon is your lifetime supply, your lifetime requirements.

Shawn Stevenson: That is bananas, because again, we hear so much about it in relationship to the thyroid, yet we need so little. So let's talk a little bit about that because... And again, most nutrients are found in semi-predictable amounts in food, for example, yet iodine can vary wildly. Is that right?

Dr. Alan Christianson: That's completely true. And that's why you won't see iodine on food labels, it won't list the iodine content. And that's also why you don't see iodine on databases for nutrients in foods. You can look at like Cronometer or Nutrient Facts or all these different good databases that will list out how much taurine you'll find in ostrich meat and all these obscure things, but none of them will give you iodine, because it's so variable. So I have pulled together data, and I have averaged that, but many foods, their amounts can vary tremendously. One study showed that you could get a box of pizza, you could go to your corner store, get box of pizza, whatever brand, you could drive three blocks to get the exact same brand of pizza, the iodine content could vary from 30-1000 micrograms from one to the next. Same story with bread. You could go buy some bread in the supermarket, and one slice of bread in the same package might have 50 micrograms, the next slice could have 1100, and so, yeah, this fluctuation is what's hurting us.

Shawn Stevenson: Wow. I think it's important, of course, to touch on what can happen, because in past decades people have seen issues with deficiency in iodine, but you state very clearly in the book in study after study that we've really over-corrected for that. So number one, can we talk about what happens when we have too much iodine? Because I think the thyroid, one of the ways that it gets rid of it is through producing thyroid hormones, which can cause some other stuff. So first of all, let's talk about that. What is the big concern right now? And many people are dealing with this and have no idea about it.

Dr. Alan Christianson: Totally. And thyroid disease is on the rise, the thyroid cancers, hypothyroidism, Hashimoto's, Graves, most of those have roughly tripled in the last several decades, they're going up dramatically. So back to that pump idea, the way it pulls it in. So once you've got iodine inside your thyroid, there's really an irreversible set of reactions that occur that yield thyroid hormones, and your body can't just have 100 times extra thyroid hormones. That's lethal. So you've got a fuse. I've got the power on, that's how we're interacting right now, and if you took my wiring and put 100 times the current that it's supposed to have, we'd blow a fuse so the house wouldn't burn down. And your body has the exact same thing. So one of the paradoxes is that extra iodine can shut down your thyroid.

Shawn Stevenson: That is so nuts. And this is something I know a lot of people are hearing for the first time, because we generally think we need to get it in through our

diet.

Dr. Alan Christianson: Well, and it's such a tried and true thing, the most dangerous acute situation in all thyroid disease is called hyperthyroid storm. And that's where the thyroid is cranking out more hormone, and it causes... The excess hormone causes the reactions that cause it to make more hormone, and it's fatal, it's no joke. It's an emergency room visit. And in that moment, the only way you can definitely shut down the thyroid when you need to that quickly, is by mega-dose iodine.

Shawn Stevenson: Wow, wow. Well, just for folks listening who have seen benefit by getting some form of iodine in, there is such thing obviously as iodine deficiency but as mentioned, in our culture, we've really over-corrected for this deficiency and now some of the data that you showed, maybe 30% to 40% of adults are consuming unsafe levels of iodine right now.

Dr. Alan Christianson: You know, it's fascinating. We've looked globally, and back in '91, there was about 112 nations were categorized as severely iodine deficient by the World Health Organization, and that was a travesty. We had about a billion people that their brains couldn't develop fully because of the lack of a cheap enough nutrient, and it was a righteous campaign. They worked hard, Public Health did what it was supposed to do, and they reversed it. By 2014, that 112 number was brought down to exactly zero. So it was a huge win. But on the flipside of that, back in 1991, the number of nations who were categorized as at risk for iodine excess was zero. Well now that number is 52, and the US is one of those. And then we look further, like sub-populations per age, gender, ethnicity, and like you said, many sub-populations, 30% to 40% of people are way up at unsafe ranges.

Shawn Stevenson: Wow. Again, a lot... This might be a game changer. Well, will be for a lot of people to find this out. Could you share... There was also the FDA's Total Diet Study that you talked about, can you share that?

Dr. Alan Christianson: That was pretty wild. So kind of back to the slices of bread or whatnot, they also looked at how it's changed over a similar time frame. And this is a recurrent theme, I don't know if you've caught that, but yeah, 1990s, 2000, 2010, 2020, we're seeing thyroid disease go crazy. And this is when the iodine levels in the modern world has gone up as well in lockstep, so the Total Diet Study showed that of 23 of 25, higher iodine dietary sources, yeah, 23 out of

25 went up many by threefold in that time frame.

Shawn Stevenson: Alright, now again, I want folks to really get this that who've been struggling with thyroid issues for years and trying to figure this thing out, and this is so left out of the conversation. This is really the first book to bring this to the forefront in this way, that too much iodine is likely driving a huge amount of the issues we're seeing right now. Another thing, because again, from my practice to many of my colleagues, same thing, we are looking at, how can you supplement, let's supplement, iodine is so important. It is, it's absolutely important, but there is a very thin line of what is optimal. And you talk about it in the book as well the situation with multivitamins. And can you just share a little bit the data on that, because that is another big place of concern where we might be getting too much iodine and causing all kinds of thyroid dysfunction.

Dr. Alan Christianson: Yeah, that's crazy. There's these big random unexpected sources, and that's one. So multivitamins have some, and most were calibrated in time frames in which a little extra was useful for many people. However, that time has come and gone. The other problem is that I mentioned how iodine is this volatile thing, it's hard to make stable in products. So in multivitamins, one study polled 120 common products and analyzed 60 of those, so it looked at how much iodine was on the label and how much iodine was really in the pill, and those two numbers were never within even 5%. And in many cases, it was three to four times as much, so some multis were listing that they had 75 or 100 micrograms, they had three or 400 micrograms on assay.

Shawn Stevenson: Oh my gosh. Oh my gosh, so this is something to be more conscientious about. And obviously, this is a big issue and we'll keep circling back to this and trying to dial in the optimal amount of iodine for ourselves, but also I love that you dive in because this is really a thyroid reset, it's a thyroid reset diet. You talk about many other things that are contributing to our high rates of thyroid disease. So first of all, I want... Before we even get to that, I want to talk about... Because it's not just about hypothyroidism or hyperthyroidism, let's talk about some of the other thyroid conditions that folks might be experiencing.

Dr. Alan Christianson: Yeah, you mentioned two big ones, so the main ones are diseases that affect the function of the gland, the structure of the gland and the immune system surrounding the gland. So the structure of the gland, the gland can develop

cancers, the wrong cells can grow and grow out of control, the gland can develop nodules and goiters, it can get big and lumpy, so that's the structural diseases. Now, you mentioned some of the functional diseases, it can make too little hormone or way too much hormone, and then the last part is autoimmunity, so the body can attack the gland by mistake.

Shawn Stevenson: Let's talk. We got to talk more about this.

Dr. Alan Christianson: Yeah.

Shawn Stevenson: So this would be in the camp of Hashimoto's.

Dr. Alan Christianson: Yeah.

Shawn Stevenson: So what does that look like, how does that come about?

Dr. Alan Christianson: You know, that's basically... So I mentioned how iodine sticks onto this protein. The protein is thyroglobulin, and it's a really long chain that has many different tyrosyl residues, many possible places iodine could stick. I grew up in Minnesota, and we also like a coat rack or like a mudroom, where you get in the house first, and so the relatives come over in the coat rack's full and there's like coats on the bed and coats wherever and... So yeah, so you've got a certain number of hooks on the rack, right? Then you got coats that is draped on top of coats.

So what happens when there's too much iodine, you've got these tyrosyl residues, places iodine should go, they've been filled up a long time ago. So you've got iodine all over the place, so rather than 11 to 13 atoms of iodine per molecule, you get 50 or 60. And what happens is, those extra iodine atoms, remember, this is like bleach, it's on the same chemical column as chloride, and it acts in similar ways. So you've got bleach in your thyroid, it's creating free radicals, and your immune system freaks out, your immune system starts to go after that. So now your thyroid proteins look like they're a dangerous thing trying to hurt you, so that's the whole set up for autoimmune thyroid disease.

Shawn Stevenson: I always try to bring folks back to the realization of when we talk about auto-immunities, it's your body is attacking itself, which is like, "What's wrong with my body? Why doesn't my body like me?" And it's really just your body thinks

that it's doing something to protect you in a sense, and oftentimes it's responding to our environmental inputs, and the things that we're exposed to, especially if you're not born with the condition, like something happened. And you've said a couple of things throughout that I don't want to skip over. You mentioned a relationship to the development of the brain, and I actually talk about this in Eat Smarter, and how thyroid hormone is involved in cognitive performance. And also your last book really... It is the absolute pinnacle in works around liver function and how important that is, and these two powerful organs have an intimate relationship as well, the thyroid and liver. Can we talk a little bit about that?

Dr. Alan Christianson: Yeah, for sure. Very much so. So the thyroid hormones are super exacting and the amount you need can vary per part of your body and per time of day and per circumstances, so I think about it almost like you've got federal oversight and local government. So federal oversight, you've got your brain... You talked about the HPAs, so the hypothalamus, pituitary, these things are overseeing what comes out of the thyroid, and that's like the first big step, that's like the federal government. But then past that, all the local levels of regulation include the liver and the cells, and how they convert and activate those hormones. So the thyroid hormones, the liver can remove particular iodines and rearrange those to change the effect per the body's need in that moment.

Shawn Stevenson: That's so cool, so cool. And can there be any down... Would this actually be downstream or can there be upstream interactions with our adrenals, for example, which is on that HPA axis?

Dr. Alan Christianson: Yeah, so what happens there is the adrenals, their slope, their coming and going, cortisol makes this spike, this shutdown, there's this gentle daily slope, and so what that does is it creates the right cell permeability for hormones, including thyroid hormone. So if there's not a good cortisol slope, the thyroid might need to work harder to adapt to that because the hormones aren't really getting through to where they're needed properly.

Shawn Stevenson: That's interesting, very interesting. Alright, now to circle back, let's talk about some of the other things that can contribute to these, again, skyrocketing rates of thyroid issues, besides our food and supplements, which again, I want to keep bringing this back because I don't think a lot of us realize the variety as far as the range of iodine we might find there, but what are some of the other things contributing to this epidemic that's taking place with our

thyroid?

Dr. Alan Christianson: Yeah. There's three big macro-drivers for thyroid disease. You mentioned Hashimoto's. So Dr. Hiroko Hashimoto wrote his paper defining thyroid disease as autoimmune back in 1907, and 2007, researchers said, "Well, 100 years have passed, what do we have to show for it?" And they realized that Dr. Hashimoto may not have been proud. There's a lot more that needed to be done, so they set to figure out "What can we say now with certainty?" And the three drivers they talked about that are pretty irrefutable by any angle of data analysis are age, gender and iodine status. That's what they came down to. So age and gender, that's about the cards we're dealt. They're called the existential risks. We can't do much about those. There are factors that are more historical, like back in the newer days of radiation, people would get their tonsils irradiated for a sore throat, and it worked like gangbusters, but they would get thyroid disease decades later. So there are things like that, but as far as things that we know are drivers that we can control, iodine's just the biggest one.

Shawn Stevenson: Awesome, okay. Now what about... And these are just jumping up for me. What about some of these... And you talked about this as well, in relationship to the liver, about the toxicants that we're exposed to. I know the thyroid has... It's an interesting resonance that it has with the environment. Is there anything in our environment that might be contributing to the problem, anything with our use of plastics, anything like that?

Dr. Alan Christianson: You can take a list of 300 different chemicals, and people that have thyroid disease will be a little higher in some of those than others, so it's certainly a contributor, and the thought is that some things get pulled by that same pump and concentrate in the thyroid to a greater degree than they might even somewhere else in the body.

Shawn Stevenson: Okay, so is there anything specific we might want to be on guard for?

Dr. Alan Christianson: So one big one is, another big hidden source, is the topical compounds. Cosmetics. That was something that really shocked me, and what a factor that was.

Shawn Stevenson: Tell me more, Dr. C.

Dr. Alan Christianson: So, iodine, we absorb it... This is pretty wild. I learned this not too long ago. We breathe it in. So if you're... Yeah, no joke. There were some areas in Ireland where they had these massive kelp beds that had washed ashore, and this village was right up against that, and dietarily, they should have all been deficient. They weren't, and so they did isotope assays, and you can breathe it in, you can actually... There's almost no way we can't absorb it. We're really good at getting it inside of us, so we can breathe it, we can ingest it, and it comes across our skin really well. So in 2018, the FDA found that many hospital workers that were using iodine-based hand sanitizers, they were getting alarming rates of thyroid disease, so they started checking their iodine levels and saw that they had these massive, excessive, unsafe amounts. So they banned iodine from hand sanitizers. Now, the next step, which is being looked at is personal care products. They have yet to act, but that is in the works right now. We now know that about a quarter to a third of... Whether it's natural or not doesn't matter. Personal care products have ingredients that contain unsafe amounts of iodine.

Shawn Stevenson: Oh my goodness gracious. It's a lot. And I know again, folks, we start getting concerned. There's a lot of different things for us to be aware of, but you simplify things in the book. And I want to talk more about that, I want to talk about how can we start this process of resetting our thyroid function. And also, I want to talk about what if folks don't have a thyroid, and we're going to do that right after this quick break. Sit tight, we'll be right back.

One of the biggest issues facing our world today is the health of our immune system. And our immune system has many different dynamic parts. We have an innate immune system, and we also have an adaptive immune system. Our adaptive immune system has an intelligence that helps us to adapt to any pathogen that we are faced with. And our nutrition is a big part of this equation, because our immune cells are made from the foods and nutrients that we consume. And one of the most powerful nutritive sources proven to help fortify our immune system is highlighted in the study published in Mediators of Inflammation. They discovered that the polysaccharides in Reishi medicinal mushroom were found to enhance the proliferation of T-cells and B-cells of our adaptive immune system.

These were found to have the capacity to be immunomodulators, helping to up-level the function and intelligence of our immune system, or if our immune system is overactive, to help to reduce and bring down that immune activity.

Again, this is called immunomodulation. And also, inflammation of many different viruses that we might be exposed to is one of the big issues. And one of the viruses that we're facing right now has a tropism or target towards inflammation of our lungs. In another study published in Patents on Inflammation and Drug Discovery revealed that the renowned medicinal mushroom Reishi has potent anti-inflammatory and anti-allergic action, plus, again, it possesses immunomodulating capabilities.

Super remarkable. It's one of the things that's been utilized for centuries that we have access to today. But we want to make sure that it is dual-extracted, meaning that it's a hot water extract and alcohol extract, so we're getting all of these benefits that are noted in studies like these. And the place that I get my Reishi from, that does it the right way, organic, high quality Reishi without any nefarious substances coming along from these random companies that are putting these formulas together, is from Four Sigmatic. Go to foursigmatic.com/model, that's F-O-U-R-S-I-G-M-A-T-I-C.com/model, and you're gonna get 10-15% off all of the medicinal mushrooms that they carry. And by the way, Reishi is great for your sleep as well.

This is another peer-reviewed study published in Pharmacology, Biochemistry and Behavior, found that the renowned medicinal mushroom Reishi was able to significantly decrease sleep latency, meaning you fall asleep faster and increase your overall sleep time, and also increase your sleep efficiency. So much good stuff. And this is one of the things about real foods that have a storied history, is that they're not just good for one thing, they're good for many things. It's why I'm a big fan of Reishi and I have a cup many nights of the week before bed, about 30-45 minutes before bed. Definitely helps with improving sleep quality, but also beneficial for our immune system. Maybe have it with a little bit of whole natural-source high quality fats like MCT oil, coconut oil, maybe a little bit of ghee, whatever it is that you're into that helps to cut the bitterness, maybe a little bit, a couple of little drops of some stevia, some English toffee stevia, chocolate stevia, just to make it nice and palatable, or some folks have their Reishi tea all by itself. Either way, it's one of the most effective things right now when immune health is a top priority. Check it out, foursigmatic.com/model. And now, back to the show.

Alright. We're back and we're talking with New York Times best-selling author, Dr. Alan Christianson about his new book, The Thyroid Reset Diet. This is a must-have. And before the break, we talked about a couple of other big

concerns around thyroid issues, like, number one, what if you don't even have a thyroid? So many folks have had their thyroid removed. It's been kind of a common practice in recent decades. So I definitely want to talk about that. And of course, we want to dive in and talk about some solutions. What are some of the things you can start to do today? So, Dr. C, can you first and foremost... I know I've received this question many times, a lot of folks have been asking about this, what if I don't have a thyroid? We've been talking about thyroid health, but what if I don't have one?

Dr. Alan Christianson: That's an awesome question. So I mentioned about how changing iodine can improve how your thyroid works. Well, if you don't have one, that's different. But there's two parts to that. So I talked before about how there's your brain telling your thyroid to work, and there's this local government controlling how your body uses thyroid hormones. So with extra iodine in the body, it affects both of those. It affects how your thyroid works if you've got one, but if you need thyroid medication because you don't have one, it also plays havoc with how your cells respond to those thyroid hormones. And that's why so many people can be taking what should be sufficient, but they don't feel it. They're still struggling and still symptomatic.

Shawn Stevenson: That's crazy. So it...

Dr. Alan Christianson: A crazy thing too is it actually... This is not common. I used to say that if someone doesn't have a thyroid, that's never going to change. I've seen that change. We've had people to where there must have been a few cells that were left post-surgery, but they've grown back. So that's not common. But yeah, the... But even apart from that though, many that don't have a thyroid, when they start to regulate their iodine, they notice their symptoms doing better. They were on the same meds they were on, but they weren't working before, and they start to absorb the hormones more effectively and they see their symptoms controlled better.

Shawn Stevenson: So, bottomline, there is hope for folks if they...

Dr. Alan Christianson: There is hope. There's rarely hope in the sense of not needing to take thyroid medication, but there is hope in the sense of not feeling like you did before this all happened.

Shawn Stevenson: Yeah. Okay. That's good news, that's good news. But I got to hear more

about... And I know you mentioned that this is uncommon with thyroid and I've... But I know I've heard this many times, thyroid tissue growing back. And it just gets me in the mindset of the liver being able to regenerate.

Dr. Alan Christianson: You know, dude, if you'd have asked me about this maybe one of the times we talked seven, eight years ago, I wouldn't have been optimistic about this, but there's been these new studies. And what they've shown, one of the more dramatic ones, they took a large group of people that were pretty severely hypothyroid. They had been that way for about four, 4.2 years on average, and their scores showed they were three times above the normal range. They were completely abnormal, their glands were really shut down. So for three months, all they did was an iodine regulated diet, basically The Thyroid Reset Diet. And at the end of that three months, 78.3% of people had normal thyroid function with no medication.

Shawn Stevenson: Mind blowing.

Dr. Alan Christianson: Well, and actually, there's more levels to this. So the remainders, those that didn't get better, there was three groups, there was those to whom their levels were off by much higher amounts and they weren't normal, they were darn close. Their scores were... A normal range for a TSH can be about 0.4 to 4.5. Some people were 200 or 150 and they came down to 20. So they weren't normal, but they were heading there if they'd given more time. That was one group. Another group, they measured their iodine status, the ones that didn't respond, and many of them, perhaps the instructions weren't clear enough, maybe, I don't know, maybe they weren't, didn't take it seriously, whatever, but they weren't at the targeted window. And the last group was those to where they did get to the targeted window, but their levels didn't budge, and that was only about 3% of people.

Shawn Stevenson: Wow that is incredible. That's incredible. I want to drive this point home really, because of course, there's going to be many folks who don't have a diagnosed thyroid condition, but they might be struggling with weight loss, they might be struggling with chronic fatigue. I want to drive this point home. How much does our thyroid really matter in that equation?

Dr. Alan Christianson: It's cool, you said those two things because they're two sides of the same coin. When your body works well, you take stored energy and you make power out of it, you turn into gasoline and you go, You feel good and you're active, but

when that's not working right, that stored fuel is stuck and then that's the weight loss resistance. So we measure basal resting metabolic rate in people, you can simply measure someone's oxygen utilization at rest, and you can calculate how well they're burning energy and those with thyroid disease, they've been shown to have 60% to 70% suppression. Lower basal metabolic rate, so basically, they could have their metabolism down by 1200 calories more than it would be otherwise. I mean, like 12 hours in the gym. That doesn't happen.

Shawn Stevenson: Repeat, say that again. You got to say that again.

Dr. Alan Christianson: So people could have a resting metabolic rate of 2200 calories with hypothyroidism that could be as low as 900 or 1000 resting metabolic rate.

Shawn Stevenson: Yes, this is what we've been talking about for quite some time now, are these epicaloric factors. These things that are determining your rate of calorie expenditure that are outside of the realm of the conventional conversations that are just so limiting and frustrating for people who are doing the things, they're counting their calories, but the things that are managing those things are discombobulated.

Dr. Alan Christianson: Well, and if your resting metabolic rate is around 1000 calories, and if you need to have a deficit of 500 to 700 calories to lose weight, that's just not doable. You can't, you can't nourish yourself like that, it's just not possible.

Shawn Stevenson: I hope that this is speaking to some folks hearts who've been battling with this issue and doing the calorie restriction, and then you've got "weight loss doctors" out there with memes making fun of people who say that they're in a calorie deficit, but they just act like they're lying or they're not trying hard enough.

Dr. Alan Christianson: I can think of so many times where people just like that, we've sat down with them after measuring the basal metabolic rate and seeing that it's like 800-900 calories, and they just break down into tears. They're like, I knew something like this was happening, I've been starving, I've been struggling, I've been exercising and things haven't budged.

Shawn Stevenson: Alright, Dr. C, let's talk about how do we fix this. Let's talk about some real solutions, and by the way, again, this is all in The Thyroid Reset Diet, and Dr. C

has had such an impact on me in so many different dimensions. When I talk with you, I start... I think differently, when I walk away from the conversation. I always pick up a new way of thinking, not just a new thought, but a new way of thinking about something.

Dr. Alan Christianson: That's awesome.

Shawn Stevenson: And so let's dive in and talk a little bit about this. What is The Thyroid Reset Diet? And you mean that, you mean like...

Dr. Alan Christianson: I do.

Shawn Stevenson: We're resetting what things are doing.

Dr. Alan Christianson: Yeah, so this came about, the study that I mentioned, there are imaging tests and there are medical procedures that require people to be in a low iodine state. So we had these medical low iodine diets for a long time. Generally, they were only done for a few weeks at a time before a procedure, but the observation was many people spontaneously had their thyroid function get better from that, so that's why they did studies that were done on a longer period. So what's different about The Thyroid Reset Diet is that it's nutritionally complete, it's whole foods, it's a healthy diet, it's not just cut these things out. It's eat foods that are good for other reasons, and you can easily do it if you're autoimmune Paleo, if you're vegan, if you're gluten-free, if you're just generally healthy. It's easy to work around any of those ways, and there's two stages to that. The first is that reset stage, and that could be three, six, maybe nine months, it's based upon how someone's thyroid responds. But if they get to a low enough window, the thyroid can unload that built up iodine that's hurting it. So once they then corrected their function, now they've got more latitude back again, so now they just think about maintenance ideas, they can have more leeway.

Shawn Stevenson: Okay. And you have these categorized as well, you got green light categories, you got yellow light, and just very simple principles. And there's so much food that you can eat.

Dr. Alan Christianson: Yeah.

Shawn Stevenson: It's not a deprivation thing, it's just like, Let's help your body to unload this

iodine.

Dr. Alan Christianson: Well, and that's a part I'm really excited about is that, yeah, there's no food categories that have to be eliminated per this context. Someone is cutting things out, they easily can but there's always easy parallel swaps, and it's so simple. Yeah, the reset is green light foods, whenever they're available, and then maintenance is up to one or two yellow light foods per day. It's just that easy.

Shawn Stevenson: Alright, before this was off camera, off-recording, I asked you about... I was like, Alan, listen, am I just crazy or do I remember my grandmother putting some kind of like iodine solution on a cut that I had and you were like, No, no, no, Shawn. You remember correctly.

Dr. Alan Christianson: It's been used for a long time, and it's a really useful thing, it's not the villain, and it does a lot of helpful things. It kills bacteria, however, we do absorb it topically, and there's still a bit of a... You love myth-busting. There's still a bit of a myth going around that you can put iodine on your skin as a diagnostic test, and the story is that if you paint on a square that's two inches by two inches, if that square disappears in 24 hours, your body was hungry for it, that's the gist of it. And the bizarre thing is a big study was done answering that very question, and in this study, they had three groups of skin types. So one skin type was those that had normal thyroid function, one skin type was those that had thyroid disease, the third skin type, it was cadaver skin. It was dead people. Now, between those three types, the differences were completely random, there was no clear difference.

Shawn Stevenson: Wow.

Dr. Alan Christianson: And that was done in 1932, so we learned a long time ago that it doesn't work.

Shawn Stevenson: Oh my gosh, that makes me think of the Goonies, It's dead people, Mikey. Oh my gosh, yeah, the things are just like this, and if I remember it was like a reddish color. Yeah.

Dr. Alan Christianson: Yeah, yeah. So what happens is kind of funny, but we mentioned iodide, and iodine, so there's some iodine in that mixture, and when it goes on your skin, it interacts with oxygen and it oxidizes into iodide. Iodide is invisible. So it's not really going anywhere. It's just becoming clear when it hits the air.

Shawn Stevenson: Interesting, interesting, and I'm bringing this point up because as part of this reset, of course, food is a target, but let's be a little bit more conscientious about the stuff we're putting on our bodies, the stuff we're putting on our skin. And a friend of mine who is wonderful scientist, he just said... I swear, right the same day I got your book, he sent me a new iodine product that he developed, so I'm going to need to leave that one on the shelf. I think it'd be great, again, if somebody is in some kind of massive deficiency somehow, which is hard to do in our world today, but be more conscientious of the supplements that we're taking as well. So these are all part of the reset, right?

Dr. Alan Christianson: Yeah, the easiest thing someone can do is just to avoid iodine in supplements and then scour their personal care products. So PVP is the main ingredient, there's a few other names for it, but also help kelp extract in the more natural products. Scour your personal care products for those things, and then think about the big high iodine food sources. The acronym made was BODES. I should have called you up and talked you through it. I struggled to get a good acronym, this is the closest one I could get, but... So bread, and it's funny because it's not even gluten or grains, it's commercial bread specifically. And then O for ocean products, so seaweed, some types of seafood, but not all, and then D for dairy, E for egg yolks, and S for salt. And there are swaps for all those, but if you're not discriminate with those categories, you can get too much.

Shawn Stevenson: And I love that you bring up calling me for the acronyms, you know. That's my thing. I think we talked about...

Dr. Alan Christianson: I know you're good at those things.

Shawn Stevenson: INTHEDM that was my acronym. So yeah, these are all really actionable, simple things to do, but you also... There's not just nutritional changes as well, because there's also an emphasis in other areas like movement, for example, that are going to be helpful.

Dr. Alan Christianson: There's been so many papers about the relevance of exercise to thyroid symptoms and thyroid health and yeah, you and I are big fans of that for good reason. It's the magic fountain of youth, and it helps everything so much.

Shawn Stevenson: Yeah. I think one of the studies that I saw was 30 minutes of walking a day. It

was very simple things, 30 minutes of walking day or maybe it was like 50 minutes three times a week.

Dr. Alan Christianson: Yup. There was a Thyroid Quality of Life symptom survey, the THY-QOL survey, and they shifted something like 50% as far as the severity of their symptoms by this most meager exercise protocol. It was a hugely rewarding outcome.

Shawn Stevenson: So again, these are simple actionable tenets all put together in the framework in the thyroid reset diet. So where can we find the book? The book just came out when this recording has come out. Where can folks pick up the book and where can they get more information overall?

Dr. Alan Christianson: Yeah, anywhere books are sold, we expect. And we made a Kindle and also the audible version for those that prefer audio format. And to find out more, one easy thing, there's invisible iodine, there's a free docu-series that talks about more detail on those big hidden sources and what they do and how to work around those invisibleiodine.com.

Shawn Stevenson: Oh, wow. That's going to be helpful. So, so many great resources for us to take advantage of, Dr. C, always love talking with you and garnering some wisdom from every conversation. I appreciate you so much. So this book is going to be out and available everywhere books are sold, and also getting the Kindle version is super helpful. I like having digital versions. I'm more of a physic... And just shallow to everybody who likes that good physical. They got that physical book in their hands.

Dr. Alan Christianson: That is true.

Shawn Stevenson: I'm definitely that person. I even told you, when you sent me the digital copy, I was like, Hey, let me know when the golly's are available, and so...

Dr. Alan Christianson: When the real thing comes out.

Shawn Stevenson: And now, but I like having the digital because if I'm just out on the road, if I'm just somewhere and I want to go and look something up, I like having that accessibility, so now I'm becoming more of a both and kind of person with my books.

Dr. Alan Christianson: Then there's the audio too. Some books, I love having all of those and you can

go back and forth from audio to digital and...

Shawn Stevenson: Yeah, it's so cool. We live in a really amazing time to have access to this kind of information. I know when you and I were in school for me, it was... I went to a private university, the first school I went to, which was kind of pricey and they should have... But they were transitioning from the Dewey decimal system.

Dr. Alan Christianson: Oh, wow.

Shawn Stevenson: Late. Alright, this is late, this is right at the turn of getting to the 2000s. It's just like, What? I paid for this? They did have a small computer look-up system, but they did still have the Dewey decimal cards to go look stuff up and getting access to this kind of information, you either had to go to a seminar, you had to buy some kind of a program randomly, if you could even find them because man, where were you going to get it from if there's no internet and also just knowledge being really confiscated and kept to those in the know, those with power.

Dr. Alan Christianson: Yeah.

Shawn Stevenson: But now, it doesn't matter who you are, you can get access. You can just click play and learn the thing and execute it in your life. So cool.

Dr. Alan Christianson: Yeah, for sure.

Shawn Stevenson: And you are one of my favorite people to learn from, and I just really appreciate your wisdom and all the work that you put into this stuff, and before I let you go, I've got to ask you this. I haven't asked anybody this in quite some time.

Dr. Alan Christianson: Okay.

Shawn Stevenson: It's probably been months, but I know that this is a very interest... We'll say interesting time in humanity. What right now is the model that you are striving to create for the rest of us, for the rest of the world, with the way you live your life? And I know that part of that is, because we talked about this, it's going from just being a physician, which is incredible, to an author, which is incredible, but to making it accessible in implementation, in other practices

in your non-profit. So could we talk a little bit about that; what's driving you right now? How are you creating a model for other people?

Dr. Alan Christianson: You know that's the thing, is it's really easy to look at the affairs in the world and just throw your hands up in disgust and whatnot. And when I get to that place, I just think, okay, so what can I do right now? What's in my little space? And there's an infinite list of things that I can't do anything about, but there's a short list of some things that I can do something about, and what can I do about those? So in the thyroid world, there's a lot of good things that have developed from natural medicine. There's a lot of insights that have really helped a lot of people, and some of those are now getting respect in the conventional world, and conventional doctors want to do that in ways that are going to be safe and effective for them.

And then also in the natural side, they're realizing that some of the things that are done are safer and more evidence-based than others. So I've pulled together some peers that I hugely respect; we've got Dr. Brittany Henderson, one of the leading researchers and clinicians in thyroid disease. Gary Chapman, one of the world's leading thyroid surgeons. So we've got this all-star cast in our board, and we're doing training. We're the American College of Thyroidology and we're non-profit, and we're putting out training for conventional natural practitioners of all types, and there's a whole two-year curriculum we have toward diplomate of the American College of Thyroidology. So we're doing our best to elevate thyroid care.

Shawn Stevenson: Awesome. Dr. C, thank you so much again for your wisdom, thank you for hanging out with us, and thank you so much for writing this new book. I think we can really, really use this right now.

Dr. Alan Christianson: Good to see you, Shawn. Thank you.

Shawn Stevenson: Awesome. Dr. Alan Christianson, everybody. Thank you so much for tuning in to the show today. I hope you got a lot of value out of this. This is such an important topic because it is affecting tens of millions, potentially hundreds of millions of people here in our society. I say that because right now, here in the United States, we have 200 million folks who are overweight or obese and battling with issues with their weight, and it is largely related to what's happening with your thyroid. And right now, about 43% of our citizens are clinically obese, and we're on pace just within the next few years to hit 50%

of the population. This is a big part of it, alright? Of course, there's issues surrounding the foods themselves, there's issues surrounding stress, there's issues surrounding environmental toxicity, there's so many different things that are pouring into this matrix of madness, but one of the things to address, and it just happens to help everything else work better is addressing the health of our thyroid, and one of the biggest tenets for many years in this space was, "You got to get iodine, your thyroid needs iodine. We got to heal it, we got to get that iodine in."

But now we know. Now we can take a meta perspective, and just like so many things, we can overdo it, alright? That's our tendency here in our culture; if some is good, more is better. Double triple time it, but the thyroid doesn't allow it. It doesn't allow for it. It has a much narrower window of optimal. Too low, too much can hurt us in big ways, and so getting more on target with nourishing our thyroid, especially if you've been dealing with issues of chronic fatigue, issues with battling unwanted or excessive body fat. These are things to target. Even if you don't have a diagnosed thyroid condition, maybe you might want to give a thyroid reset a look to know more about the foods that fit into the category to help your body to pump out and get rid of the excessive amount of iodine that you very possibly might be carrying.

So again, this is super interesting stuff, and it's just one dimension, the thyroid does not operate in a vacuum. Doing good things for the rest of your body is probably going to be pretty good for your thyroid, and vice versa. Doing good things for your thyroid is probably going to be great for your heart and for your brain and for your joints. This is the thing about real food, and doing things in a way that is aligned with what our genes expect of us. And today, one of the biggest issues, we live in a very abnormal environment. We're eating a lot of processed foods, where that's largely where we're getting these things in, is through processed food consumption. And on top of that, of course, the environmental exposure to so many... There are literally tens of thousands of synthetic chemicals that we're exposed to on a daily basis.

It's insane, just in the very air that we're breathing, our food supply, obviously, our water supply, the products that we put on to our skin. The list goes on and on and on. Continued exposure, alright? But what we can do, we can't be neurotic and become like John Travolta in that plastic bubble, shout out to the boy in the plastic bubble. I don't know if you've ever seen that one. Not a feel good movie, alright? Not a feel good movie, but we don't want to become like

that. We want to be able to live our lives and just stack conditions in our favor to be as healthy as possible, because the great thing about the human body it's incredibly intelligent and resilient in dealing with things that it might not have been exposed to. It's very adaptable. We're like some real life X-Men, we can adapt and change and evolve and become more.

It's not necessarily we're going to get claws popping out of our knuckles. Some might, I don't know, but more so we become super human with optimal function of our brains and our bodies. I hope you got a lot of value out of this episode today. If you did, make sure to share this out with the people that you care about, and of course, you can tag me, I'm @Shawnmodel on Instagram and Twitter, and I'm at the Model Health Show on Facebook. And we've got some epic shows coming your way very soon, so make sure to stay tuned. Take care, have an amazing day and I'll talk with you soon.

And for more after the show, make sure to head over to themodelhealthshow.com. That's where you can find all of the show notes, you could find transcriptions, videos for each episode, and if you got a comment, you can leave me a comment there as well. And please make sure to head over to iTunes and leave us a rating to let everybody know that the show is awesome, and I appreciate that so much. And take care, I promise to keep giving you more powerful, empowering, great content to help you transform your life. Thanks for tuning in.