

Hormones including Thyroid, Estrogen, Testosterone and HGH - Dr. Michelle Sands.mp3

Intro: [00:00:00] Welcome to the Detox, Lyme and Health podcast. And now, the man that simplifies the complex, your host Dr. Jay Davidson.

Dr. Jay Davidson: [00:00:13] Hi this is Dr. Jay Davidson and I'm with a good friend and colleague Dr. Michelle Sands. She is a number one international best selling author, licensed functional medicine physician, and doctor of naturopathic medicine: ND. She's a highly sought-after female hormone in epigenetics expert. Epigenetics means above the gene and I'll let her explain that. Dr. Michelle and her book and programs have been featured on get this ABC, CBS, Outside Magazine, The Boston Herald, NBC, Fox News, and USA Today. She's a board-certified holistic nutritionist, a certified personal trainer, and endurance athlete. But first and foremost she is a loving wife and a proud mom. Dr. Sands welcome to the podcast.

Dr. Michelle Sands: [00:01:06] Thank you so much for having me. I'm super excited to speak with you today.

Dr. Jay Davidson: [00:01:10] I was going to read more of your bio and I was like you know what, I want the listeners to hear your story really from you. It's such an amazing story with what you were diagnosed with when you were in your 20s and then now you're married and you have a baby boy and where your life is that now. So can you please share with the listeners all that?

Dr. Michelle Sands: [00:01:32] Yeah sure. I grew up in New York in an Italian family and we were on the 3P diet. I don't know if you've ever heard of it, but it's pizza, pasta, and pastries. We were eating a lot of carbs and food that my mom new how to cook and that she thought... Her idea of feeding us was once we were full, that was giving us an nutrition and she just didn't know any better. So I can grow up just thinking that every time you ate, you kind of felt like crap afterwards. I feel really tired and bloated and look at my dad and he would actually unbuckle his belt and take a nap after he ate, so I was like... yea, this is how everybody feels in the world. This is pretty normal. And I kind of got a little bit of weight issue growing up. I was I like that chubby girl in elementary school. As I got a little older and got interested in boys, I was like I have to do something. I joined the track team. When I joined the track team I couldn't run. I didn't even have running shoes. But the track coach was amazing. She looked at me and she knew I was trying to do something. She would give me a little extra coaching. She actually gave me some of her nutrition books. She told me Michelle, you can do anything you want to do in this world. Your body can do anything you want it to do. All you need to do is feed it, train it, and believe in it. That took be back because my dad used to say "Life sucks and then you die." Two dichotomies of my home life versus this amazing woman who is happy and athletic and healthy. And so I want to learn as much as I could from her. So she started teaching me a little bit about just basic nutrition and like if I ate more fruits and vegetables, I'd have more energy to run and if I got more sleep, I'd actually feel better, and than all these little things that to me were really big ideas. As a girl growing up in a family that didn't really know anything about health... my parents kind of argued a lot so it was kind of a dysfunctional home. But I had this place to go that she was kind of helping me. So I started out I just trading out my lunches. My mom packed me like the most amazing lunch ever: a can of soda wrapped in tinfoil Coca Cola, a bag of doritos, a snack cake (one of those cupcakes with the squiggles. Sometimes a Twinkie.) And they I'd also get a bologna sandwich. That was the boring part of the lunch. The rest of the lunch, I can trade for anything. I got milk or juice for the soda, carrot sticks for the Doritos. I usually get some piece of fruit for the snack cake and then the bologna sandwich I would just give to the janitor because nobody wanted the bologna sandwich. But this was my first way to empower myself to be healthy and actually started feeling a little better. I got a little better at track. I couldn't really control what was happening at home

unfortunately. But I was able to at least take a stand for me health. And I ended up getting a scholarship to college which is amazing because I probably wouldn't have gone to college otherwise. So I just worked really hard and got good at track. But the thing was, I did all these things. I got good grades in school. I was a good girl but I was falling apart on the inside. And so that second year of college we had to have a physical and the beginning of the track season. Weight, height, our blood pressure. When it was my turn for my physical, I got to in there and I just kind of fell apart. I started crying. I started telling the poor physician's assistant who was a guy who wasn't expecting this at all... He's like I'm just here to take your height your weight. I started telling him about my menstrual cramps and my absence of my period. I would get up every morning and I would take four Advil as soon as I woke up just like walk across the room because my joints ached so bad. I would take caffeine pills to wake up. I'd take sleeping pills to go to sleep. I'd take more Advil before track practice and more Advil after. I was taking like 20 ibuprofen a day at that point. And I had my Tums. My whole dorm room was full of OTC medication like literally something to help me go to the bathroom, something to help me stop going to the bathroom. Something to help me with everything. And so I was telling those physicians all these things. I'm like yeah I'm not healthy; there's something wrong. And so he just looked at me like hey this is not what we do. I started crying. This is the first time I really told anybody so I was kind of just playing the role of being the star athlete and a good student and so it was hard for me to talk about it. And so I finally did. I broke down and nurses came over and they let me tell my story and then finally they convinced me to see the doctor. So they made me an appointment. They do a bunch of blood tests. I didn't really know what's going on at this point. And they did some other testing on me as well. And then two days later I got a call and I thought it was a guy asking me to dinner because I was expecting that. It was actually a doctor and the doctor said hey, things came out normal. You don't have any issues with your digestion. There's nothing wrong with you overall. The only thing is that having a baby it's not going to be in the cards for you. So I don't know if that's in your plans but just do something else. Basically how he put it to me. I was 20 years old. I just turned 20. I was like I don't know he's talking about and I just hung up the phone. They had me come back in and did some consultation with them. Basically they told me that I had primary ovarian failure which to me at that time I didn't know what that was. Basically they were telling me my ovaries stop working. And I was going to be in menopause for the rest of my life and I'd be on hormones--though they put me on birth control pills and antidepressants. They put me on something--I don't remember what it was--but it is something for my digestion like heartburn medication. I didn't have heartburn at all. And so it was just this whole... that's what they gave me. And I kept asking why? What can I do? Because I was always I guess solutions... I like science. I was like how did this happen? What can I do? And they didn't have any answers. They were like this is what you do--you just take these pills. I didn't tell my mom, I didn't tell anybody for three years and every year on Mother's Day I would get really depressed. I wouldn't be able to listen to the radio or go to the store or do anything because there's all this commercial with moms and their babies and moms and their children have this bond and that really made me sad. So it just really hurt me. And so for the next five years I just decided I didn't want children. That was what I'd tell myself. And so I just started like getting into school more and volunteering and doing things to divert me away from what I really wanted was to be a mom. Ever since I was a little girl I held that baby doll, I knew I want to be a mom. And so it just broke my heart. I was like broken in a way that I couldn't fix. I fixed my weight problem. I fixed my acne problem, and a lot of things, but I didn't have the power or the tools to fix that. And I was basically told there is no solution other than taking some pills that weren't going to fix it. They were just going to help me with this. I was at school still so I went to like some of the professors... I wasn't in medicine that time. I was actually communications. And so I started going over to the medical departments and asking them, have you ever heard of this? Was there anything I can do? And the only people who gave me hope were the Eastern philosophy medicine doctors and the homeopaths and the naturopaths and a chiropractor who was like I think you can do something about this. And so then I had hope like I'm on a mission. And so I ended up going back to naturopathic medical school. I started learning about the different systems in the body and how

different things connect to hormones. I started doing every test I could learn about myself and what I ended up discovering was that I had celiac disease which is a huge no no for eating the three P diet all my life. So I immediately cut out gluten and learned I had an autoimmune thyroid issue, Hashimoto's. So I started doing some based therapies for that. The big thing was I learned I have lead mercury and cadmium heavy metal toxicity and those three things together were huge kind of block to my hormones. And so once I was able to detox the heavy metals and start getting the autoimmunity under control and bringing down the inflammation, about three years after I did those things my period started coming back normal. And I met my husband and we just kind of said hey you know they said it couldn't be done but let's just see if we can have a baby. And within two months, we have my son and now he's 3 years old. Now my mission is to like how women no matter what their diagnosis is, whether it's diabetes whether it's Alzheimer's, whether it's MS, whatever it is that that doesn't have to be your life. Don't live your diagnosis because there can be a way and there can be a reason and something you can do to fix it.

Dr. Jay Davidson: [00:11:26] Such a powerful story. We're friends and I didn't even know all that. So I appreciate you opening up and sharing. We hosted Dr. Jockers for his birthday. And your family came over, and his family, and my family was the three of us and of course it's like okay well what's Dr. Michelle going to be able to eat and what's Dr. Jocker's going to be able to eat. And it's just a testament of your lifestyle, like how disciplined you are that if it's not on your list you're not touching it, as far as food. And so I just wanted to kind of relay that to the listener and to know your tenacity but also just your love.

Dr. Michelle Sands: [00:12:11] Yeah. What did we do? We made a keto chocolate cake had no weird stuff and it was totally good for everybody at the table. So that was pretty cool.

Dr. Jay Davidson: [00:12:21] Yeah yeah. Any funny side note, Dr. Jocker's wife, she's like my husband he's the pickiest non-picky eater ever. I'm like what do you mean? If the foods are on the list he'll eat it no matter how it tastes. If it's not, he won't even touch it.

Dr. Michelle Sands: [00:12:42] In some ways it can be hard, because if we're out to eat at a restaurant that doesn't use the best quality food, sometimes I'll just employ some intermittent fasting and I'm just going I feel better afterwards. We know that it's going to bring my body one step closer to health instead of one step further away, and that's what I have to at least remind myself.

Dr. Jay Davidson: [00:13:03] So I want to talk hormones today and I see behind you, you've got your new book--your number one international best seller. So can you talk a little bit about I guess the premise of the book? A lot of my audience is in the chronic illness side, Lyme disease, chronic infection, toxicity type issues and it seems as if hormonal issues are very prevalent. What are the right answers to really address the hormones?

Dr. Michelle Sands: [00:13:31] Yes it's pretty interesting. One of the main reasons why I wrote the book is because the book is not about hormone replacement therapy. It's about all the things that you should do either along the side of hormone replacement therapy or it leading up to it or to push it back. I'm fully open to hormone replacement therapy. I think there's a time and place where I think people need it if they want to live long, healthy lives and their circumstances. I also see in my practice a lot of women coming in and they're on hormone replacement therapy. Their doctors looked at their tests and they looked at the numbers and then they took the hormones and they actually made the numbers where they're supposed to be. And they're still not feeling good. And so it's not just about replacing hormones, it's about getting your hormones to function properly and getting all the systems in your body to work with your hormones. Everything you eat, everything think, how you sleep, how you live, your relationships, those all affect your hormones. And so if all you're doing is taking hormones then you're not going to actually balance. Hormones are the way

that we relate to the universe. It's how we relate to the planet and all of cycles of the world and if we're not in tune with our bodies and our lives, our hormones won't be balanced. In the book we talk about what the hormones are--not all the hormones because there are over 400 hormones in the body. We talk about the major ones, the sex hormones, the hunger hormones, thyroid hormones, birth hormones, insulin, blood sugar. If one of them is off, the other ones are off as well. And so it's not just about dialing into one hormone, getting your estrogen right or getting your testosterone right. With me, I had heavy metals and heavy metals were actually blocking the receptor. So your hormones float through your blood and each cell has a receptor on it. It's like a satellite dish. And sometimes, if there's toxins, like toxins from the environment and things like EPA, cadmium, and things in your cleaning products, glyphosate, whatever it might be, if those toxins get too accumulated in your body, they actually sticky up the receptors or just block them. The hormones can't actually get in and serve the cell and do what they need to do. So that is why I'm so passionate about not just replacing hormones but making sure the hormones are actually functioning properly and working well. I think a lot of your audience they are having hormone issues and having chronic illness, Lyme, things like that, there can be a toxicity issue. There could be a functionality issue and increased sex hormone binding globulin. What that does is actually binds the hormones. You have the hormones but they are bound and you can't use them. That's another issue that doesn't really show up on standard lab tests when they're just looking at free levels of hormones.

Dr. Jay Davidson: [00:16:36] You mentioned sex hormone binding globulin being higher and binding onto the hormones just now. What have you found clinically to be the result of the high sex hormone binding globulin? Is it directly related to like liver issue or is it related to toxicity or is a multitude of things?

Dr. Michelle Sands: [00:16:54] And it can be something as simple as stress and not sleeping. It can be toxicity for sure, anything that raises inflammation. It can also be certain foods like actually Green Tea and Mint tea which are healthy, but too much of those can actually raise hormone binding globulin. If you think that can be an issue for you, you can measure it. If so, there are things you can do to have reduce that. One of the biggest things is definitely reducing stress, getting proper sleep, and reducing toxins. I think detox is going to be the new hormone imbalance. The state of hormones right now... When you look at women, we have these hormonal benchmarks in our life. You have puberty, we have our pregnancy and reproductive years, we have menopause. That's actually everything is shifting earlier. So we're seeing the average age of little girls getting their first period. It used to be like 12-14 and now it's like eight to nine. And that's going to be the average. And women who normally would go through menopause at average age of 50 is now as low as early 30s, some women in their 20s are starting to go through menopause. It's a twofold. I really believe it's the increased stress that women have in their lives now. I'm all for women's lib. But women are taking on so much more than we ever used, taking care of the family, holding onto careers, volunteering or doing things in the community. You know we're doing it all and we're trying to be super women and we don't have a tribe we used to have. We used to have our whole group of women that used to help us with our kids and with each other and with our family is now we're trying to do everything. And so that's one thing. And then the second thing is toxins. There's so many more toxins in our environment than there ever were. And it's really really hard to escape. I mean you can be even like the most neurotic cleanest person, but you can't live in a bubble. So you can reduce toxins from your house. And that's probably the best thing you can do, but your environment you're going to have to kind of modulate and that's why bringing in things like detox, seasonal detoxes, is definitely going to be helpful, especially for women before they get pregnant. If they're thinking about having a baby, definitely like six months prior, the woman and her husband should both be doing and detox. It's both the man and the woman, the sperm and the egg come together to make the baby. A man, his state of his sperm, he can actually improve that three months prior to conception. And that's going to improve epigenetically the way the baby's body is born, the way their brain is developed, and sets him up for not having asthma, allergies, hormone imbalances

in the future. So it's really important to you to implement detox and stress reduction in your life.

Dr. Jay Davidson: [00:19:56] So in other words, sorry fellas, but you are responsible as well if you're listening to this podcast right now.

Dr. Michelle Sands: [00:20:01] I just read an article..but that's the one thing we're seeing more and more that the man's sperm is actually even more influential in the development of the embryo and the fetus and the baby and especially for brain health especially for whether they have asthma or allergies or skin conditions. That sperm is so important and oftentimes we worry about what the mom's eating and what the mom was doing. Don't make the mom stressed... that's during the pregnancy, but three months before, make sure your man is really eating healthy. He's getting his exercise. He's not stressing out and that's going to make the better baby.

Dr. Jay Davidson: [00:20:44] Such a big shift. I mean it almost sounds as if like the medieval times of when a king would want a boy and then the woman became pregnant with a girl and then they got rid of the woman because you know it was the woman's fault. Then they figured out later it's the guy that actually determines gender but were blaming it on the women. It kind of seems similar in this case of like you know I want a healthy baby. It's like it's your responsibility too.

Dr. Michelle Sands: [00:21:10] Yeah because our eggs are actually more influenced by our mom's lifestyle decisions are our own. We can't definitely change that. That's genetics and that's where epigenetics comes in. Epigenetics is your ability turn on and turnoffs and things. If your mom was like alcoholic and depressed and crazy, don't worry. Your baby is not doomed to that circumstance. That's where you really want to start leveraging your genetics and making sure that you are on point with your nutrition and with your stress reduction and that you are really taking care in your lifestyle and getting all the nutrition. You can't always get it from your diet so supplementing correctly and being sure about what you need, doing some testing, seeing what you're deficient in. That's going to be important more than ever especially if you have a family history of issues.

Dr. Jay Davidson: [00:22:12] Wow. I guess going back to your talking about the receptors and the hormones... because I feel like we moved from you need to take hormones and it's pharmaceutical and synthetic and then kind of switched into we need to take bio identical. Now do you feel like a lot of the movement is that we really need to detoxify and down regulate the inflammation so the receptors aren't being all jammed up so you can actually hear the hormones?

Dr. Michelle Sands: [00:22:41] Yeah I think that it's a twofold together. So I think bioidentical hormones are definitely the way to go over the synthetic. Bioidentical just means they're identical to your biology and synthetic is made in a lab. Sometimes synthetic hormones can be OK, and bioidentical hormones can be synthetic too. That's important for people to know. They're not organic, they're not natural, they're just identical to humans. There is hormone replacement therapy and then there's bioidentical hormone replacement therapy. You always want bioidentical hormone replacement therapy. But just because it's bioidentical doesn't mean it's not synthetic. It could be made in a lab, but it's just made in a lab so that your body thinks it's the same as your hormones. I think most women depending on your age are going to need most eventually. The fact of the matter is that we are living now much longer than we've ever lived in the past. Menopause when we end our menses, that's usually evolutionary. That would be right before death, people people were dying in their 50s 60s. If we're going to be living to a hundred, a hundred and twenty, or even ninety or eighty. We going to have to replace those hormones if we want to function well, we want to have good bone health, brain health. We're going to have to replace those hormones to live optimally.

Dr. Jay Davidson: [00:24:15] What's the best way to administer hormones. Are we wanting to take them in a capsule or we want to take them in a liquid? We want to put them on the skin? Are we

wanting to take like things or try to help build the precursors or take homeopathic type things of them.?

Dr. Michelle Sands: [00:24:34] Yes so that's up for debate. It really depends on your needs. If you are just a little off of optimal, if you're a little bit younger and just want to optimize, you are already pretty decent hormones, then taking the precursors can be helpful there for a lot of people. If you are 70 years old and had been through menopause for 20 years or even your man and you're 70 and your hormones are just in the dumps for a long time, taking the precursors are not going to do that much for you in this case. In that case, you're going to be better off taking hormone replacement therapy now. The modality is different for different hormones and different for different people depending on the purpose. Like with progesterone, topical is great if you actually absorb more of it. We're finding that some people take both oral and topical works the best because you're going to breakdown... you're only going to actually absorb a very small amount of progesterone orally but that metabolites that you're breaking down are actually beneficial for your gut. So therefore there's benefits from both forms. Now there is also pellets on your skin so for both testosterone, estrogen, and progesterone, that's convenient. So most people don't have to worry about missing dose. So for some people that's the best. That's a little harder to really dial in. If you get a pellet inserted under your skin, you can't reduce dosage at that point. So we like to in our practice do a combination of topical and oral and we like to see how people are doing. If your symptoms are better after a few days, that's a good dose for you. But then if they are not as good two more days and you might want to dial it back. You might want to take your hormones every other day. You may want to decrease your doses. You don't always need the same dose every single day.

Dr. Jay Davidson: [00:26:31] So you just kind of vary it based for the female based on where your cycle is or just use kind of cycle higher and lower so your body doesn't become like dependent on it?

Dr. Michelle Sands: [00:26:43] Well for women who are cycling we do dose based on their cycle but early men or no longer cycling, we find that most people can stay on a consistent dose but some people don't need that consistent those every day, especially if you're doing the other hormone balancing things. Your body still does make hormones after menopause. You make hormones in your adrenals, in your brain. We just are realizing that you're making hormones in your gut as well. All your peripheral tissues are making hormones so if you do all the things to help them with optimal hormonal and epigenetic health, you're going to be able to produce a consistent level where you may not be lots of medication every day.

Dr. Jay Davidson: [00:27:33] So I find the chronic illness side or maybe more just my audience or you know client base, thyroid comes up a lot. What do you find being top of the list of affecting the thyroid and are there things that you like in helping get it going again or really helping normalize it

Dr. Michelle Sands: [00:27:53] Yes the thyroid and the gut are a huge connection there especially for autoimmune thyroid and there's also food allergens, toxins, and things like that. The thyroid and adrenals are best friends, so if you're stressed or if your adrenals are suffering, your thyroid is going to suffer as well. And I think it's important to know is that doctors will tell their patients that once they get on thyroid supplementation that they're on it forever and I know that's definitely not true. We can regrow our thyroid cells. Even if you have an autoimmune thyroid connection, you can actually regrow those cells. It's not a life sentence but I think especially for women who are pregnant and your T4 is low and you're going to need that for your baby's brain development so don't shy away from taking a thyroid medication because once you have the baby and you're ready to start started improving your health you can get up. I was on thyroid medication for 10 years and I'm no longer on it now because my thyroid is now healed. It is a combination. Usually it's not just one thing. Usually it's a combination of toxins and gut issues and parasites, Candida, bacterial

infections. It could be leaky gut, it can be toxins and heavy metals, it can be blood sugar imbalance. There can be a lot of different contributors to thyroid imbalances but I really urge people that don't just ignore it. Don't just push through it because giving your thyroid that support while you need it well actually give you the energy and the motivation to heal it later.

Dr. Jay Davidson: [00:29:31] That's good to know it's got the healing ability and then also that you don't necessarily have to be stuck on it. Even if you're on it, there is hope. That's very important. Where does testosterone, where does human growth hormone fit into the mix with females and males?

Dr. Michelle Sands: [00:29:46] Yeah testosterone is very important for both women and men. A lot of people think of it as muscles, guys with testosterone have lot of muscle and sex drive that's really important, but also like thinning hair and skin, and wrinkles, saggy skin where you worry a lot, have a lot of anxiety and fear, you don't have motivation, you have achy joints. All of these things can be low testosterone. Testosterone like any hormone doesn't just function in a bubble. It has to be in harmony with the other hormones and so by not having testosterone... a lot of doctors actually prescribe progesterone/estrogen for women but they are and don't prescribe testosterone because there were some studies a way back where they were using super high doses of testosterone like male doses in women and they found it caused some issues with health later in life. A lot of doctors shy away from prescribing testosterone but the reality is the dose that is appropriate for women doesn't cause any problems and actually is very protective against cancer, against Alzheimer's disease, against dementia. That's why it's important to know your levels and the supplement where you need. If your levels are a little off, things like zinc magnesium, vitamin A, carnitine and Maca can all help to boost your testosterone levels without going to the prescription route.

Dr. Jay Davidson: [00:31:20] Awesome everybody just wrote those down and can hit the health food store up. What's really funny is when you're in school you just memorizing the boatload of things and one of professors in chiropractic school and the nutrition side was like--just remember guys zinc's for your dink. And I was like OK.

Dr. Jay Davidson: [00:31:43] Not going to forget that one.

Dr. Michelle Sands: [00:31:49] Recently we've been doing a lot more epigenetic testing and there's a certain population that shouldn't take zinc because it actually causes inflammation. Knowing what your genetics require is important as well and then you can choose maca instead or carnitine. There's always a list right whenever we like all these things are good for testosterone, but we don't need to take every single one of them. We need to try one and see if that works for you. If you're not seeing anything different, scrap that, try the next one. A lot of times I have people come to me and you probably see this as well, they're taking like 50 different supplements because they heard there are good or bad for this or that and we have all those things but we are not every supplement is going to help every person. And it's because you may or may not be deficient in that and you may not have a need for it. Find the ones that actually make a difference for you. I always ask people why are you taking this, and they'll tell me, and I'll ask is it helping? And usually they can't tell me that because they are taking so many. So we'll just kind of scrap all the supplements and start with one. OK is that improving? Are we seeing a marker improve on your testing or are you feeling an improvement? If you say no to both of those, don't take the supplement. You'll save money, you'll save time. And every time you take something, there's a process happening in your body and there's energy required to use that supplement and so therefore energy is then being diverted from another process. So I really feel that sometimes over supplementing can be just as detrimental as under supplementing.

Dr. Jay Davidson: [00:33:28] That's big right there. When we do our research--Oh that's good for that Let me order that. Oh that's good for that. The next you know you're on 50 things and you can't remember like why am I even taking these?

Dr. Michelle Sands: [00:33:42] I've been guilty of that. In my 20s when I was going through all these health issues, I would literally be in the grocery store and I'd be checking out and I'd see in my peripheral all those magazines that had "Lose 10 Pounds in 20 Days" the miracle cure for this. And I can't help myself; I have to read them. I was afraid that someone would have the answer. And so they said get all these things and I was back in the aisles getting all those things. It's just very disappointing but overall I just know what it's like. Because you just want help and if someone says that works, you're going to try it. Dr. Oz is notorious for this. Every day he'll promote a miracle thing. And my clients will be like, "Did you see Dr. Oz?". No I didn't see Dr. Oz. They'll tell me about all these miracle cure things. It's hard to not do it. But just having that measure of is it improving a marker that my doctor's measuring or is it improving a symptom that I'm experiencing? No? Then don't take it or maybe start with the lowest possible dose and do you feel better or nothing or worse? If it's worse, stop[taking it. If it's better or nothing then go up to the next possible dose. Better or nothing you can continue going up to suggested dose, but if it's ever worse, then stop taking it. And then if you're at the suggested dose and you still feel nothing, then you don't need it.

Dr. Jay Davidson: [00:35:20] Great. Those are good recommendations.

Dr. Michelle Sands: [00:35:26] Since we're speaking on supplements I also have to share this. If you're taking it, you always have to monitor. Is it still making you feel good? Because sometimes we can over supplement with vitamin B12 or there so many supplements that you can get to like the point of diminishing returns, especially with some amino acids and you actually start feeling like worse or different symptoms. Sometimes you just need to take a break and only take it when you need it.

Dr. Jay Davidson: [00:35:51] So in other words it helped right away to kind of catch up but then you overtake it and now it pushes you out of balance the other way?

[00:35:58] Yeah exactly. We had a client who was taking tyrosine and they were taking it and they're feeling anxious and they weren't able to sleep very long. So they took it and then they came back two weeks later and they're like you know I'm starting to feel angry and irrational. I asked them how much they were taking and they were taking double the dose I told them like every day. Too much was causing a shift in the other direction. So you have to really dial in. Same thing with hormones, the same thing with supplements, anything you're doing to try to improve your health. Your herbs are powerful to you just like pharmaceuticals. You have to always monitor to make sure they are actually in balance.

Dr. Jay Davidson: [00:36:42] So asking on a personal side. At our families hang out and you were talking about the science of homeopathic hormones and stuff and I was like oh that sounds cool. And I started taking the like transdermal homeopathic HGH. I noticed personally right away especially like the first week or so like morning erection really strong adding the transdermal HGH and then I noticed I don't need as much sleep at night to feel rested. So can you talk to me about like where does HGH fit in? Where does homeopathic and even transdermal? Because when I think of HGH I think of you know baseball players and they're taking it illegally right.

Dr. Michelle Sands: [00:37:37] HGH, human growth hormone, that's the hormone that helps babies grow into children and children grow into adults. It helps your muscles form, your bones, it helps your body grow. Hence the name growth hormone. However it also helps us with energy, libido, helps us with our skin, elasticity, sleep. It's a growth hormone so it also helps us repair from

injury if we cut our skin or we tear a muscle. It helps our body renew and replace the materials so we can actually heal. So these are all amazing things right. So the problem is that human growth hormone tops out just after puberty and it starts declining. And so why old age you see the saggy skin, the wrinkles, the low energy, the inability to sleep, the loss of sex drive, a lot of these things are as a result of decreased growth hormone... also the inability to put on new muscle. A lot of men have sarcopenia, a lot of women have a body composition issues, and this has a lot to do with human growth hormone. Until about 1980, human growth hormone was harvested from cadavers. In the 1980s I believe it started being synthesized in the labs. So there's synthetic human growth hormone that was available in injections. These only were legally available for people who had growth issues, children who actually weren't growing, if they were shorter than normal stature. And so that was what it was really for however on the black market and underground, a lot of athletes and body builders started doing injections to improve their body mass, improve their energy, improve their sex drive, and all these things so that's what the baseball players were doing. They were doing the injections. There are some clinics now that do it as well for anti-aging. However the problem with the injections is there is a huge... they work. They definitely work. That's for sure, but there's a huge downside in that there's an increase prostate cancer, increase in heart disease. So there's a lot of negative effects of prolonged use of human growth hormone. And so the other way is to raise your human growth hormone.... there's a few ways. Human growth hormone is secreted more during sleep. So getting proper sleep is very important for human growth hormone production. However if you don't have human growth hormones, it's kind of a catch 22. You're not going to sleep as well. So you know doing everything you can to get that good sleep, preparing your sleep environment, and winding down, turning off the lights. All those things are going to be important for having higher human growth hormone. Burst training or high intensity interval training is also another thing that will boost your human growth hormone at least periodically when you do the training and so that is another thing you can do as a boost. And then fasting. Fasting is a great way to boost human growth hormone. A two-day water fast will increase its human growth hormone by five-fold and then five days is supposed to increase human growth hormone anywhere from 300 to 800 percent. Which is a lot. That's a huge increase. If you're like 75 and you only have you know 10 percent of your human growth hormone. Then it is kind of that diminishing returns. So and there is some homeopathic help. Homeopathy in general is the energy medicine. And so it's basically a way to influence the body energetically to either create something or to stop something. So in homeopathy we have remedies for the the flu, for all kinds of things. We do homeopathic vaccinations. It's called homeopathic prophylaxis in our practice where we actually help the children develop immunities. That's why we use it. There is homeopathic adrenals support, there's homeopathic thyroid support, and now there's homeopathic HGH as well. And so this is really exciting because it's a microdose. So basically if you take a solution of human growth hormone and you dilute it down 100 times so there's just a speck of it with that energy in the solution. That is what homeopathy is. There's a homeopathic transdermal gel that has human growth hormone, homeopathic adrenal support, and homeopathic thyroid support and in it all together in one. That is actually able to get into your skin and into your bloodstream transdermally and that influences your body to use whatever HGH you have and also make human growth hormone along with helping your thyroid function better and your adrenals.

Dr. Jay Davidson: [00:42:57] My understanding of homeopathy is if you take it and your body needs, it's going to utilize it. But if you take it and your body doesn't need it like nothing detrimental happened. Is that correct?

Dr. Michelle Sands: [00:43:10] Yes. And so for instance, with the homeopathic prophylaxis vaccinations like that dose is like one little palate. If by accident, the child would swallow the whole bottle, nothing would happen. That's the amazing thing. You can never overdose on it. If you take the wrong thing, it's just going to have no impact at all. So it just works with the body. That's why if someone has like optimal human growth hormone and they use the transdermal gel, they're

probably not going to see that much of a difference because they didn't really need it, unless they needed the thyroid or adrenal support. It's pretty amazing because it's so accessible. It's over-the-counter. So there's no prescriptions necessary. And it's FDA registered. Because it's homeopathy, it has a national drug code. So it's actually listed as a drug because it's homeopathic remedy. So there are some rules that they have to follow and make sure that the facility is clean and safe and that only the items they say are in it, are in it and so I feel comfortable recommending it to some of my clients because I know exactly what's in it.

Dr. Jay Davidson: [00:44:22] So right now there's only one homeopathic HGH that you know of that's got the thyroid and the adrenal in it?

Dr. Michelle Sands: [00:44:29] Yeah that's the only one that is transdermal. There are some homeopathic HGH oral sprays but the efficacy hasn't been proven as well as a transdermal gel.

Dr. Jay Davidson: [00:44:42] I know when I was chatting with you, I was like oh it's a multi-level or direct marketing company. Inevitably it comes down to people's motivation. Is it a good product and is it helping people or is it just you know like the Ponzi scheme and you want to get everybody on board and you know whatever jump ship type of thing? But I really trust you and your knowledge and I as like I want to try this out. There's no harm with HGH and then of course the things I already mentioned that I noticed and I've only been on it maybe 30 days. I take about kind of like a skittle or M and M size. I'll put one on my inner wrist and forearm/elbow and then I'll put another on the other side and I'll do that in the morning and at night. Is that about the right dosage?

Dr. Michelle Sands: [00:45:34] That's exactly the right dose. I like two little blobs the size of--I say blueberry, you say M and M. I just don't want to incite any cravings. Yeah definitely. And different people notice different effects. A lot of people I'm working with are noticing some of the fine lines in their face going away. We've seen actually lab tests improvement in osteoporosis over like a four month period. I started this product in a trial with only four of my patients so that we could see if it actually affected anything in four different women with four different issues before I actually started recommending it to anybody else because I always want to test things before. I usually test them on myself, but I don't really have a lot of health issues right now. I wanted to test people who are actually feeling the joint pain, arthritis and osteoporosis and having trouble sleeping and things like that so that we can actually see is it effective. And all four of them have had amazing results and they are loving it and so they've been on it now for about 8 months. And they absolutely love it. One caveat is if you stop using the gel, eventually your results will diminish back to where they would have been if you hadn't used the gel. Your birth hormone will start declining again. So that's the only downside I guess.

Dr. Jay Davidson: [00:47:02] So you get the good results but you get hooked into staying on it.

Dr. Michelle Sands: [00:47:06] Yeah. It's interesting. The company before it was multilevel marketing, they were actually a small company that was around for 14 years and had like a 98 percent rate re-order rate over the last 14 years now. And so because of that and because the people who were using it are starting to talk about, they just couldn't handle the volume in that small company that's why they went multilevel marketing models. I'm not a big fan of the multilevel marketing. The good thing is you can actually buy it as a retail customer. You don't have to sell it; you can just purchase it retail just like any other products so that's one thing that I like about it.

Dr. Jay Davidson: [00:47:54] What is typical cost for hormones? Because I guess from what I understand--I mean you're in the hormone world but--hormones are generally pretty expensive. I was like this HGH is about 150 bucks a month. Maybe it's two months worth on a bottle. But I mean it's definitely not a drop in the hat. But my understanding is hormones are like way more

expensive generally aren't they?

Dr. Michelle Sands: [00:48:19] If you were to do HGH therapy at a clinic--there's only some clinics if you live in New York or LA or a metropolitan area, there may be some anti aging clinics in your area. You could probably get a month's worth of birth hormone for maybe \$2000-\$4000 dollars and the same effectiveness if you do injection. There some pellets that are not growth hormone but they are some of the precursors to growth hormone. I don't remember the brand name but yeah it's just a pellet that dissolves under your tongue and that's pretty expensive. That's like \$2000 a month.

Dr. Jay Davidson: [00:49:10] So crazy. I'll find a link and make sure to post it in the podcast notes if anybody is curious on it. I guess last question I have about it is on the ingredient side. I'll just share my screen here. For those that are listening to the podcast on iTunes you can go to www.DrJayDavidson.com and click on the podcast and click on the Dr. Michelle Sand's hormone podcast and you can find the Youtube video and look at it. It's got active ingredients HGH 30X. It's got the Thyroidinum 8X which must be thyroid homeopathic, and then it says Glanula Supparenalis Suis 6X.

Dr. Michelle Sands: [00:50:00] Those homeopathic names are crazy.

Dr. Jay Davidson: [00:50:02] So we've got three homoeopathics but then it's got a bunch of inactive ingredients and there's a lot of things I'm like I don't even know what this is. Is there anything on the list that is concerning to you or that you've come across?

Dr. Michelle Sands: [00:50:22] If you look up phenoxyethanol, that is actually something you can look up on Environmental Working Group. It's not necessarily toxic, only toxic if you are eating it. So since this is a topical, I would just make sure that when you put it on your skin you don't have young kids that are going to be licking your skin. Obviously if you're breastfeeding and have like a baby that likes to mouth on your arms or something. That is something I wouldn't recommend at least for a half hour after you apply it. And then the other ingredient that it's not something I'm a huge fan of was sodium hydroxide. Sodium hydroxide is a product I believe just so that it increases the absorption. It helps to almost exfoliate the skin so the products can get in.

Dr. Jay Davidson: [00:51:09] Oh kind of like open up the pores?

Dr. Michelle Sands: [00:51:11] Opens up the pores. Exactly. And in the doses in the amount, I checked with the company, it's .002%. So it's super super low dose. The only issues with sodium hydroxide on your skin would be burning if it was higher dose. And sodium hydroxide in your food, you wouldn't really want that. So yeah there's only a couple things that you know they can be questionable ingredients but I understand why they're in the products so it can be an effective.

Dr. Jay Davidson: [00:51:43] Awesome. I appreciate you sharing. Well I'll have to have you on a future podcast we get some more details on how how it's all been going. I've only been on it maybe it's been four weeks already now. And like I said a couple of things I noticed but kind of wanted to give it some more time and see how it goes and just get some more feedback.

Dr. Michelle Sands: [00:52:03] And I've only been on it for about six weeks. It was really funny. When I started these four women on the trial, they were on it for about two months. They were really excited about it and then that company sold out of product. And there was no product available except for people who were already like doctors and distributors and so I was able to get product for myself but I gave it to those women because they were needing it more than I did so I actually just started getting product in for myself. So I've only been using it for about six weeks.

Yes I'd love to show you my six pack abs when we come back.

Dr. Jay Davidson: [00:52:43] As we wrap this interview up, Dr. Michelle Sands, can you give us the name of your book that we can find on Amazon? We'll make sure to post it again the podcast links as well.

Dr. Michelle Sands: [00:52:54] Yeah it's called Hormone Harmony Over 35. It's a book that really is an optimistic look at hormones and how you can actually empower yourself to not only balance your hormones, but balance your overall health.

Dr. Jay Davidson: [00:53:09] Appreciate you sharing your story about literally a doctor saying you're never going to have kids at the age of 20 and then how old were you or young were you when you had Paxton?

Dr. Michelle Sands: [00:53:19] I was 39. It took me a while for a lot of different reasons; one was that I really gave up hope at the beginning. But two I actually had to find the right man to have a baby with.

Dr. Jay Davidson: [00:53:30] If a listener wants to get in touch with you or go to your website, what's the best site to go to?

Dr. Michelle Sands: [00:53:46] So you can go to www.GlowNaturalMedicine.com or www.MetabolicMamma.com.

Dr. Jay Davidson: [00:53:57] Awesome. I appreciate your time Dr. Michelle, the hormone expert. I'll make sure to get you on there. We can talk more about I guess our experience with transdermal HGH and stuff as well and see how that goes.

Dr. Michelle Sands: [00:54:10] Very cool, thank you so much for having me.

Dr. Jay Davidson: [00:54:13] Thank you for listening. If you found this podcast valuable, feel free to share with others. The information in this podcast is for educational purposes only and is not intended to diagnose, treat, cure, or prevent any disease. Please seek the advice of a health care professional before changing your health program or embarking on a new one. To find more information and additional resources please visit us at www.DrJayDavidson.com.