



EPISODE 779

The Truth About Menopause, Weight Gain, & The Hormone Shift

With Guest Dr. Taz

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SHAWN STEVENSON: Welcome to The Model Health Show. This is fitness and nutrition expert Shawn Stevenson, and I'm so grateful for you tuning in with me today. On this episode, we're going to be covering how your gut health can be impacting weight gain, in particular, in relationship to perimenopause and menopause. We're also going to be looking at the connection between inflammation and weight gain and how our fat cells themselves can be contributing to more symptoms during menopause. We're going to be discussing the real role of hormones in regards to weight gain. And also, this category of DIRTY hormones that our special guest is going to be covering and how all of these are influencing our metabolic health and our health outcomes. This and so much more. This is an absolutely important and amazing conversation with our incredible guest, Dr. Tasneem Bhatia, a. k. a. Dr. Tas. And before we get into this conversation, let's jump over to the Apple Podcast Review of the Week.

ITUNES REVIEW: Another five star review titled, "Our Personal Vibe Check" by Hizal. This podcast has truly reshaped my mindset and my daily habits. Sean not only has wonderful lessons and reminders for all of us, but he also acts as a personal vibe check when you listen to each episode. Recommended this podcast to so many and I won't stop till everyone hears all the knowledge that Shawn drops in each and every episode. Thank you Shawn for spreading magic and hope in our lives.

SHAWN STEVENSON: Thank you kindly. I appreciate you so much for leaving that review over on Apple Podcasts. Lots of love. Let's put those interview skills to the test because we've got an absolutely amazing guest today.

Dr. Tasneem Bhatia, better known as Dr. Taz, is a board certified physician, specializing in integrative and emergency medicine, in pediatrics and prevention with expertise in women's health weight loss and nutrition. She's the author of several bestselling books, and she's been featured everywhere from the Today Show, Access Hollywood, The Dr. Oz Show, Good Morning America, The Doctors, and so many other media outlets. She's a contributing editor to Prevention Magazine and an assistant professor at Emory University. And again, this is an important and powerful conversation to understand the hormone shift. Let's dive into this conversation with the amazing Dr. Taz. Dr. Taz, thank you so much for coming to hang out with us.

DR. TAZ BHATIA: Oh, this is amazing. I'm so excited to meet you and be here.

SHAWN STEVENSON: I would love to talk about weight gain. That's associated with menopause. This is something that hasn't been talked about very much, and it's something that millions of women experience, and there is a solution. And your book is all about education and real world solutions, practical solutions, what I love so much about it. So let's talk about the weight gain associated with menopause. What's going on there?

DR. TAZ BHATIA: You know, this is something that continues to bring women into the practice. Women will pull me, you know, on, on a street corner. It's so frustrated and upset by the fact that they're gaining weight. And they usually see it first with a lot of belly fat. And the next thing you know, their size is changing and they're completely distraught, but here's what's happening. And this is where I bristle a little bit about the nature of a lot of the weight loss conversations right now, because what's really happening is that any time, any age, honestly, when you experience a hormone shift, your blood sugar levels are changing.

So when estrogen drops, when progesterone drops, if your thyroid shifts, if your cortisol shifts, right, it's going to have a direct impact on what blood sugar and insulin is doing. That in turn determines weight. So we have all these people, you know, under eating, over exercising, over medicating, you know, doing everything they think they're supposed to be doing to lose weight, but not understanding that at the end of the day, it comes down to managing blood sugar, managing insulin and understanding the direction their hormones are going in. So for women in perimenopause and menopause, and remember perimenopause is early now, it can drop all the way down to about 33, 34 and then last all the way into your fifties.

Menopause we define as no period for one year, you know, for the entire segment of women where their blood sugar is shifting and changing. They're not being given the tools to really own that shift, and to own that change, and then be able to implement strategies that are going to work. And I'm right there with them. I've been through this too. Like what just happened? You know, why can't I put these pants on? You know? And so I'm really, really empathetic about this conversation. And it's, you know, a lot of women already have so much shame around weight and so much guilt about guilt around weight, that we need to blow this open and help them understand that this is a chemistry issue and we've got to solve the chemistry.

SHAWN STEVENSON: Yeah. Unfortunately, of course, what we tend to do is berate ourselves, beat ourselves up. I'm not doing enough. Let me work harder. And instead of, let's take a peek inside and also just the revelation that my hormones are in fact changing and my hormones are controlling my metabolic health and this kind of outpicturing of what I'm seeing in the mirror. And you mentioned how, you know, these changes can affect things like our thyroid.

DR. TAZ BHATIA: Mhm.

SHAWN STEVENSON: And also our gut health as well. And this is one of the things that you talk a lot about.

DR. TAZ BHATIA: Yes.

SHAWN STEVENSON: So how about this connection with our gut health, and menopause, and how that might play into weight gain?

DR. TAZ BHATIA: You know, I continue to be amazed and fascinated by how interconnected the body is. And I feel like we do an incredible disservice when we try to talk about things in one lane. Our hormones are directly impacted by what our gut is doing. And our gut is impacted by what our hormones are doing. I often take, you know, patients or, you know, whoever is willing to listen down this journey of what actually happens to a hormone. If we talk about estrogen, for example, right? Estrogen depends on the gut. To be metabolized effectively to then be wrapped up by the gallbladder excreted out into the colon and then metabolized in the right way. Then estrogen works for us, right? It gives us our skin, our hair, our weight, where we want it, you know, allows us to focus and think and all the things we want to do.

But if the gut is not working well, then that estrogen is not metabolized effectively. So you have an issue now with many of the concepts that I'm sure you've heard of, estrogen dominance and all of these different things that make women feel miserable. Let's flip it. On the other hand, when we lose our hormones, you know, when we see declining levels of estrogen and progesterone, the gut gets more sluggish. It doesn't empty as well. It doesn't metabolize your food very well. In fact, when progesterone drops, and I see this in perimenopausal women all the time, when progesterone drops, there's an overgrowth of candida in the gut, which is a yeast that we have naturally, but when the hormone levels shift and change, that level goes up dramatically and high candida in turn drives up blood sugar, drives up insulin, causes us to gain weight, creates those sugar cravings and can leave us mentally unfocused as well.

So again, this interplay between the gut and hormones is one that is so critical to understand and I'm not new at this. You know, Chinese medicine, Ayurvedic medicine, they talked about this 5,000 years ago. They talked about the importance of dialing into the gut. They tagged the liver into this. The liver was a part of the digestive system. And they stressed how critical it was to have that unit healthy to navigate many different systems in the body, including hormone health for sure. So their assessments were, Oh, you're having a hormone shift.

Please go drink this. Go eat this. Let's improve your gut in these ways, not, Oh, let me go give you a hormone or let's try to increase your hormones or decrease them or whatever else that you know, we talk about today.

SHAWN STEVENSON: So what you're saying is that the health of our gut, and in particular, if we're talking about perimenopause, menopause is impacting the symptoms that a woman would experience. Is that what you're saying?

DR. TAZ BHATIA: That is exactly what I'm saying. That when our gut is unhealthy. We don't have the right bacteria. We're not breaking food down very well. We're not moving things through the gut the way we should be. There is a host of symptoms that become exaggerated, especially when our hormones start to do whatever they're going to do. Yes, for sure. Our gut impacts our hormones, impacts how we feel, and really determines sort of the intensity with which you're going to feel any of the different symptoms.

SHAWN STEVENSON: Now, this is something that a lot of women experience just with their usual cycle, that their digestion might change, right? But that's one of those things that's not really talked about, might be overlooked. But that's indicating how hormones can influence the digestive process. So, what are some of the things that happen? Potentially for a woman during her, her cycle, diarrhea for some women, constipation for others. Is there a spectrum?

DR. TAZ BHATIA: There is a spectrum and you nailed some of it and it really depends on the woman. But let's talk about what's happening on your cycle. So just like perimenopause and menopause as younger girls approach their cycle, and this even applies to teenagers, honestly, this is not just a conversation for women in their thirties and forties.

But as you're approaching your cycle, you're seeing the decline in estrogen, right? You're seeing the decline in progesterone as well. That decline exaggerates the seven days before you actually bleed, right? So that's a very low hormone time for women. That's when a lot of women feel unhinged, right? They have more anxiety, they're having trouble going to the bathroom, they're experiencing more reflux maybe, or they're having a lot of abdominal pain or even pelvic pain.

This is often when, you know, we hear that they have these symptoms. The first issue is many women don't connect their gut symptoms that they're experiencing with the fact that they're in a particular phase of their cycle. So for everyone listening, I would say that's the first step. Where are you in your cycle when you experience many of these different symptoms? And I think that's really helpful to understand and know. Most of them, from my clinical experience, is most women are experiencing these things in like that day 21 through

about 28 or so, assuming you have a 28 day cycle. That's the low estrogen, that's the low progesterone sort of timeframe. And it can present as constipation, not being able to go to the bathroom. It can present as diarrhea going too frequently. It can present as bloating. You know, I have so many women coming to me like, why do I look pregnant like around this time of the month? And again, it's that frustration, feeling uncomfortable, staying home, not wanting to engage, you know, in the outside world because you just don't feel very good.

Now, a more serious ramification of all of this stuff is that there are women that experience really difficult gut symptoms throughout their cycle. And those are often women with endometriosis and endometriosis is a condition where the uterine lining overgrows kind of latches on to the intestinal wall women that are experiencing sort of this ramp up of their GI symptoms around their cycle should be thinking about endometriosis is something that they should be asking their doctors about or thinking about her screening for for sure. So again, the gut, it. For me in Chinese medicine, Ayurvedic medicine, I wrote about this in 2014 in my book, the Belly Fix. But the gut is really ground zero. You know, it is ground zero for hormone health. It's ground zero for mental health, and it's ground zero for weight. And so if we're really going to have a good conversation about how to be healthy and how to balance your hormones and how to lose weight, we can't leave the gut out of this conversation at all.

SHAWN STEVENSON: Right! Our health is centered around this, you know, and I much. Hippocrates' quote is jumping into my mind, all disease begins in the gut. Why do you say that? You know, all, all that time ago, you know, this is one of those things, but today it's, we're circling back to what's really logical. You mentioned the Chinese medicine system, for example.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: Ayurveda. This is something that's deeply paid attention to. And I'm grateful that this is happening now and that you're putting out this information to support people because even when we're saying this though, and here's my question for you. That gut health is important. How do we do it? You know, like, I think, And if you could, if you could share some of the things we might want to avoid. I think it's more so about what we're not doing.

DR. TAZ BHATIA: Correct.

SHAWN STEVENSON: Then what we're doing. What we're adding in.

We've got a quick break coming up. We'll be right back. What are the most important nutrients for a healthy brain and great cognitive function? Well, many people are aware that our brains are mostly made of water, but the dry weight of the human brain is mostly made of fats. Now, the question is, what kind of fats do our brains really need to make a notable difference? Well, research published in the American Journal of Clinical Nutrition discovered that increasing dietary levels of omega 3 DHA, that's docosahexaenoic acid, DHA, was able to improve both memory and reaction time in healthy test subjects.

Now, just to be clear, if you want a great memory, we have to have DHA. Now, what happens when we don't get enough DHA in our diets? Well, another study that was published in the journal Neurology used MRIs and analyzed the brains of study participants. The scientists found that people who ate less than four grams of DHA per day showed the highest rate of brain shrinkage, while those who were eating at least six grams a day had the healthiest, shrink proof brains. Now, if you want to keep your brain thick and healthy, you want to make sure again that you're getting plenty of DHA. And according to NYU neuroscientist, Dr. Lisa Mosconi, the best natural food source of DHA is going to be found in fish roe, aka fish eggs, have upwards of three times more DHA per gram than the best fish sources.

Fish sources are notably high in DHA, but Fish eggs or fish roe is actually quite higher. Now this is one of the big reasons why things like caviar are so expensive and also considered a delicacy, considered to be very valuable. But with the price point and also the quality and the freshness, keeping all of those factors in mind to make sure that we're taking advantage of these benefits that can be found in fish roe. I recommend the fish roe from PaleoValley. It's made from 100 % wild caught fish from fish runs in pristine waters. Sourced from sustainable minded fishermen committed to preserving fish runs for future generations. Their wild caught fish roe is gently freeze dried to keep the full range of nutrients and omegas intact and undamaged.

It also, in addition to the DHA content, it's high in choline, selenium, vitamin E, C, and D, and valuable phospholipids for your brain. It's 100 % pure with no binders or fillers. And, the coolest part is that you're going to get 15 % off exclusively at paleovalley.com/model go to paleovalley.com/model and get 15 % off their incredible wild caught fish roe. You're gonna get 15 % off automatically applied at checkout. So head over there, check them out, get your DHA needs met at paleovalley.com/model. Now back to the show.

So what are some of the things that we should probably avoid if we want to take care of our gut health? And also again, leaning into having a more graceful experience. With menopause, less symptoms and also just overall with the cycle, with the menstrual cycle.

DR. TAZ BHATIA: Definitely. And you know, I'm going to dive into this and I'm going to start though with some ideas that for many people listening might be just gut 101. Like they've heard this, they know this, but it's like we can't have this conversation without...

SHAWN STEVENSON: Treat us like babies.

DR. TAZ BHATIA: Without at least reemphasizing these very critical central points. The reason is the gut. Today's environment is falling apart, right? The reason we're seeing so much inflammation, most of which is coming from the gut is really because of our environment, right? We have a more toxic environment. We have more depleted soil than we've had in probably a generation. We have more glyphosate floating around, even when we're trying to buy organic, right? We have more glyphosate floating around in our food, in our water, in our soil, in our air, all of which impacts the gut.

So the gut needs a lot of support, maybe more than it needed a hundred years ago, even, and to support the gut, we have to be super proactive and that proactive sort of strategy comes into being hyper vigilant a little bit about the quality of food that you're eating. A lot of people will sit and debate, like, should I do gluten free? Should I do this? Should I do that? It's really about food quality. First, more than anything else. So ditch the fast food. We know there's a lot of glyphosate there in that particular food and food sourcing. That's the reason for the obesity epidemic. So we have to get rid of a lot of the fast foods. We have to get rid of a lot of the process and package foods.

That's a good starting point for everyone. I think the second is to learn to replace some of those things if they're in your diet with real food. Just getting into the habit of eating real food. There's so many young people that I meet, even young women, who don't eat real food. They're eating, grabbing a bar, they're doing, you know, maybe a smoothie here and there. You know, they're doing all this food that is highly, highly processed. So that's the second sort of thing that I would recommend. I think next is let's talk about what we need to actually bring in. There are a lot of, sort of outdated, in fact, I was doing something this morning for, for an article, and I was laughing at some of the outdated myths around nutrition and gut health that still linger in our consciousness for whatever reason, you know, fat is not bad.

So getting healthy fat, especially for women, is critical. And here's why. If you look at the hormone pathways, right? If you, you know, take them apart and go into the lab and, and really look at them, you know, from a science perspective, the building block of all hormones is cholesterol. So when we start to pursue these very low fat diets or low fat, fat free alternatives, we essentially are crashing our hormones because we're not providing the body with its fundamental building block for building things like estrogen and progesterone. I'm a

child of the 80s. I lived that one, right? Diet Coke and fat free popcorn and I shouldn't have been shocked that my hormones crashed by the time I was 26 or 27. So I think that is something that I want everyone to embrace. We need fat. And when we eat fat, we actually eat less, we bring that blood sugar down, and in turn we help to regulate this epidemic of insulin resistance. So bringing in the fat, I think, is really critical. The second is, and I'm, and I don't know this 100%. I'm still trying to understand why I can tell you what's happening in the exam room. One of the things that we're seeing over and over again is an epidemic of fat malabsorption, which means that our pancreas has been hit.

I think it's been hit by the chemical load. That's my sort of working theory at the moment, but patient after patient is coming in and they are spilling fat in their stool. They're not able to digest it. They're not able to break it down. And so they have this issue of fat malabsorption, which means that even sometimes when they're making good choices, they're losing their nutrients in their stool. So the other thing, in addition to good fats that we need to bring in, our digestive enzymes because for whatever reason, whatever we want to blame, whether it's stress or the environment or the confluence of the two, you know, our bodies are not able to process good food the way we used to. So bringing in a good digestive enzyme, something that has like, Oxfile and lipase in it to break fats down effectively is a game changer and it's a game changer when it comes to hormones because now you have, you know, the ability to absorb your fat, absorb the nutrients you need to build hormones, right?

Chinese medicine talked a lot about hormone building, and it was about nutrients and fat and protein and some of these essential ideas. Now you have that stuff, and you can find your way to healthy hormone balance. So that to me is the second thing that needs to really come in. I think last, but certainly not least, is to thinking about the microbiome practically. You know, do you take a probiotic? Do you drink a probiotic drink? How are you repopulating your gut bacteria so that it can do the work it needs to do? Like eat up estrogen, balance progesterone, reduce candida, all of these different things. So those are three things I think that are very actionable that, you know, folks can go out there and actually, you know, go do while they're on the journey. And I say it's a journey cause it's not easy to be like, okay, I'm not gonna eat fast food anymore. Right. While you're on this journey of learning to eat healthier in a more clean way and even how to get back in the kitchen. I feel like that's a very, overwhelming thing for so many people today, but that's a journey. So while you're on that journey, do some of this other stuff. It's going to make a difference.

SHAWN STEVENSON: This is huge. Like we talk about hormones in this very kind of superficial way.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: But, Are you providing your body with the building blocks to make these things? You know, our bodies are incredibly resilient and we adapt. A lot of our disease symptoms are adaptations in a huge way.

DR. TAZ BHATIA: Absolutely.

SHAWN STEVENSON: And again, just getting back to the very, very basics, provide your body with the raw materials. Now, you mentioned providing these healthy fats. But the angle that you provided that we haven't talked much about is, are you absorbing it? You might be spending money on these fancy pants, high quality fats. And not actually getting the bang for the buck that you're looking for. And this goes to, you mentioned the pancreas. Obviously the microbiome, again, the health of our gut, are we absorbing these nutrients? Also in some of these things are epidemics as well, you know, liver health, right? Lipase production, your gallbladder, which is kind of like, if we're talking about digesting fats and bile, it's kind of like a little sidekick, like a little Robin.

DR. TAZ BHATIA: It's important. Yeah, yeah.

SHAWN STEVENSON: To, you know, Batman being the liver, you know, the Dark Knight. The liver is incredible, but a lot of folks are getting their gallbladder removed. And I just was talking with somebody last week and she was having difficulty digesting certain foods. And I'm just like, when you had the procedure done, did your doctor tell you to start taking a lipase enzyme or just, you know, some enzymes or something? He's like, no.

DR. TAZ BHATIA: No. Right.

SHAWN STEVENSON: Just, you know, took it out. Oh, well just, you don't need it. Take it out, go about your way. And then suffer certain symptoms as a result and so again, but it's not looking at what caused the issue with the gallbladder in the first place. Even if we remove the gallbladder, which is a symptom, you know, the inflammation that is happening there. Are we changing the behavior so that we can actually experience health? And so this is circling me back to asking you about it, so you mentioned probiotics. Now, what about prebiotics? What about providing the substrate or the environment for those prebiotics to flourish.

DR. TAZ BHATIA: Prebiotics are just as important as probiotics. And you know, there's been a lot of debate about probiotics too, right? Like, can you really take a probiotic? Can you really shift your microbiome? Does it really impact what's happening down there? Prebiotics, you know, are kind of the new frontier where we're like, if you provide your body with the prebiotic foods and supplements and those types of things, and we can talk about those in

just a minute, then you're allowing the gut bacteria to grow and flourish the way it's supposed to do.

I feel like it's a combination of both right at the end of the day. And you know, people are probably tired of hearing this, but you get prebiotics from your food, you get probiotics from your food. When we have food diversity, right? When we are changing what we eat, rotating out our breakfast, lunches, and dinners, then we're really presenting the body, the gut in particular, with a lot of different pre and probiotics. But when we have the same dinner, the same lunch, the same breakfast over and over again for 30 years, right? We're not going to have that diversity that the body needs to be able to do what it's supposed to do. So prebiotics are thankfully getting more attention and more press.

I think that's fantastic. And they are a player when it comes to overall gut health. But again, it's like a symphony. We need everybody showing up to play their instruments. So we need the prebiotics. We need probiotics. We need the gut lining to be intact. We need digestive enzymes. We need the right amount of acid. And when all of those guys are working together, then the body does what it's supposed to do. Now, having said that, people are like, Whoa, you know, This is really overwhelming. What do you want me to do? But the body, and I don't know if you feel this way, but the body's actually really incredible and, and very simple. Sometimes when you make one change, everything else changes around it, you know, so you don't have to do 20 things. You have to do three good things to really get the benefit of, of really having holistic health and really impacting every system in the body.

SHAWN STEVENSON: I love that you mentioned you didn't give like a cookie cutter eat Jerusalem artichokes.

DR. TAZ BHATIA: No.

SHAWN STEVENSON: It's going to be, the truth is really every real food functions as a prebiotic in some way. It's the diversity of these things, the diversity is what's suffering in our diet. Me working in fitness early on in my career. I saw this. I didn't realize it was happening. But when we're trying to "get healthy", we'll be preparing our meals, but they're usually the same stuff again over and over again.

DR. TAZ BHATIA: Over and over again. We're all guilty of that. I do that, you know, I'm busy running around. Where's my protein smoothie? Same two scoops, same bananas. You know what? I mean? I'm just I'm with everybody on this journey I am just as guilty of all of this stuff. But it's a journey, Right? And I feel like every day I get better. Every year I get better. I get more creative. You know, it's very easy for me, in fact I used to do it, to send someone to the

grocery store to go get our groceries and bring them back. Or now we have Instacart, right? You can do this. But I have now been deliberate about showing up at the store, picking my vegetables, picking my fruits, planning my recipes.

Why? There's a reason why. There's so much nutritional value, an emotional and energetic value to being able to, to, to prepare your food and prepare food for your family. You know, and my family acts and thinks differently when food is prepared elsewhere versus when food is prepared at home. There's a difference. And you can't, you know, you can't really reach the biodiversity that we're talking about or, you know, really changing things up if you don't invest a certain amount of time. into what are you going to prepare or eat in the week ahead, right? Most of us are just grabbing and going or running. We're stressed, we're tired. You know, you have children, I have children. It's 50, 000 things all the time, right? But if we can stop for just a moment and just take an hour to think about what are the meals going to look like for the next three or four days and try to make them a little bit diverse, then you're providing your body with that biodiversity without having to think through, wait, am I on the right prebiotic? Probiotic?

Am I healing my gut lining? Am I taking the right enzyme, right? That's overwhelming. And it's weird because I've shifted. I've done this for now 15, almost 20 years, you know, seeing patients in our clinics for 15 years. We've seen a lot of patients. We have a big team, you know, and I continue to learn from each and every one of them. I feel so blessed. But like I've shifted to where in the beginning it was like, take this and this and this and this and this and this and this. Cause it's all good. Right. To, you know, What will your body need that will allow it to work efficiently? and allow one thing to impact 10 others, right? That's why we always start with the gut. You know, the gut is the most efficient metabolic engine, hormone engine, all of it. And then if we think like Eastern medicine and you include the liver in that conversation around the gut and digestive health, then that is the starting point for everybody. And while everyone's out there debating HRT and deciding which form is the best, And whether to do a pellet or a trochee or this or that. I feel like they're missing the real conversation and the real conversation is start here, and then you can decide all the rest.

SHAWN STEVENSON: Yeah. Yeah. You know, a great sentiment is that a diverse gut is a healthy gut.

DR. TAZ BHATIA: Yes.

SHAWN STEVENSON: And there are so many studies on this now. I love the studies that have identical twins.

DR. TAZ BHATIA: Yes. Yup, yup.

SHAWN STEVENSON: And looking at gut health. Yeah. A lot of this was compiled from my hometown in St. Louis, St. Louis University, WashU. And seeing, you know, higher ratios of certain types of bacteria leaning towards a microbiome that is more indicative of obesity and diabetes and things like that. The number one thing to improve that diversity is increasing the diversity of foods that you're eating.

DR. TAZ BHATIA: Absolutely.

SHAWN STEVENSON: You know and a little other trick For your, for your mind, I love looking at it as every food that we eat, you're eating that foods microbiome.

DR. TAZ BHATIA: Yes. Yes! Absolutely.

SHAWN STEVENSON: You're taking that on. Right. So like, let me get this data from this plum over here. Let me get this data from this cucumber. Let me get this data from this kimchi, you know, and just like looking at it like that and making it a little bit more of a game. But a food game.

DR. TAZ BHATIA: It's also important. And, you know, I think our ancestors did it well, right? Our medical ancestors and cultures before us too, because people ate seasonally. You know, they rotated what they ate. They didn't have food available. Same foods available all the time. And everything had a really rich microbiome. Bread had a microbiome. Bread today doesn't have a microbiome anymore. Right? So everything had a rich microbiome. bacteria that works to our benefit, right? But again, if you're going to deplete the soil, if you're going to add chemicals, if you're going, you know, to transport food across, you know, great distances and hold it in storage for long periods of time, you know, that microbial quality is going down and down and down and down.

SHAWN STEVENSON: Bread today, like you said, it doesn't have a real microbiome, a natural microbiome input, but it definitely has some glyphosate. You mentioned glyphosate earlier.

DR. TAZ BHATIA: Oh, yes.

SHAWN STEVENSON: Can you just talk a little bit about what that is for people that might not be aware?

DR. TAZ BHATIA: Definitely, yeah. Glyphosate is one of the major ingredients and derivatives of Roundup, which is the pesticide that's used pretty much universally now globally, uh, with farming. And what's happened is, is that, you know, many of us that think we're buying organic are choosing organic. Glyphosate may be not being used directly on those plans, however there's so much cross contamination now that in practice in the exam room we see high glyphosate in the majority of our patients. Now the issue is not everyone's equally sensitive to it, right? There are some people that are more sensitive than others. The beauty of being able to do labs and data and genetics and all this other stuff that we do is that we can sort of do all this matching, right? These genes. super sensitive to it, have more inflammation, have more issues.

Overall, these guys can tolerate it to a point, but over time it's going to catch up with them. So glyphosate can live in our cells. It lives in our intestinal lining. And one of the things we've seen is that it may be one of the primary causes of this whole phenomenon of leaky gut or intestinal malabsorption. Right? Which is why we don't absorb our foods and break our foods down effectively and all these other things. We are concerned about glyphosate. I don't know how much we can really do about it. Here's what we can do internally, right? The external environment, we each have only so much ability to manage and control.

But internally, I think again, if you are choosing your foods wisely, you're reducing kind of that. toxic load, the load of processed or fast foods, because restaurant foods do seem to have a higher load than foods that we're preparing on our own. You know, if you can start to make some of those changes, then you are decreasing your exposure to glyphosate and you're optimizing your body's ability to remove it. Going back to the miracle of the human body, right? It's, it kind of is its own laundromat or, or detoxing machine, so to speak, whatever the right words are, because chemicals come in and if things are working well, chemicals go back out, right? They don't store, they don't live there. But when the body's weak or if the load is too high, that set point obviously is disrupted, right?

And now you're storing those chemicals, you're holding on to them and it's disrupting your hormones, it's disrupting your mental health, it's disrupting so many different processes in the body. So again, it starts with you. Unfortunately, I wish there was a pill or a quick fix, but it starts with you and it starts with you making small changes so that you can gradually reduce your exposure to that to the best of your ability.

SHAWN STEVENSON: This is so good.

If you're anything like me, you grew up drinking Kool Aid, Flavor Aid, Gator Aid, Power Aid, all these different aids. No, that doesn't even sound right. But the truth is many of us have

grown up in this culture of being inundated by these Crazy sugar dense products. Some of these products can have 20, 30, 40 grams of sugar and it is not necessarily per serving but how much we would drink of it because I know that I drink a lot of Kool Aid. I was actually the Kool Aid chef in the house. I would take different packets of that, artificial goodness, combine them together with, you know, a cup and a half of sugar per pitcher and make that up for my family and that was normalized. And not only are we not getting any real nutrition along with this, we're getting a little bit of a party for the mouth, a little bit of a dance for our taste buds, but we're lacking in an opportunity to actually provide real nourishment.

And today that is changing because now we can get access to truly nutrient dense juice products for our kids, for ourselves. We're talking about powered by things like acai, pomegranate, and also adaptogens like cordyceps. And all this is combined together. In the Organifi red juice blend. Now, why is acai one of the primary ingredients of this red juice blend? Well, it has an ORAC value of 103, 000. That means it has about 10 times the amount of antioxidants that other fruits have that you'll find in your produce aisle. It is packed with antioxidants. This helps to reduce inflammation, helps to nourish our friendly flora in our gut. It also helps to support our heart health, our cardiovascular system, um, Our cognitive function is so much more. But the cool thing about the red juice blend is that it's backed by science. One of the other ingredients is organic beet juice. And a study published in the Journal of Applied Physiology showed that having beet juice boosts stamina up to 16 % during our exercise. So each of these ingredients has a purpose.

And this blend is kid tested and parent approved. This is far different from the Kool Aids and Flavor Aids and all that stuff that we grew up with. It has real nutrition and also no added sugar. And the cool thing is it still tastes amazing. Kids love it. Again, kid tested, parent approved, and you're going to love it as well. Get this for your kids. Get this for your family, for your household. This is something that is always on our cabinet shelves. Organifi. Red juice blend, go to [Organifi.com / model](https://www.organifi.com/model). That's O R G a N I F I .com / model. And you're going to get 20 % off their amazing organic red juice blend. And by the way, they're going to hook you up with 20 % off store wide. So again, go to [Organifi.com / model](https://www.organifi.com/model) for 20 % off, hook yourself up with their amazing red juice blend for your family. And now back to the show.

You know, a lot of these newly invented chemicals in particular, we're talking about glyphosate. They have this lipophilic connection, you know, and our fat cells are really intelligent at storing stuff, especially foreign things your body isn't necessarily sure about processing. Our liver functions, uh, in much the same way as a protector and processor detoxifier. But it is one of those things that there's this new category called obesogens.

DR. TAZ BHATIA: Mm-Hmm, , right.

SHAWN STEVENSON: These obesity causing agents in glyphosate. And this is according to the IARC. It's. Denoted to be a class two A carcinogen. Mm-Hmm. . Right. So that means it probably causes cancer in humans. Not absolutely, but probably.

DR. TAZ BHATIA: They say absolute .

SHAWN STEVENSON: You know, and it's just like we are living right now at a time of great experiment in our food supply. And we don't know so many of the long-term ramifications.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: The best thing that we can do, as you've mentioned, is focus on eating real food, focus on quality control, which is going to require you to make a few more meals at home, ideally, do your best. And also, I love that you said this multiple times, that it's a journey.

DR. TAZ BHATIA: It is!

SHAWN STEVENSON: And every time you say it, I feel like Lord of the Rings vibes, you know, like you get to choose your character. Sometimes you're Frodo, sometimes you're, you know, Aragorn, sometimes you're Smeagol, you know.

DR. TAZ BHATIA: Right. Absolutely.

SHAWN STEVENSON: Just a doer. Um, but I want to circle back, you talked about this, and this is another big issue that needs a lot more attention, and there are solutions for this, but estrogen dominance.

DR. TAZ BHATIA: Yes.

SHAWN STEVENSON: So, we have this range, we have estrogen dominance to rapidly increasing rates of PCOS, for example, and this all has to do, bottom line foundationally with our hormones.

DR. TAZ BHATIA: Yes.

SHAWN STEVENSON: So can you talk a little bit about that?

DR. TAZ BHATIA: I can and it's actually a great segue from the conversation We're just having about chemicals because the rates of PCOS are growing up dramatically, right? There's this Androgenization of women right? Higher DHT, higher free testosterone, higher DHEAS. While we're also seeing sort of this estrogenization of men where we're seeing higher estrogen levels, higher estrogen or stored estrogen in men, and much of the shifting of the hormone landscape, I believe, and what I see in practice may trace its way back to our chemical load.

So when we're talking about estrogen dominance, It is connected to this idea of gut liver health, right? Because the healthier you can make your gut with the right range of bacteria, in fact, there are studies that show this, that there are certain microbes that are responsible for the conjugation of estrogen. Meaning, whether it's my estrogen or estrogen I'm getting from somewhere, even estrogen from the environment, right? The exogenous estrogen that we talk about. If my gut is working well, it's going to grab that. It's going to break it up, chop it up, and it's going to get rid of it. It's going to go out through my colon or however else, right? I'll lower that load down. But estrogen dominance is this idea that instead of that happening, we're holding onto estrogen metabolites. I actually call them dirty hormones. That's sort of my term for them. So these are things like high levels of estrone, high levels of 17 hydroxyprogesterone, and high levels of DHT.

These are all hormone metabolites, not just the estradiol and the progesterone that everyone's going and getting checked at their doctor's office and hearing. " They're fine", right? These are the metabolites that are building up in our bodies that we need to be aware of. And that's where estrogen dominance comes from. And it looks like everything from brain fog, migraines, breast tenderness, gaining weight. Because the other pattern with this is that when estrogen dominance happens, insulin goes up. When androgen dominance, the other dirty hormones, the DHT and all those guys, when they go up. Um, insulin goes up. So we've got this metabolism of hormone issue driving up insulin, driving up blood sugar, causing everyone to gain weight, men and women, honestly, but definitely, you know, women are quicker to notice it and react to it.

And that in turn is causing all kinds of angst. And what's our answer? Our answer is more medication right now, right? So estrogen dominance, if you know, everybody listening could latch onto that idea, actually was listening to someone. Recently I got so upset because it was a, a female health expert, who I won't name, who's like estrogen dominance isn't real. It's only not real if you're not looking for it. You know, if you're just going to check an estradiol level or, you know, uh, you know, day three estrogen or day 21, all the stuff that women hear all the time, you're not going to catch it. You know, it's very real when you look at the metabolites of hormones, or if you don't even want to do any testing and you want to listen to what the woman in front of you is saying, you know, it's real.

Estrogen dominance is the precursor for many estrogen based diseases. So instead of waiting for disease, you know, sort of, uh, identification like, Oh, you have a clear mammogram. Fantastic. Come back next year. Wait, you have breast cancer. You know, instead of waiting for that whole empty gap, if you're looking instead for dirty hormones and thinking instead about hormone metabolism and how this stuff is breaking down and marrying that to this idea of gut liver health, that will not happen. You won't go from normal to abnormal in the span of a year, because you'll be tracking and chasing and understanding what your body's doing with your hormones. And this is relevant again, I've said this, you know, once I'm going to say it again, cause like, Continue to get annoyed by it. This is. our hormones that we're making on our own.

In addition to hormones, somebody else might be slapping on us, right? This conversation applies to both. So that's where estrogen dominance, you know, is widely misunderstood, underdiagnosed, but such a missed opportunity. Because if we helped our younger women identify it early on, then they could eat for it, they could take the right herbs and supplements for it, they could exercise for it, they could screen for it, and they could understand what their risk is 10 years down the road, 20 years down the road for an estrogen based disease.

SHAWN STEVENSON: And this goes back to the same root cause and treatment, which is, how's your gut health? Are you providing the building blocks to make it? Your respective hormones.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: And are you flirting with some dirty hormones, right? And that I love that you tied in the connection with insulin because now that that's in the mix It can exacerbate the problem and create this vicious circle.

DR. TAZ BHATIA: Totally. Right.

SHAWN STEVENSON: Of aromatization, you know for men For example, your testosterone is getting grabbed and converted into estrogen. You know and you've got this circulating insulin and you know high blood glucose and it just starts to feed into itself. It makes it harder to, you know, regulate your blood sugar. It makes it harder to lose the fat. But if we again get to the root here, which you've mentioned several times already, which is focusing on our gut health, eating real food, providing the real nutrients, uh, to build the hormones. But we got to talk about the elephant in the room. All right. The big old pink elephant. This is that, that hidden thing. It doesn't have calories per se. And it isn't something that we necessarily even

acknowledge outside of a certain context, but stress, stress is one of those things that impacts so many different aspects of our health.

As a matter of fact, and we'll throw the study up for everybody to see, uh, there was a meta analysis done in JAMA and they asserted that upwards of 60 to 80 % of all physician visits today are for stress related conditions.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: So, like, this stress input. is such a big aspect, if we're talking about the hormone shift, if we're talking about the experience of menopause in our society versus, and I would love if you can also make a little mention of some of these other cultures that don't experience menopause in the same way that the average woman does here in the United States. Let's talk about the stress factor here. How much is that playing in this process of perimenopause and menopause?

DR. TAZ BHATIA: I think it's huge. You know, one of the things that I love talking to women about is helping them understand that the hormone axis is not just about their ovaries or their uterus, right? It's about this entire feedback loop that actually begins in the brain and works its way down to many organs, including the thyroid, your adrenals. You know, yes, your ovaries, yes, your uterus, all these different things. And the importance of understanding that it's all looped together is that when we are stressed, we are disrupting that loop, right?

That hormone balancing that I talk about, you know, is not again, just about giving you a hormone. It's about reestablishing integrity within that loop. So what does stress do? High stress, high cortisol will disrupt your sleep. As your sleep is disrupted, the hypothalamus, which lives up here in your brain, right, sits with the pituitary to regulate all of this stuff together, becomes inflamed, literally becomes inflamed and can no longer do what it's supposed to do in terms of signaling. So the entire signaling gets thrown off and instead the body goes into kind of a fight or flight mode, and then you're trying to preserve. So the first symptom is high cortisol. The second shift is low progesterone. Then you get estrogen dominance somewhere in that mix. The thyroid crashes out too.

So stress is a direct beeline to having a hormone shift that's not working in your favor. In the United States, if we're going to look at. this country. And this is becoming a, this is actually a global conversation because I feel like this is happening to women all over the world because, you know, many people are following our lifestyle. So, this is very much global now, but in the United States in particular, that disruption of that hypothalamic pituitary axis, the HPA axis is what we call it, is happening earlier and earlier and earlier. So women are experiencing

perimenopause earlier than we used to. Menopause earlier than what they once did. And that in turn is having the implication of all the symptoms associated with those states with both perimenopause and menopause. So that's one issue with stress. The second is cultural. And I don't have an easy fix for it, but the cultural perception of menopause, right, as women hit their fifties now. A lot of times they're coming out of one of the most stressful periods of their lives. I feel like the forties for women, late thirties and forties, I called it superwoman syndrome in one of my books. It's one of the hardest times, right? They have families, they have careers. Both of those are kind of like, you know, on this uptick, uh, oftentimes they have aging parents that they're managing as well.

There's just a lot of responsibility for women. And so the stress in women that I see here in the United States, because we don't have community and extended families. And, you know, things like, you know, a certain amount of vacation and stuff like that to be able to take care of those that are highly dependent on us is at an all time high. So that's why, if you look at those medical visits and some of that data, you know, first of all, it's female dominant, you know, a lot of it is very female dominant. Secondly, it's a lot of vague symptomatology. And that's where women start to feel very dismissed in the medical system because they don't feel good, but it's very difficult to express. So it comes across as I'm tired, I'm anxious, I'm depressed, you know? And so the medical provider on the other end of that is, Oh, you're distressed. Oh, you're just anxious. Oh, you're just depressed. But there's a chemical shift happening to women under chronic stress. They are having inflammation of their entire hormone feedback loop, they're dropping their hormone levels earlier than ever before.

And they're moving and beelining into estrogen dominance and insulin resistance. The other thing, if we got really like microscopic about this idea, we know that cortisol and stress impacts the gut too. Right. The gut acts completely differently. The microbiome shifts a hamburger. You probably saw that a study showed that came out a hamburger when you're on vacation is metabolized completely differently than a hamburger that you grab and dry and eat on the way to work, right? Two very different metabolic processes. Same food. So, We know that stress is a major player in this conversation, for sure, and we have to help all of us, each of us, you know, navigate what are your outlets, you know, what's your self care like, what's your community like, you know, how are you living, making your choices that are in alignment with sort of what your body needs.

And this is not something women are really taught to think about. I think, you know, my daughter's 16, I feel like in her age group, they're talking a little bit more about wellness and self care. She even says, mom, I have myself, I'm trying not to laugh. I have my self care plan for the week. Uh, this is what it looks like. And I'm like more power to you. I'm so proud of you. But at 16, at 20, at 30, 30. I was just about like, Oh, we got to get stuff done.

You know, so, you know, so if we can help women understand that there is this point of balance where, yes, go conquer the world, go start families, go do everything you're supposed to do. But at the same time on the schedule, on the calendar. What is your self care? You know, where are you nurturing yourself, your soul, your spirit, having quiet time, doing the things you love, because if that's not on there, you are driving on that highway towards inflammation and all the things we talked about much faster than what really needs to happen.

SHAWN STEVENSON: It's equally, if not more important to schedule that.

DR. TAZ BHATIA: Totally.

SHAWN STEVENSON: If not, I think you're metaphorically digging yourself into a hole and then once menopause actually hits, you find yourself. Looking up from the bottom of this hole. Is that a good analogy?

DR. TAZ BHATIA: That's a great analogy and time goes by fast, right? It goes by really fast and I think that if we are not intentional with what we're doing year to year, decade to decade, you hit menopause. And I talk a lot in the book that menopause in other cultures is actually a journey up, right? It's a rebirthing of yourself, right? And it's really where women should be in the fullest expression of themselves, right? They say what they want to say. They're doing things they want to do. They're in the careers of their choice, right?

They are able to serve their community or their family. We're really the mentors for the women younger than us. And we should be like, you know, sort of taking them in and guiding them along the way. That's what it should look like. That's what it did look like. Right? Women, once they hit their fifties and, you know, Eastern cultures and older cultures, were sort of held up as the pillar of the community. In fact, in some of the tribal cultures, these were your priestesses, right? These were your priestesses, these were your shamans, these were the people the community turned to, right? Instead, Menopause today is seen as like, Oh, I'm done. I'm, I'm expired. You know, my time is up. And I think that in itself is a very disheartening sort of mantra to live by. Right. But if you have been intentional along this journey, And if you've taken some time out, it doesn't have to be a lot of time, right? But if you've taken some time out to really dive into you and what your body needs, you know, what your mind and your soul needs, and you've tried to put some of those pieces together, you get to this phase and it's incredible.

You're actually excited because it's full of possibilities. It's not, you know, I'm done and I'm, I'm out of here. So we really want to shift and change our mindset. To be like, this is where we're

headed, right? And if we're doing these things along the way and dialing into these ideas and these concepts, then the conversation doesn't become about do I or do I not need HRT? The conversation becomes instead about, you know, how else can I optimize my health and what's next for me in terms of serving the community or a family or a project or whatever it is. And it's a really exciting time. Um, you know, it's one of the most freeing. Most liberating times, I think, for women, or at least it should be, and instead what many women are doing is just struggling with not feeling good, you know, day in and day out. And that's, that's just not fair.

SHAWN STEVENSON: Thank you for sharing that. Sometimes, and just contained within this is just having a moment to stop, you know, and just with the busyness, all the things that you just said, we get wrapped up in that. And one of the most remarkable, you said a lot of cool stuff, but, When you said, what do I need? That really hit me because your needs are going to be uniquely yours and that can change. But if you're not checking in with yourself and asking and being honest, what do I need? And giving yourself the permission to whatever that is to evoke some kind of reduction in the stress that you were automatically going to be accumulating in this world today. But you can find joy in that. It's so crazy. Like. And I, I want to ask you about this because there are a lot of women who know this, that I should be taking a moment for myself, checking in. And I love how your daughter has her self care already. You know what I'm saying?

DR. TAZ BHATIA: Oh yeah. oh yeah.

SHAWN STEVENSON: That's one, that is amazing. But a lot of women do not do that.

DR. TAZ BHATIA: Right. Right.

SHAWN STEVENSON: They're just like, I know I should. And they might dabble in it, but then life happens. It's just, why is that such a struggle?

DR. TAZ BHATIA: The fundamental reason why that's a struggle for women is they feel guilty. Okay. Women, we bring it in from the day we're born. I think we live with it unless we try to consciously change it. We have so much shame and guilt from generations that we walk around with. And so we are trying to undo so many years of if you are not, doing X, Y, and Z for X, Y, and Z, then you're not worthy, right? So it's, it's going back to shame and guilt and a lack of self worth. And I, you know, I talked about this in a TED talk I did back in 2017 because it was super interesting, like seeing the generational patterns of that. But we have not come out from that. And so I think for a woman to be like, Hey, uh, I need two hours. To myself this weekend, I need to go get a massage. I want to go to lunch with my girlfriends. You know, can

you handle X, Y, and Z if you're talking to a partner or if you're, you know, trying to make plans for your children or whatever it is, we feel guilty.

That's it. It's that simple. We always feel guilty. And. I'm not sure how to change that because even I struggle with that to a certain extent as well. But here is what I remind myself and I hope everybody will also remember that the stronger we are and the more rooted we are in what we stand for and what we believe in, the stronger everyone else around us is and the stronger our families are, our communities are, our workplaces are. So we have a responsibility to take care of ourselves. It's not a luxury, it's a responsibility. And I think if women can remember that, then they will, first of all, be awed by the influence that they have in their environments. But secondly, be really amazed by how great they feel on any given day, no matter what's thrown at them.

SHAWN STEVENSON: Yeah, I love that reframing of something that is optional or nice to do as a responsibility. You know, the primary responsibility, because it bleeds over into everything else.

DR. TAZ BHATIA: To everyone else.

SHAWN STEVENSON: Now, we started this conversation talking about the connection with menopause and weight gain. Some people can experience an unexpected weight loss, right? There's a spectrum. No, no two people are the same. But one of the things that I would love to talk with you about is the input or the connection with inflammation and weight gain and its connection in weight gain and the association with menopause as well. Inflammation is another huge component. That we need to talk a little bit about.

DR. TAZ BHATIA: You know, all of this stuff is sort of like I think about dominoes, right? So we have the hormone shifting and declining right estrogen and progesterone and testosterone in particular. We have a gut that's slowing down a microbiome that's shifting. We've talked a lot about the gut today and what we understand is as these things are happening blood sugar levels are rising, insulin is rising, which leads to weight gain. All of that, every single thing I just mentioned, the hormone decline, the gut shifting, you know, the insulin rising, all of it, the weight accumulating, all of those things increase inflammation. And inflammation is this idea of the body kind of fighting itself, right? Sort of all sirens on. Different things getting impacted and affected and looks different on every woman, you know, some women have inflammation and it shows up as new onset joint pain or early arthritis, right?

Other women have inflammation and it shows up as random rashes like this. different skin disorders, or some have true mental health issues, which are actually symptoms of

inflammation. So we know that inflammation is the precursor to the majority of the diseases that we deal with today in the clinical setting. Whether we're talking about heart health, whether we're talking about autoimmune disease, whether we're talking about cancer, the precursor is inflammation. So we do want to understand actively in the exam room, right? What is happening? at any given moment with any patient when it comes to their inflammation markers.

So, you know, as someone who is advocating for their health, you should be checking inflammation markers at least once or twice a year and understanding what that trend and pattern is because that, again, is going to educate you as if maybe you're getting in trouble earlier and you just don't realize it. Many times we don't realize because, as you said, the body's very adaptive and we can pretend like something's fine when it's really not fine, right? So, um, Inflammation is a central idea and I do think it's what leads to disease expression as women get further into their 50s and then into their 60s, you know, because now we're seeing this all ramp back up. You can reverse inflammation. A lot of it, again, is reversed by the right diet. Right. Good gut health, good, deep, you know, consistent sleep is a very important component of reversing inflammation. And I think the other thing that we have to understand is that whether you do or don't decide to do hormone replacement therapy, when that therapy is not in the right spot, That can also be a source of inflammation.

So inflammation is something I think that we have to chase. That's what we do in practices, you know, in all our clinical practices at center spring MD, we're always looking for that, always trying to understand where somebody is with that. And here's what we understand about weight. Weight drives every inflammation marker up. Every single one, and shows up in so many different ways. So the body burden of excessive weight, especially weight over about 20 pounds or so, is significant. And it can change how people think and feel and act and move and so many things. But the most frustrating part is to see that change, you know, in that number from sort of tried and true strategies of weight loss can be very demotivating. Because once you cross that 20 pound mark, losing weight, it has to be very consistent, deliberate, takes a long time to see that number on the scale change, but it does happen. You know, it happens for every woman at every age.

I've had women come in and when they finally got Sort of their minds wrapped around. I'm getting rid of all the sugar. I'm getting rid of all processed food only eating clean foods. That's all they did no diet plan. No medications. No gimmicky stuff over time. That's the key: it took four to six months over time lost 30 to 40 pounds. You know, so it's possible. It's all possible. I don't want anyone subscribing to the theory that, Oh my gosh, I'm getting older. So I am going to gain weight or this is normal, right? It is possible to change all these things and to turn them around. You just have to change and adapt to what you're doing.

SHAWN STEVENSON: I love that you mentioned how, again, this becomes a vicious circle.

DR. TAZ BHATIA: I know. I know. Go round and round.

SHAWN STEVENSON: With our fat cells. Because, you know, our fat cells are amazing, you know, and just let's go show a little love, you know, we tend to villainize our fat cells.

DR. TAZ BHATIA: We need them.

SHAWN STEVENSON: Exactly.

DR. TAZ BHATIA: It's part of what helps us to protect your bones, your brain, your hormones, all of it. We need them.

SHAWN STEVENSON: It's, and it's part of what helped us to evolve to be here as a species, you know, our ability to store energy. But the amount of energy that we're packing into our fat cells today in our modern society is abnormal for our fat cells. And they'll send out essentially a false distress signal. And the root of inflammation, as far as the active, uh, Component of it, like what's creating the inflammation in our body, a lot of folks don't realize like that's your immune system, right?

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: And it's responding to what it perceives as a threat and we tend to think about inflammation I know that I did as like something outward you mentioned like rash on the skin or you know An injury or something like that, but We can have, and this is one of the things that you said for us to test for, systemic inflammation, you know, inflammation that is not necessarily rooted in one problem.

DR. TAZ BHATIA: Right.

SHAWN STEVENSON: And we have biomarkers that we can get analyzed. What are some of those biomarkers?

DR. TAZ BHATIA: Oh my gosh, there's so many, but my favorites are just looking at a CRP, which is a C reactive protein, a sed rate, The initials for that are ESR, usually, um, a sedimentation rate. We will look in practice even at a homocysteine level and try to understand what that number is. And those are all done with routine blood work. There's nothing fancy or expensive about any of that. On some patients, though, the inflammation,

we're not able to pick up just with those three markers. So we do go deeper and we'll look at things like a TGF beta or a C4A or we'll even look To your point about the immune system, we'll look at immunoglobulin levels, because what you'll see with chronic inflammation, sometimes, like your CRPs and your homocysteine and your SED rates are fine, they're normal, but your immunoglobulin levels are through the roof, or your C4A beta is through the roof.

And so there is low grade chronic inflammation. Another sort of hacker or quick tip for everyone, because I know everyone's probably had a CBC done at some point. That's where you look at your white blood cell count and your hemoglobin and hematocrit. If you go back and look at your numbers, if your white blood cell count has been kind of chronically low in the twos and threes with repetitive blood draws, you have chronic inflammation. Those lower white counts are a sign of inflammation as well too. So there's so many different ways to check in blood work. You know, it's really, it's really not difficult. You just need to be aware of it and advocate for it for sure.

SHAWN STEVENSON: What are some of the other things that people can look forward to when they pick up a copy of *The Hormone Shift*?

DR. TAZ BHATIA: Oh my goodness. You know, I wrote this book because I really wanted to encourage and inspire women that there was a better way. Right? That this conversation was deeper and take hormones or not take hormones, that hormones themselves really build upon a healthy foundation and that healthy foundation includes your gut, your liver. Many of the things we've talked about today, along with your energetic and emotional health, all of those will really lend themselves to good hormone balance. So I wanted to widen the lens when we talk about hormones and hormone balancing. So at any age, honestly, it's written for all women, you know, however old you are, there's a section for you. I talk about the five hormone shifts. I talk about how to find your dominant hormone pattern. Do you have estrogen dominance or do you have low progesterone? Do you have a thyroid issue? Really helping you to tease that out because if we can get efficient. Right? If we can help you identify the main idea, then eating and what to take and how to exercise and self care all get lined out beautifully, right?

It's when there's all this noise about what's happening with me, I don't know what's going on, so I'm going to do everything that's really fatiguing and demotivating. And I wanted to take that sort of out of the picture. So there is a plan in there to reset your hormones. It really gets into these East West concepts, a sort of holistic way of doing it, and really leads you to a point where you can make that decision, was this enough, do I really need anything more from a hormonal standpoint, or is just simply taking care of some of these things leading me down the right path

SHAWN STEVENSON: Awesome. What's the best place that people can pick up a copy?

DR. TAZ BHATIA: Oh my gosh, it's everywhere books are sold, but of course Amazon, Barnes and Noble, all the places.

SHAWN STEVENSON: Awesome. All the places.

DR. TAZ BHATIA: All the places.

SHAWN STEVENSON: Well, this has been amazing.

DR. TAZ BHATIA: Thank you.

SHAWN STEVENSON: And by the way, the foreword is by Gwyneth Paltrow. And this book is phenomenal. It's again, this is essential reading

DR. TAZ BHATIA: I hope so.

SHAWN STEVENSON: For, but I would, I would argue that this isn't just for women, you know, but if you know a woman, if you want to understand better what somebody that you care about is going through, just get some of this education because For, for us, and I know, you know, I've been with my wife almost 20 years. I see personality changes from time to time.

DR. TAZ BHATIA: What are you talking about?

SHAWN STEVENSON: You know, but, dare I even point it out if it happens, you know what I mean? But just for me to be aware and like, okay, it's this phase right now. And this is what she would probably Need if I can help to create a supportive environment. Absolutely. Right? Because I might feel in a moment that I need to be, you know, more assertive, but really I need to be, I just need to listen more at this time or be much softer, you know. Sometimes she wants me to be more assertive or aggressive, whatever the case might be. But just learning a little bit can help us to better associate with each other. Caveat, no one said this is easy. All right, but It is worth it. And the Hormone Shift is available again everywhere their books are sold. You are awesome. Thank you so much for hanging out with us.

DR. TAZ BHATIA: Thank you. Thank you so much.

SHAWN STEVENSON: Dr. Taz, everybody. Thank you so very much for tuning into this episode today. I hope that you got a lot of value out of this. As always, please make sure to share this with somebody that you think is going to add some insight, some education, some empowerment to send this directly from the podcast app that you're listening on to somebody that you care about. You could of course share this on social media. I love the love on social media. That's the right use of social media sharing empowerment. And of course you could tag Dr. Taz as well. Her Instagram will be there for you in the show notes. I'm @Seanmodel on Instagram. So of course you could tag me as well.

Remember sharing is caring. We've got some epic masterclasses and world class guests 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 can find transcriptions, videos for each episode, and if you've 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.