



**DR. KEESHA EWERS:** Welcome back to the Women's Vitality Summit: Caring For Yourself, Body and Soul. I'm your host, Dr. Keesha Ewers, and my guest for this segment, I'm very excited to introduce, is Marcelle Pick.

Marcelle co-founded the world-renowned Women to Women in 1983 with a vision to change the way in which women's healthcare is delivered. In her practice, Marcelle undertakes an integrative approach which not only treats illness but also helps women make choices in their lives to prevent disease.

She has successfully treated thousands of women with her unique approaches and discovered functional medicine early on in her career and was thrilled to be among the first to be certified as a functional medicine practitioner.

Welcome to the Summit, Marcelle. We were in that same cohort and doesn't it feel like it was forever ago now?

**MARCELLE PICK:** Oh my God, it really does.

**DR. KEESHA:** What's that?

**MARCELLE PICK:** I said so much has happened since then!

**DR. KEESHA:** Yes, yes. So of course this is a Summit about female vitality and I always start with a reminder about what vitality means. It's the passion, it's the sparkle, it's the zest that we feel in our lives as well as the life force and the energy that infuses every part of our being.

I find, and I'm not alone, all of the experts that have been on this Summit are finding that vitality is a real serious issue among women of today and that's why I chose to do this topic. So I would love for you to think about what is the biggest vitality sucker that you see in women in our culture today?

**MARCELLE PICK:** That's a big question. I would say probably it's learning how to set boundaries and it's boundaries with your staff, for me, and boundaries with other people.

Also, if we're not also taking care of ourselves. It's this whole motion of a bank account; you can draw money from the account over and over, but if you don't have a storage of money in there, you run out of money.

I think as women we really are not so great at taking care of ourselves because we usually have children and we have this innate desire to take care of them. We have jobs, we have friends and

we have relationships and we're just doing all things and we just get so worn out trying to do so many of those things.

I'm just getting ready to do a webinar on the ACE study, looking at the adverse childhood events study. What's so astounding to me is the literature that says that if we have a tremendous amount of stress in our childhood, which most people do, the higher the stress, the less resilience you have, the more difficult it is to maintain boundaries in life, to be healthy in life. So it's always understanding what drives us and how we make it better.

I'm blown away by the amount of research there is showing that our pain, our angst, our anguish, our lack of love for ourselves, contributes oftentimes to how we live our lives. We always have choices in our lives to either have our stories define us, or have our stories give us power and energy to be someone strong and different.

**DR. KEESHA:** You probably won't be surprised that almost every single panelist that's been on the Summit has actually stated nearly the same thing; that we are overscheduled, we're not saying no and we're not putting ourselves, as women, on the radar as people who must be nurtured by us.

I think this is a universal theme that anyone that's working in healthcare of any sort is really seeing, that it's rampant.

I'd love to talk a little bit, we'll start with what happens, like you just said, from childhood with that really stressed response. It sets up our bodies and our brains to react in a certain way.

Let's talk about one of the most popular subjects that you can look up on the Internet these days; I teach about it, you teach about it, we've both written about it: adrenal fatigue. I would love to really talk in depth about this.

You are the expert on this Summit about this subject and I really want women to understand what happens to their whole entire hormone or endocrine system with stress from the perspective of what's going on with the fight-or-flight system, your little internal alarm system.

**MARCELLE PICK:** Well as you know, and what perhaps some of the people don't know, is that we have two components to that system. One has a very fancy name called the hypothalamus to which the pituitary and adrenals are connected. Unfortunately they're connected to the thyroid and also to our hormones.

With that comes the sympathetic nervous system, that follows in fight-or-flight, that produces adrenaline and epinephrine so people often have lots of anxiety. What's astounding to me is in

2009, the Endocrine Society came out with a position statement basically saying there's no such thing as adrenal fatigue.

**DR. KEESHA:** I want to stop right there for a second; 2009 wasn't very long ago, and this is what happens in mainstream medicine all the time. I just want to let that sink in before you went on. In 2009 the people that are teaching the physicians called endocrinologists how to respond to their patients are saying there's no such thing as adrenal fatigue.

**MARCELLE PICK:** That was the year my book came out, *Are You Tired and Wired?* That book has since been renamed to *Is it Me or My Adrenals?* I took it on for myself to see, because I was getting that information. If you Google 'adrenal Fatigue' I come up on the first page, so people are always asking me questions about the research.

I have over 800 peer review journals to show that adrenal fatigue – I don't like the name fatigue, I think it's a stupid name – that adrenal dysfunction is profound and we're starting to understand the biochemistry of that. We're not even saying it's not an issue.

There is significant research, you and I see it in our practices, showing that when you have too much fight-or-flight and it's not calmed down by having a lot of joy in your life, a lot of quiet time, getting into parasympathetic, not using a computer at night, sleeping well, what happens is the adrenals actually affect blood sugar. They actually affect your gut and your GI system. They actually affect your immune system and increase autoimmune disorders.

They significantly affect your hormonal cascade, decrease libido – because the body's trying to make cortisol instead of making estrogen and testosterone and progesterone – and it significantly affects how the thyroid functions. It increases something called reverse T3, which is like the brakes on the thyroid. It suppresses the secretion of something call thyroid-stimulating hormone (TSH). So your thyroid doesn't work in the same way. You don't always need thyroid replacement, but you have to work on adrenals.

The fantastic part about this is that it doesn't take tons of medications or anything like that to really help the adrenals. It's the acknowledgment that it's a problem and understanding where people are; are they producing too much cortisol, or not enough cortisol, that makes a difference in how we use herbs to treat it.

But the most important part is what you said, Keesha, which is we have our lives that are so full. I don't know if anyone watched the Michael Moore movie, *Where to Invade Next*, but one of the things that was so inspiring to me was that the schools in Finland have no homework, and the schools there are some of the most progressive in the world.

We in America, unfortunately, overextend our children. They're doing dance, they're doing ballet, they're doing hip hop, they're doing soccer, and then they have homework. No wonder our brains are kind of wired for distress.

The other part that's so intriguing about this is that it's not just the notion of external stress. It's the notion for women of internal stress. I just presented this past week at the Institute of Functional Medicine. One of the questions I asked the audience is how many women in the audience love their bodies? There were about 350 people there, and five women raised their hands. So that's an internal stressor.

Our body does not know the difference between real stress and perceived stress. So for those people who have high what we call "A" scores, which means adverse events in their childhood, that significantly increases cortisol.

What happens as children, our cortisol levels are really elevated, and then we have children, and then we have a job, and then we have stressful interactions at the job, and then we're asked to do something else, and then we have a relationship, and then we try to have friends, and now we're pulling our hair out because we can't do it all well.

What happens then is that cortisol gets affected which has major physiological reactions. We also know from this amazing study, the ACE study, that people die earlier if they have huge stressors. They have more heart disease, more cancers, more lung diseases.

This is all about stress, which is incredible because that means that the adrenals are vital to our existence. What's so amazing is that the adrenals, we really have to have them. If we don't have them, we can't live.

But we're meant to be like zebras. Zebras get chased by a lion, but then they go back to the field and they eat. They don't worry about "The lion almost caught me. If I had just done this, it would have made a difference, and if I'd been in that corner, would it have helped?" They don't think that. But we as humans do and that's what creates even that much more stress for us.

**DR. KEESHA:** I use the zebra and lion approach all the time. Robert Sapolsky, the great author of *Why Zebras Don't Get Ulcers*, did a fantastic job of illustrating what you just said.

One of the things that I talk about is that zebra, if it's being chased by the lion and believes it's about to be lunch, then it's not safe to stop and go to the bathroom. It's not safe to digest your food because you don't want to stop and go to the bathroom. And it's not safe to have a baby, so there goes your libido, here comes constipation.

It's this high alert system where what your brain's doing while this is going on is it's narrowing down its focus so only survival, only the horizon and looking for a safe place is in the brain. So this means the zebra's not actually saying "Wow! This air! This temperature is so beautiful! The grass feels so wonderful underneath my hooves! I can't wait to tell my daughter about this wonderful experience I'm having right now and remember all of those things." This is why we forget where we parked our car in the parking garage, we can't remember where we put our glasses or our keys and we're sticking something in the refrigerator that doesn't belong there.

It's really this narrowing of the brain's functions that gets locked into survival that is the reason all this is going on. So women come and see people like us and say "My memory, it's gone. My libido went to Tahiti and left me behind. I can't poop for anything!" For us that's a really clear pattern. We get what's going on.

So when you are working with women in your practice I would love for you to talk about tips that you give them for calming this down and we'll move from there into the different kinds of adrenal fatigue because there are different stages these are happening in. It's not just one upending of the bucket.

There's a progression that happens because, of course, in the body there's no place where just one part of the body lets the other fail. There's always this constant desire for balance, or what we call homeostasis, and so we'll rob Peter to pay Paul until Peter all of a sudden doesn't have anything left to rob. Now you're going to have symptoms show up. So let's talk a little bit about ways to get that to calm the heck down.

**MARCELLE PICK:** Well it's interesting. A lot of times what I'll do is I'll just make some minor dietary changes and if they're feeling exhausted I might have them keep their pulse rate under 90 and add some nutrients, just so that they have the energy then to look at how to change their stressors.

Quite honestly a lot of times it does come from our inner perceptions of being not good enough, not smart enough, having to do everything right, not knowing how to set limits, not knowing how to have boundaries, doing too much, caring too much about what other people think – all those things are conversations that are constantly going on with so many of my patients.

So by adding nutrients, then we start having the conversation about now, how do we look at taking baby steps? Tony Robbins had an amazing interview on the Genius Network a few weeks ago. It's a very simple 10 minute meditation. So that might be the solution. Or even using the emWave machine, a minute twice a day. Or breathe; inhale for eight seconds, hold it for eight, exhale for eight. Those little tiny things are the things that are important.

It's also about making a change in your life that's actually going to change the way you do it in the future. Going back to the old behaviors never changes anything. Ultimately if you pull on that rubber band, it's going to break. You can't tolerate that kind of stress and the body will give out somehow. It has an amazing ability and system that's so beautifully designed, but it's not meant to do all the things we're doing to it.

Depending upon the particular person, I don't really have a standard for each individual. I do have them stop sugar and gluten. I might have them do an elimination diet. I might do a blood test to see about food sensitivities to see what foods I might need to take out of their diet. If it's just Coke they're drinking in the morning I might stop that first. So then there are lots of different things that we can make a difference with.

**DR. KEESHA:** I think one of the most important things that you just said Marcelle, and it's what I was getting to, you said 'these are the conversations going on in the heads of women I see' – that's not just the women you see, it's pervasive.

I always draw a picture for my patients. In a health coaching program at the Academy for Integrated Medicine, I teach my students how to draw this picture for their clients, where at the front of it is the mind and above it is written the word *perceptions*. Perceptions start the whole thing and perceptual change and shift has to happen.

Not necessarily your stress. In other words, you may be taking care of elderly aging parents, or you might have a special needs child, or you might have a job that has an uptick of stress that you can't do anything about. But the voices in your head, those you can do something about.

So I love that you're talking about that because every woman has their own theme song going on in their mind that's not helping them if they're not aware of it and can just change the radio station.

**MARCELLE PICK:** Absolutely. The part that's so interesting is when I was researching my book, what I found was that we have this innate amygdala response and it's that response of the mother walking through the woods. She sees something and quickly moves out of the way because "Oh my God, it might be a snake!" And then she realizes "No, no, it's not a snake, I'm fine." But unfortunately so many times, because of our own stories as young children, we respond in a way that's most familiar to us. Until we learn how to do that differently, the amygdala gets activated which then increases cortisol production, which then has a huge number of problems associated with it.

Helping people understand what so many of us don't get. Like "Oh, that's not real anymore, that was my story." For people who had simple things happen in their childhood to the most abusive,

it's "Wait a minute, that's not today, that was yesterday. The worst is over." It's practicing with the frontal cortex of the brain to be able to say "Okay, I get it. That's not how it is anymore."

But that's where the line in the sand comes in, Keesha, which is we have a choice to have our story define us, or to say "Wait a minute, I now have strength and muscle to be someone different. I don't have to believe that about myself anymore. I don't have to be so hard on myself anymore." Because that's the place of that stress.

Of course, other things cause stressors in the body like toxins and genetic propensity. We also know now, believe it or not, that we have stress pre-natally. Our mothers have stress that actually changes genetic expression generations forward. It's not just the stress that we have, it's the stress that our mothers had and then the biochemistry changes it back. Those studies were just coming out in 2015 and 2016, starting to look at this.

So food changes our genes, our environment changes our genes, and stress changes our genes. But all those are things we can do something about this, and that's the beauty of this. We can change this.

The horrible fear about "Oh my gosh, I had such a horrible childhood" can be like "No, no. Now you know, work with whatever you need to do to change the way your body automatically responds." It takes practice. Anything you do differently takes practice.

**DR. KEESHA:** I have an interesting background in my education with psychotherapy, sexology and functional medicine. Bringing these together, the things that are just coming out in scientific literature and medicine today have been known for a very long time in some of these other arenas.

It's very fascinating for me to watch everything coalesce and finally come back into this place that anciently we already had, which was that the mind and body are not separate. We've conveniently put them that way in Western medicine.

This is why I did education in both because I realized really early in my medical practice that you cannot separate these two; that whatever is going on in the mind is causing what's going on in the body. The body is bearing the burden of what's happening.

So the impact of story is so powerful. I love what you're saying, that your story doesn't define you. In fact, any author knows that if you don't like the way your book is going, you can just scratch it and keep going. Re-write it. This is what's so important to understand, that we are the authors of our own lives.

If we don't like the way it's going, if we don't like the plotline, we don't like the theme or the genre – is it a horror story that you're living? Is it a tragedy, a comedy? – change it! You can change your genre too. You have the power to do that. Sometimes it requires some help from a professional if you've had a lot of trauma and you're having trouble really grasping what we're saying. What comes to mind is funny, did you ever see The Book of Mormon musical?

**MARCELLE PICK:** No.

**DR. KEESHA:** There's a song in it where he says 'turn it off' and he's talking about something completely different, but you can turn something off or on and it's a very flippant thing about what we're saying which is "No you can't just turn it off." You actually need to do the work of going through the layers of re-writing this in a way that, what Bruce Lipton says, is "changing the tapes in your tape recorder." That you have to really re-do those. That takes some time and some patience and some compassion for yourself.

**MARCELLE PICK:** Absolutely. But you know the interesting thing, Keesha, is that people still don't know about this study. Again, when I was at the conference I wanted to know how many people in the audience knew of the ACE study and I would say probably 15.

I interviewed Dr. Felitti on the radio because I was so curious to know why this is not mainstream medicine, and it's still not mainstream. Even Kaiser Permanente that did this study looking at how adverse events affect us physically, it's one of the longest ongoing studies in the history of medicine, and Kaiser's not using the information, neither is the CDC. So we still have some work to do.

But the beautiful thing about this is, the research came out from this study in 1998, and if you look at it and dig deep as I'm doing right now for this webinar, there are probably 10 different studies done every single year since then to date, now in 2016, looking at the same things only using it differently. For example does it increase the cancer rate? Yes. Alcoholism? Yes. Addiction? Yes. Obesity? Yes. Immune dysfunction, chronic fatigue syndrome, migraine headaches – it's astounding, the relationship, and all this is about our stress.

The amazing thing that you're talking about, that I talk about in my practice, is this is something you have control over. This is something you can change. We're not saying it's easy. It may be like boot camp, trying to really dig deep and see that you don't have to have this define you anymore. You don't have to respond this way anymore. You don't have to be depressed. You don't have to do this, you can do something different. How exciting is that? How powerful is that? Because it gives you total ability to do that.



**DR. KEESHA:** Well it's very exciting and even more importantly, it's empowering. I have a radio show called Healthy You! Radio I say that it's radio that empowers you to heal yourself. It's all about really helping people come to this kind of information and then integrate it.

So as we're talking about this, I mentioned earlier we would go through the different stages of talking about, the kind of stress you went through as a child, your genetics – that's big.

I do genetic testing with my patients that I've been working with for the last four or five years. There are certain, what we call SNIPS – single nucleotide polymorphisms – that you might say are little mutations in particular genes that will actually predispose you to handling stress in a dysfunctional way, in a way that's harmful to your body. But the great news is that you can then turn that off. That's through the things we're talking about, through diet.

Ajayan Borys did a talk for the Summit and in the middle of the talk we did a 15 minute guided meditation. If you do this meditation for 10 minutes, you can undo the impact of that gene, just that easily. But you have to have willingness and that's my big word that I always use, willingness. Are you willing to do that?

Can we go through those stages of what happens when the body begins to respond in a way that people start to finally take notice. Because, of course, all this has been going on for years before people finally notice it.

**MARCELLE PICK:** I don't know that I'd called them stages. There are certain stages you'd call general adaptation syndrome that was developed by Hans Selye and it's very similar to that.

So the body has this amazing ability to come back to normal, to have the arousal of the stress and then everything comes back down to normal. But when the body starts to adapt to either high levels of cortisol or low levels of cortisol, that's when it gets to be a problem.

In my book I wrote about a person being like a racehorse; a person who's got high adrenaline morning, noon and night, is always racing, has some palpitations, some anxiety, some memory loss, can't really sleep at night, but they're kind of wired. But oftentimes if they sit down in a corner they might feel a little tired as well.

Then you have a person who might even be high in the morning and then flatlines the rest of the day. Or you have the person that's low in the morning, low all day, the flatliner. Or you have the person that's like the workhorse, who's plodding along and has ups and downs in their cortisol levels.

Each of those people is going to be different in terms of how we treat them. Some people have resiliency and their body stays high with cortisol their whole life. Other people have high, but

then there's a crossover which happens with some particular issue; they might get a virus, they might get sick, they might have some trauma. Then they go from high, which they've been most of their lives, to low.

What happens then is that they're exhausted. They wake up in the morning and they can't get out of bed even though they've had eight hours sleep. They have no sex drive. They're constipated. They have food sensitivities and food allergies. They have immune reactions that they never thought they would have. They've never had problems before. They get sick all the time; fibromyalgia and chronic fatigue syndrome fall within that category a lot of times. Those people oftentimes also have lots of adverse events in their childhood. Their ACE numbers are very high.

It's the combination of all of those things that cause people to be either very low with cortisol, up and down with cortisol, or very high with cortisol. You see all kinds of variations when you test them because sometimes you look at people and you think they're one thing, and they're actually not that.

The treatment for those people is very different, primarily because if you're not sleeping at night, you really need to start sleeping, because sleep is so important for your health.

**DR. KEESHA:** Exactly. So when people bring big bags of supplements into my office and they say they're taking this adrenal supplement because they feel tired and they suspect they have adrenal fatigue, I'll say "No, we should do some testing." By mantra is: test, don't guess.

**MARCELLE PICK:** Now the sad part is, and this is where the Endocrine Society comes in, what we know is things like toxins are also endocrine disruptors and they also play into all this, so it's really a composite of so many different things.

In the endocrine world, we test for Cushing's, which is too much cortisol. We test for Addison's, which is too low. The problem is that those tests only give you one number, and cortisol levels are di-urinal, so they're high in the morning and low at night. They have a significant difference between morning and night cortisol, as it should, because you're supposed to be sleepy at night.

But when you look at cortisol levels that are done at the hospital, using serum or plasma, you can't get an accurate reading. Saliva is really the best way to find out what's going on with cortisol levels. Around 30 minutes from waking is when you should do your first number, then around midday, mid-afternoon, then evening around 10:00pm. That's when you should be testing them.

Everyone is different. In particular, gluten is something that causes significant problems with adrenals and food sensitivities, so it's always looking at the big picture to find out what the problem is, how do we support it and what do you need to do to change it.

That's really why I wrote my second book, because so many people were getting onto supplements and thinking "I'll be better now" but no, that's just the beginning. We have to do the work to figure out why you got this way to begin with. Then we can make sure you don't have it happen again.

**DR. KEESHA:** I call that patching the hole in the bottom of your boat. You just have to. Bioidentical hormone replacement is great and fine for getting symptoms to be gone and to fill those buckets back up if they've been dumped over. But you have to patch the hole in the bottom of your boat, that's such an important element.

I think once people feel better, they want to continue on at the breakneck speed they were at before. Then any number of supplements, bioidentical hormone replacement or whatever that you're taking that worked for a little while, won't work anymore. You have to go up and up and up, which is your body telling you that you have not dealt with the root cause. Of course, you can put yourself at risk for other problems when you do that. So I think this is a very important discussion to be having.

Let's talk about these different phases of adrenal fatigue; the racehorse, or phase 1, when that cortisol is just pumping high, and you're wired but tired – coffee, not such a great thing! One of the things we talk about a lot in functional medicine is the kinds of foods that will nourish your cells, that will help the little engines that get your cells going called the mitochondria, the profusion of oxygen into your brain and all your other organs so that you can have energy and vitality – all of these things are impacted by what you eat.

You've mentioned gluten several times and food sensitivities. I'd like to come to that in a little more detail. What I see, and I know you see this too, is people who have a high level of cortisol that has been leaked out into the body over time because the internal alarm system keeps going off with the fight-or-flight based on whatever your perceptions are. Cortisol is what is called a catabolic steroid hormone, which means it breaks things down, including the lining of your gut.

Jack Tipps was a guest on this Summit and he has a great talk – and I want to make sure everyone listens to it – about the gut microbiome. We're not going to go into a great deal about it in this hour, but I do want to mention how important your gut is in relationship to your endocrine system. They are not two compartments in the body that do not speak to one another. So let's talk about food and the impact it has on the adrenals.

**MARCELLE PICK:** Well, food sensitivities – it's hard to tell which comes first, but if you have tremendous amounts of stress, just like you mentioned, it changes the whole biochemistry of the intestinal system. When that happens you become reactive to foods that are really healthy for you but your body can't tolerate them for the time being.

So in addition to healing the gut, which I'm sure he talked a lot about and what you really need to do to help the microbiome of the gut, you have to also at the same time perhaps take those foods away temporarily. Gluten and, for me, I don't really like people eating a lot of sugar in their diet because it has nothing redeeming other than it tastes great for a moment.

**DR. KEESHA:** And it causes inflammation.

**MARCELLE PICK:** Big time. And heart disease, heart attacks and everything else.

But the reality for so many people is they have reactions to these foods. It doesn't mean you have to stay away from those foods forever, although gluten, for me, is probably one of the problem foods because I don't see a ton of people doing very well with them, especially in America. The gluten in Europe and South America tends to be quite different, but here right now we're still having a problem. So I tend to have people stay away from gluten and also to be more mindful of carbs and having lots of color on their plate.

I will oftentimes do either an elimination diet, when they first come to see me, or I'll do an IgG and IgE food sensitivities test, looking at what are people actually sensitive to, and what are they actually more on the allergic response spectrum.

**DR. KEESHA:** I want to go into this distinction a little bit, Marcelle, because people get confused. They'll say "Oh I don't have any food allergies." I'll say "Well, I'm not really testing for food allergies. By the time you are the age you are, you usually know what you're allergic to."

The IgE responds within two hours after you're exposed to it. The IgG can take up to four days. It's very difficult to pull that together and connect the dots. So IgG is one that I love because it just gets in there with a precise result, like "Okay, this is actually causing your immune system distress. It's causing it to react. It's causing hypervigilance, which is what your adrenals are doing too. Too much hypervigilance, and you start attacking yourself! That's called autoimmune disease. We don't want this!"

So that difference between IgE and IgG is really important. We're talking about food sensitivities. IgE is food allergies.

**MARCELLE PICK:** Right. What's interesting is some of the labs also look at some IgE but they're really moderate and I don't really think it's an IgE per se, but it's much more of a reaction than IgG. When I take those foods out in particular, they seem to have a huge impact in a good way, but sometimes they're problematic.

When you see all of them lit up, you know somebody's immune system is just on rage and having to really cut back on that. But again, it's all the things that we talk about which is being happy, lifestyle, exercise, nutrients, and the most important is food.

It's also important to know that if you're in an unhappy marriage and you're sleeping in the same bed with someone that you're not happy with, that causes huge amounts of stress 24/7. That doesn't mean you have to leave that situation, but you have to find ways to decrease that cortisol production. It could be work that's causing the same thing.

Again, we're always going back to what the root cause is. What's the cause of the cause of the cause that really makes the difference to help people feel happy and joyous and excited about life and living and their day-to-day existence? If they don't do that, no matter what we do with supplements, or DHEA or bioidentical hormones, nothing changes.

I tend to, as a practitioner, use those last because our body produces tiny picograms of hormones a day, not very much at all. So to correct it is actually quite easy when we make lifestyle changes, when we change the quality of our food, when we have more protein and less carbohydrates, and when we really center on what we need to do for the adrenals. When we do that, then DHEA comes back down to normal.

Believe it or not, when you have too much stress your body makes cholesterol, and cholesterol makes many of the wonderful sex hormones that we have. But there's an enzyme that's blocked when we have too much stress or we have inflammation, and instead, the body produces cortisol and it doesn't make progesterone, it doesn't make testosterone and it doesn't make estrogen. We call that the cortisol steal. That's really important to know because if we do all the things that make a difference for our adrenals, then the body starts producing testosterone again and our sex drive comes back. Then we start producing progesterone a little bit again, and estrogen.

So it's something I tend to use later and sometimes I'll adjust thyroid medication, but I'll look and see if I can add some selenium, or add some iodine, and then let's see what happens with the thyroid as we're working on the adrenals. The adrenals are what we call upstream, they affect hormones and they affect the thyroid. But if we fix the adrenals, so many times the thyroid normalizes and the sex hormones normalize too.

**DR. KEESHA:** I want to circle back to the thing you were saying that I think is so vitally important. When we start talking about bioidentical hormones, these picograms we're talking about, these little tiny amounts can go a long way.

There are different schools of thought out there, like the Wiley Protocol, that was propagated by Suzanne Somers, where you want to be on these supra-therapeutic, which means way over

therapeutic dosing of hormones in order to make yourself be the way that you were when you were 20. So what's the impact of this, Marcelle? Please, tell everybody!

**MARCELLE PICK:** I had somebody in my office the other day, she was on 8 mg of estradiol, 8 mg of testosterone, and 400 mg of progesterone, and I was thinking where do I start? Of course, when I did a hormone evaluation, her estrogen was through the roof.

Part of the problem for me with that is when you start adding hormones, unless you're really paying attention, it affects everything in the body. It's got affects physiologically everywhere. So if somebody's going to be on bioidentical hormones, you don't need to be on very much. Just a little kiss of estrogen and a kiss of progesterone can take people a long way.

I'm not a big fan of using those kinds of doses of hormones. I want my patients to feel amazing, excited about life, have a sex drive, feel sensual, sexual and age well and be healthy. That's the whole goal.

**DR. KEESHA:** Here's the downside of too many of these hormones, given in the way that the Wiley Protocol talks about; you create what's called hormone hunger in the body. It's the same as when you go on an antidepressant. It works for a while and then it plateaus and then you need more. That's exactly what happens in the body with these hormones; when you take too much, you become hormone-hungry, your sex hormone binding globulin is affected and you have to go up.

When you go up like that, you're putting yourself at risk for a number of different things, the worst of which is cancer. The very people I'm talking about that have propagated this theory are now suffering from breast cancer today as a result of this.

So I really want this out there, that people understand – and I love this, 'a kiss of estrogen' – just a little bit goes a long way because that's not the root problem. Your hormones are imbalanced not because they just one day woke up and they're low. It's because after robbing Peter to pay Paul, now Peter is also out of money. Now you're showing symptoms of something that's been going on for a really long time. What we're talking about is balancing that system, the entire system.

**MARCELLE PICK:** Right. Absolutely.

**DR. KEESHA:** You and I have both dealt with this ourselves. You've been in adrenal fatigue have you not, Marcelle?

**MARCELLE PIC:** I remember going from my couch to my kitchen, I had to lie down in between. I've been there.

**DR. KEESHA:** I remember being pregnant and crawling across the floor to the refrigerator to get some peaches someone had given to me and to drink the juice so that I could finally come to and quit being dizzy because I'd fallen getting up.

So I came out of graduate school and I jokingly did an adrenal test, because I do it every year for myself no matter what, thinking this is going to be flatlined for sure. You know, that's what graduate school does, and sure enough, it was flatlined. I could tell. I've been doing this long enough that I know when my body is not at its optimal function and I can smile about it and say "Okay, time to get going, let's get rebalanced." That's the good news, that you can. You can rebalance this. It just takes intention, focus and willingness.

**MARCELLE PICK:** And time.

**DR. KEESHA:** And time.

**MARCELLE PICK:** Because it means that instead of getting up perhaps at this time or going to bed at this time, you're going to go to bed a little earlier. It means turning off your computer.

I suggest people to take an electronic Sabbath a couple of times a week, where they don't answer their phone, they don't use the computer, because we are all wired all the time. For goodness sakes! When we have a war we see the first bomb on TV. It's like, seriously? What does that do to our system? How does that create a lot of trauma? And it does.

So anything that one can do on a regular basis to shift that dynamic, but it's not short term, it's for good. Because what got you there to begin with is not meant to just be gone for a little while, it's meant to be changed.

**DR. KEESHA:** I haven't owned a television since 1987. I was crying one day when my father called me. I was pregnant with my first child, and I picked up the phone, he could tell I was upset and he said "What's wrong honey?" And I said "Another drive by shooting here in Dallas, Texas" where I lived at the time, and I said "I can't believe I'm bringing this child into this world where there's so much violence."

Well the violence was in my home coming across the television. I'd brought it in, and I was upset by it and disrupted by it, and he gave me the wisest words Marcelle, I have never forgotten this. He said "Honey, I want you to think about something. What was going on when you were born?" It was the Vietnam War, I was born 1965, and there were riots at Berkley and flag burnings, the country had so much unrest.

Then he said "How about when I was born?" It was 1945, when my parents were both born, and of course it was the end of World War II where thousands of people were being put into gas chambers and the world was at war. Then he said "What about my mom and dad?" World War I.

The point he was making is that there is always going to be this kind of thing happening in the world. It is your choice about whether you bring it into your home. From that day forward, I just take my news in chunks that I can manage. I do not need someone to show me the pictures, I can read about it and that's what I do. I'm telling you, I'm so much happier.

**MARCELLE PICK:** Me too. I don't even know what's going on in the news because I choose not to. It doesn't help my immune system. I'm not as up to date on things that are going on in the world, but I get caught up when I need to and that's fine for me.

They've done some pretty interesting studies many years ago. At Harvard, they did a study looking at some of the med students. They looked to see what happened in their T cells, which have to do with their immune system, if they watched a movie on Mother Teresa and what happened when they watched a movie on violence and abuse.

What they found, which is not a surprise to you and me, is that the T cells, the immune system, got significantly suppressed when they saw the abuse and the violence. That goes for movies as well. What about those violent movies or those TV shows? What does that do to the immune system?

That's a simple thing that you can do if you have adrenal issues, is just say "Okay, I choose not to do this right now. I'm going to do this instead." You might want to listen to some different music in the morning, you might want to see about doing small things.

This is so interesting for mothers who are always saying "I don't want to do that because I don't want to take time away from my child." But if you're in adrenal dysfunction, you're going to be much more reactive. You're going to be much more negative. You're going to have much less patience.

If you fill up your cup, even though you may have 10 minutes less with your children, you're going to be so much more present and that's what they're going to remember instead of the nastiness or the irritability. So it really pays off when you're able to fill your own vessel.

When you're able to put money in your own bank account, in your adrenal bank account, you're really putting money in for your health later on in life. That's what this is all about; finding ways to be really mindful for yourself.



It's harder when your kids are small, as you well know, it's this dance because they have needs too. But as a mother you've got to find ways to also take care of yourself otherwise there isn't anything left at the end of the day.

**DR. KEESHA:** If you fly at all, the flight attendants remind you of this concept every time; they tell you to put *your* oxygen mask on first. Before I had children I thought that was abhorrent. There is no way I would put an oxygen mask on before I put one on my child! There was just no way!

Now I can tell with my own evolution of consciousness and my own growth and human development that I get it now – "Oh yeah, if there's no oxygen in my brain, then I'm not going to be any good to anyone else."

I tell this in a very eloquent way where I say if you've got someone that is flushing themselves down the toilet, you don't join them. You don't dive in and flush right down with them. You keep your knees relaxed, your legs hip width apart and you throw them a rope. You don't do in with. They have to grab on to it and you help them out. But that's it. You're not diving in with.

I think too often women do that. When someone is upset or they're having something go wrong in their lives, just like me when there was a drive by shooting, I cried. I went down into the toilet along with whatever was going on out there, instead of thinking what can I do to be of service that doesn't make me flush myself?

I could probably come up with a prettier way of saying that, but that's the one I use. If you're circling the drain on behalf of others, please stop.

**MARCELLE PICK:** Find a different way of doing it, you don't need to go down with them.

**DR. KEESHA:** Well Marcelle, we're out of time and I so appreciate you taking the time to be on the Summit and to offer your wisdom to the women that are listening to this.

I know you're offering a bonus gift and we will put that on your speaker's page on the website as well as your contact information for people to be able to come to your website and see what you're up to and connect with you in all the ways that you have available. So thank you again.

**MARCELLE PICK:** You're welcome. It was my pleasure.

**DR. KEESHA:** I'm so glad you joined us because people really need to hear all of this information. We really do need to hear it over and over until it sticks.



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Alright everyone remember to live, love, learn and laugh. Have a fantastic day and be the most fabulous version of you that you can be, until next time.