

*Stephanie
Dodier*

**The Beyond The Food Show
Podcast Transcript**



Podcast Transcript

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Stephanie: This is Episode 60 of The Beyond The Food Show and today we're going to talk to Keesha Ewers about nutritional deficiency and craving.

My name is Stephanie Dodier. I'm a clinical nutritionist. At 35, I was trapped with severe anxiety, panic attacks, obesity, and my health completely collapsed. I needed a solution and the journey began.

Each episode of The Beyond The Food Show, we bring you an expert or a message to help you achieve your health goal, unlock your self-confidence and live a better life. Let's dive in.

This is Episode 60 and it's brought to you forward by stephaniedodier.com. Today, we're into Episode #9 of The Crave Curious Series: Going Beyond the Food to Heal Our Cravings. The Crave Cure Series is a special edition for the month of May 2017 where we focus only on cravings and we're going in to the root cause as to why we crave food, so 10 health experts, MDs and doctors and PhDs to explain to us 10 different ways of looking at our craving. We need to understand what goes on in our mind and our body that it can affect our craving so we can then take the next step into finding a solution. We cannot solve what we don't understand and that's the whole goal of The Crave Cure Series.

Now in the previous show, Show 59, we talked with Dr. Adam Nally about the best diet for craving and what science is teaching us and what are the various mechanisms that can impact your best possible choice, so go check it out.

Now, for you to be successful in this journey of healing your craving, the best possible place to be is in a community that will support you. It has been demonstrated that when we take changing our habits, changing anything in our life as a group and we have emotional support through this journey, we are more successful. So what I'm proposing to you is that you take the step with other women in your life. Share the show notes, share the free guide that I have created to go along with The Crave Cure Series with two, three other women in your life and take this journey together. Go back and listen to the other episodes, have a coffee date, have a kind of book club where you can exchange, share your personal experience and go through a solution together and support each other in improving your life when it comes to cravings.

The show notes can be found at stephaniedodier.com/060 and that's where you can also get the link for the video, if you want to watch it together on the screen, or the free guide, The Crave Cure Guide, which is your tag-along book in the journey of The Crave Cure Series.

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So are you ready? Let's do this with Dr. Keesha Ewers.

Dr. Keesha Ewers is an integrative medicine expert, doctor of sexology, psychotherapist and the founder and medical director of the Academy of Integrative Medicine Health Coach Certification. Dr. Keesha has been in the medical field for over 30 years, and after being diagnosed with rheumatoid arthritis, an incurable disease according to western medicine, she discovered how to reverse auto immunity using her Freedom Framework Method. Dr. Keesha is a popular speaker including from the TEDx stage and best-selling author.

Welcome to the show.

Dr. Keesha: I am so happy to be here, Stephanie. Thank you so much for inviting me.

Stephanie: I am very pleased to have you. You are an experienced medical expert and I think today you're going to bring this knowledge to us and to the women listening on how craving is more than just our motivation and our willpower. There're actually root causes to our cravings and particularly around deficiencies, and that's what we're going to focus on today on the show because there are a lot of studies showing that the average North American diet is causing significant nutritional deficiency in magnesium and vitamin C and vitamin E and also vitamin D, which could be one of the reasons why we're craving food beyond what we can call our control, and I'm very happy to be talking with you about that, Dr. Keesha.

Dr. Keesha: I'm so delighted to be talking on this subject, it's an important one.

Stephanie: Yes. And you work with women as well, right, in your practice?

Dr. Keesha: I do.

Stephanie: So how can we explain what is a nutritional deficiency to our listeners?

Dr. Keesha: Nutritional deficiencies are going to be part of, as you already said, the standard American diet. We are overfed and undernourished, and that's a really important thing for us to understand. It shows up on the scale with our weight being larger than we would like to, BMIs around the country are too high, and yet we have a plethora of food. That's not the problem. But the things that we're calling food are actually not food. If you pull it out of a package, if it has a label on it, it's really, we've gone beyond what you're pulling out of your garden. Or you're taking down in your hunt. And so we've gone really far beyond that.

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We also have the soil depletion, glutens that are going on in the world. And with that soil depletion, our food is not as nutrient dense as it used to be 50, 100, 200 years ago with our ancestors. So even when we eat a normal, healthy diet like salads and green smoothies and things like that, that is still not packing the kind of nutrient density that we used to have 50 years ago even.

Nutritional deficiency will be we're lacking the materials that our body needs to actually do the functions that we have to do like take our fats and make them into energies and new cells so that we can perform the activities in our life that are our mission on this planet. We're here for a reason, and food is supposed to be a fuel to help us go out and do that. And we're supposed to feel passion and desire for our mission and for the things that we love in our world. And I see so many women just drained of vitality, lacking that desire and that passion. And you could say that they have nutritional deficiencies on several different levels.

Stephanie: Amazing. And I love the phrase you said, "We're overfed but undernourished."

Dr. Keesha: Yes.

Stephanie: Which I think is the key of the whole show today. It's not because you're eating what you think is a perfect diet that you're actually getting what you should be getting to function optimally as you just said. And would you say that that could be causing some of our food cravings we're experiencing?

Sr. Ewers: Absolutely. We know that the little microbiome, the little bugs that live in our gut – we have over 100 trillion of these little critters. We can't see them with the naked eye, you can only see them under a microscope, and yet they take up over five pounds of your body weight. They outnumber the cells that make up the rest of your body by ten to one.

Now when you really start thinking about that, what that means is that you are not the host, they are. And if they're imbalanced – so they're a community that lives in there of all kinds of different organisms. We have several different organisms that all live in an ecosystem in our gut. When those guys are not balanced properly then we can have some bad guys that take over. Those bad guys – yeast, parasites, small intestinal bacteria, fungus – those guys like to eat sugar. And so those guys will wake up at two or three in the afternoon and say, "I'd like to eat now." And you got up in the morning and said, "I'm going to be good," and you started out your day with your good breakfast and you had a good lunch, and then around two or three in the afternoon, when they wake up and say, "We'll eat now," you're going through your pantry looking for the chocolate chips. And so they contribute a great deal to the craving that you have.

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The other piece of craving is dopamine. Dopamine is a neurotransmitter in your brain that helps you feel content. It helps you feel motivated. It helps you feel satiated. And it gives you libido. It gives you desire for your life.

Stephanie: All the fun stuff.

Dr. Keesha: Yes. If it's depleted, then you're going to look for those things outside of you. You could call it the addictive neurotransmitter. So you can become addicted to food, addicted to porn, addicted to shopping, addicted to gambling, drugs, alcohol, sugar. I myself am a recovering sugar addict. It's been years since I had sugar but I had a serious weight problem, ran marathons to keep my weight under control as I would eat three brownies the night before because my little critters were completely imbalanced. And guess what? I have a genetic problem with keeping dopamine high enough. So when I found that out through my own genetic testing, I went, "Well, no wonder I had all those problems when I was younger."

Stephanie: So gene can actually be part of our cause-effect of nutritional deficiency and craving, is that what you're saying?

Dr. Keesha: Absolutely. And guess who's in charge of genetic expression in your body?

Stephanie: The microbiome?

Dr. Keesha: The microbiome. And so oftentimes you'll read in a magazine about super foods and you have to have the antioxidants and you have to have the vitamin A and the vitamin C and the vitamin D, and that is absolutely correct. But when it comes to cravings, there's so much more than just eating blueberries and broccoli and spinach and kale. It is this and that.

Stephanie: So it's about –

Dr. Keesha: You have to have a balanced microbiome.

Stephanie: And it's about finding the root cause like the microbiome, like genetic conditions that could be getting you to be deficient in certain micro or macro nutrients. So let's dive in to this. There's obviously a link between nutritional deficiency and craving but what we need to get to is the actual root cause of those deficiencies, from what I can understand. So what could be some of those cause-effects that gives us nutritional deficiencies?

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Dr. Keesha: I talk about this, I have a book called Solving the Autoimmune Puzzle, and I talk about four corners of your puzzle – toxic overload, genetics, leaky gut and past childhood experiences that are stressful, we could say trauma if you want to. But those four things all affect how your genetics turn on or off. So I myself had rheumatoid arthritis diagnosed when I was 30. I'm 52 now. Within six months I had turned that rheumatoid arthritis off. It's in my genetics. My grandfather had it for his whole adult life, died with it. I turned mine off. Because my grandfather didn't know what we know today and that is about the microbiome and about your neurotransmitters and about what you put in your mouth actually impacts how your genetics express themselves and how your microbiome health is.

So when you look at root cause, we want to look at – okay, do we have critters living in there? So when I first got diagnosed, I did a stool test and lo and behold, I had yeast. Go figure. I had a sugar craving that was off the charts, so I was feeding them every single day. And so I would come home from a long run and I would make myself a Greek yogurt with granola on top and blueberries and some walnuts. Well, that's a lot of sugar, actually. And when you think about it in that way then you can go, "Oh, I see. Those things sound good on paper but my microbiome was imbalanced." So I actually had to do a protocol to kill them, starve them and crowd them all the same time.

Stephanie: Because what I want people to understand, if you're not familiar with microbiome or you never heard of this, it's actually living bacteria in your guts, like it's a little living person.

Dr. Keesha: Yes.

Stephanie: They need to be fed in the same way you need to be fed because they're living organisms. So when Dr. Keesha talks about feeding them, it's because their food is not leafy green, it's actually sugar.

Dr. Keesha: Right. So if you want to kill them off, the ones that are causing you trouble – and one of the ways you can tell is – do you have a coating on your tongue? Your tongue should be pink with a saliva coating. If you've got yellow or white back there, you've got a problem in your gut, that's what Ayurvedic medicine teaches us. This is what I talk about in my book.

If you've got little bumps on the sides of your arm right here, which I totally did, and then if you get a lot of skin breakouts and things like that, eczemas, psoriasis, acne, rosacea, all of these things, they're signs that you've got an imbalanced gut community in there. Your little microbes are imbalanced. Well, that's going to affect your cravings in a really dynamic way. It's really quite amazing.

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So that's – I hope I answered your question.

Stephanie: That's one of the causes, is definitely what you talked about, which is what many people will say gut health, the health of your microbiome. What's interesting in what you're saying is that there're physical signs of that on your body beyond craving. So that really reinforces the whole message that our body is actually talking to us, and one of them is craving, but another one is like how your tongue's appearance is.

Dr. Keesha: Right. And if you get frequent vaginal yeast infections or if you have an itchy anus or if you have a lot of joint pain, brain fog, difficulty concentrating and remembering, these are all fatigue, these are all signs of a yeast overgrowth in your digestive system. And we're not taught to put those together in our culture. We're taught that if you have a vaginal yeast infection, you take Monistat or Diflucan or nystatin. You don't actually take care of the whole overgrowth that's in there. And it doesn't kill those off, it just gets them to go into the lining of your gut and hang out until you eat sugar again or a glass of wine, a piece of bread, pasta. All those things that we don't think about as sugar are. It's not just the Snickers bar, it's also the fruit – three servings of fruit you eat each day because you think you're being so healthy, that's pure sugar. And your little gut microbiome actually doesn't recognize the difference between a banana and a Snickers bar.

Stephanie: No, because it's digested in the same manner, it ends up being sugar as what the body recognizes it. What you're saying is in absolute alignment with the concept of the podcast, the concept of the series which is The Crave Cure and I want people to really listen to what you're saying because what we're being taught by our doctors or what you read in the magazines is actually not what's going to help you permanently heal or remove craving from your life, as your testament with your story, right?

Dr. Keesha: Right. And there was a study that was done that looked at mice at Georgetown University, and this is a pretty famous study, people might have heard of this already, but for those that haven't, they looked at these mice, obese mice and normal-weight mice. And they started studying them from stem to stern, nose to tail and looking to see what were the differences between these mice. And they went through, went through, went through, and then got to the gut and they said, "Wow, the microbiome, the gut bugs that live in these two mice are so different." So then they thought, "Eureka!"

At this point, the pharmaceutical industry took over the study and said, "All right, get out of the way boys, we're going to take over from here." They said, "Okay, here's the idea. We're going to take the microbiome from the skinny mice and put it in the fat

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mice." Nothing happened. So then they thought, "Well, that's weird." So they took the microbiome from the fat mice and put it in the skinny mice, the skinny mice got fat.

The moral of that story is that it's not just about changing them across but actually it's much harder than taking microbes from a skinny person and putting them into an overweight person, that actually the bad guys that are in the overweight person – it's like Pac-Man – they eat the other microbes for lunch. They really cannibalize them. And this is what happens with probiotics often. If you have a really imbalanced microbiome in there, a small intestinal bacterial overgrowth, and you're taking a bunch of probiotics and eating a lot of fermented food and thinking you're doing a good job for yourself and not losing weight, not getting rid of your brain fog and feeling bloated, that means that those little guys in there are eating what you're giving them and saying, "Thank you." So you're getting really expensive poop.

Stephanie: Yeah, and you're actually not cleaning the house.

Dr. Keesha: You're not doing what you need to do. And so like with my patients, what I do is I say, "Okay, let's do a stool test and see who's living in there." That way we can tell with precision what's going on and treat it instead of saying, "Oh everyone should be on a probiotic." That's what we used to say. But now we're starting to really understand, "Oh, a probiotic is not really necessarily the thing. Different bugs do different things and the context in which it occurs in each person's individual microbiome has to be taken into account.

Stephanie: That's phenomenal.

Dr. Keesha: So you have to listen to your body. And this is what's so messed up – I was in this boat myself. I get on the scale and I'd see I'd gone up three, five, six pounds before my period even because I was a chocolate craver and I would feel shame. And then I would stay away from my scale and I would say, "Okay, that just stresses me out," and then I would eat. And then my pants will get tighter, so nothing was working. I would get bloated and by noon I'd have to undo the top button and undo the zipper and I thought everyone had this problem. Well, it turns out that's not normal and that that bloating is actually, if you think about your intestines – this sounds gross but if you take them all out and you open them up, they actually take up an entire doubles tennis court and all of them are wound up in this little tiny space right here.

So if you think about how you make bread, you have a bowl, you put yeast in it, you put warm water and you put sugar, what happens to that yeast, it blooms, it makes the bread rise, just like that. Well that's exactly what's going on down here and there's nowhere else for it to go but out.

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Stephanie: That's brilliant explanation. I've heard many people explaining that but you won the cup on this one. Great explanation.

Dr. Keesha: So when you bloat, it means you've just fed somebody that doesn't belong in there something yummy to them and gas is produced. If you've ever made bread – I used to make cinnamon rolls before I understood all these and now I don't eat that kind of thing, but I would take the raw dough and I would munch on it while I was rolling them out and putting everything on there. And I would feel so uncomfortable within about ten minutes. You would be burping up yeasty kind of stuff. Because what's going on? It's growing inside of you.

And so when you think about that, that bloating is always going to be you're feeding these guys something they love. And that means someone in there is not serving you and you will never lose your weight and you will never get rid of your cravings as long as they're dominant.

Stephanie: That's amazing. So you mentioned your framework in your book, right? Your book that you just released.

Dr. Keesha: Freedom Framework.

Stephanie: What is the other pillar of that framework? Because I think that can teach us a fair bit about cravings because I believe the other one will have impact on cravings if I'm correct.

Dr. Keesha: Yes. Those four corners of the puzzle – I would say everybody's imbalanced as a puzzle that's unique to them and when we put together puzzle we want to get the outside pieces, which is the framework, the Freedom Framework, that's uncovering root cause. It's connecting the dots between what you're eating and what's happening in your body, what you're thinking and what's happening in your body. It's confronting your lab work like really being willing to look at it and say, "Oh, that's just data." If I look at my scale and I've gone that five points, not to put an emotion to that, it's just feedback. My body is saying, "Oh, you just did something that I'm not happy with," and not putting shame and guilt on it. And then the last one is creating the life that you want with intention instead of what I call the factory default settings from your childhood.

Those are the four sides. And then the corners are looking at your genetics, toxic overload, leaky gut, healing that, and past childhood trauma. That's the one I call the missing piece of the puzzle when it comes to weight and cravings because there was a study that was done between 1995 and 1997 by the Centers for Disease Control and

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Kaiser Permanente called the ACEs Study, Adverse Childhood Experiences Study, and the way it started was Kaiser Permanente had a weight loss program that was really successful. People were losing weight, doing a really good job, and then a lot of women were dropping out before they finished. So they were really doing well and then about midway they would just stop and not show up anymore. So Dr. Felitti, who ran the program, started going, "This is a head scratcher. What's going on? Why are these women stopping when they're clearly doing such a good job and they were still sabotaging?" So he started interviewing them. And guess what? Most of them had a history of sexual abuse. And that's a really important dynamic when you start thinking about weight and craving because the emotional component of craving sweets or salty or savory or something like that, craving something outside of you is because your wise mind from childhood knew that that thing was helping me feel grounded. It's a strategy you carried into adulthood that's not working, but the wise mind of a child is not fully developed yet.

And so when you've had a bad experience in childhood – it doesn't have to be sexual abuse. I was sexually abused when I was ten by the vice principal in my elementary school. It's why I do this now because I got that that was connected to my eating disorder with sugar cravings and my rheumatoid arthritis. And once I really got willing to take a look at how I metabolized my thoughts and my beliefs and my strategies for getting my needs met and that they weren't serving me, that changed everything.

How you digest your emotions and your experiences and your beliefs is just as important as how you digest your food. Your nutritional deficiency shows up here too. If you don't feel worthy and deserving of love, if you don't feel sexy because your weight is different than you want it to be, if you feel like you have to be perfect in order to be loved or you care-give for others and you leave yourself off of that task-list of things to do, these are undigested problems from childhood that you haven't really done something with yet. And that's causing your adult reality, so important. This is the freedom right here.

Stephanie: And that adult reality is what causes us to make certain choices, correct?

Dr. Keesha: Right. But you have to know that the bus driver is probably about four years old.

Stephanie: Exactly.

Dr. Keesha: You really want to give your eight-year-old kid the keys to your bus? I mean, really, that causes struggle bus time. That means that you've got the struggle bus instead of the bus that's going along and touring and looking at life and going, "I love this." So you've got to

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think about who's in your driver seat, and that will be an upset child when you revert back to reactive eating.

Stephanie: Reactive eating – because of the child that's driving the bus because of your mindset being the child, you're thinking like a child, you're making choices like that sad child back at eight years old, am I correct?

Dr. Keesha: Yes, so let me give you an example. When I had my rheumatoid arthritis – I was diagnosed at age 30 – I always describe this as life, like the Wile E. Coyote and the Road Runner cartoon, dropping an anvil on my head from the top of a cliff. And I can even hear it. And then all of a sudden, I am just splatted flat. I go from being called the energizer bunny, raising four kids, doing a lot in my life to literally flattened. I couldn't get out of bed, I had these swollen joints, I gained ten pounds in about five days of inflammation – just flattened.

I went in, obviously, to get checked and see what was going on. I was diagnosed with rheumatoid arthritis. Well, I went to a rheumatologist where I was sent and the rheumatologist said, "Do you have a family history of this?" And I said, "Yeah, I think my grandfather had it," because he did. And she said, "Oh, well then it's genetic. So here's your medication list. If you get worse, come back."

My medications were Methotrexate, which is for cancer, and non-steroidal anti-inflammatory drugs. Same thing we're giving people today, 23 years later, same exact medications. So I went home, looked up the side effects and said, "You know what? I'm raising four kids right now. I love my life. I don't want to have these side effects. They're worse probably than anything else." So I started doing research to see what else I could do and I discovered yoga, which today is very common but 23 years ago was not. So this is what I said to my running partner, this is so how conservative I was, "I've never really hung out with people that chant. I'm a little nervous." That's exactly what I said.

Stephanie: Scary, woo-woo people, right?

Dr. Keesha: I know. So I went to my first yoga class and my yoga teacher said this word that I never forgot, "Ayurveda." And so I went home, again, looked it up in the Internet – luckily I'm a very curious person and found out that Ayurveda says we're not all the same person. Oh my gosh, Stephanie, this was revolutionary to me. I was so conservative and so steeped in emergency Western medicine, which is what I did, that if an herb had bitten me in the butt, I wouldn't have recognized it. I would have been like, "Get off of there." I just didn't know anything about anything that I do today.

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And so I started really understanding, "Wow, this is amazing, this makes so much sense. Of course we don't all eat the same, sleep the same, think the same. We have different unique body types. It's why the food pyramid is not working for us. And so all that stuff we learn in elementary school doesn't work." So I thought, "Oh." So I started treating myself according to my unique body type and then I started learning how to meditate and get underneath these emotions. And when I sat in meditation one day, I looked at the word autoimmune, and I realized that meant I was killing myself. I was committing suicide, and I thought, "Why am I doing this? I have a great life. I love it. What's going on? When did I first want to kill myself?" So I went back in this meditation and I found this 10-year-old little girl who is being sexually abused in elementary school by her vice principal. She didn't feel safe. So I had basically told myself at the age of ten that this isn't really a safe place I'd like to check out. Well, guess how long it takes to develop an autoimmune disease in an adult? About 20 years.

So my listeners right now, the people that we're talking to are cooking autoimmune diseases. Eighty percent of autoimmune diseases are diagnosed in women. Anything with inflammation, extra weight, all these things are all precursors to us, our immune system starting to turn on us. So this has become my mission, to really let women know that it takes a long time to get a full-blown diagnosis but if you have weight issues, if you're tired, if you have inflammation, joint pain, you need to really start being curious and asking why and starting to get rid of it. Really look underneath to the root cause so that you don't develop a full-blown diagnosis and don't make the universe drop an anvil on your head like I did. I always say I'm the hardest patient that ever lived. I'm the hardest nut to crack. Really, honestly I am.

Stephanie: And I think that's why we are in that field is because of our – I know for you it's clear that's why you're here today, and it's the same thing for me. My own health journey got me here today and I had to end up in the hospital for me to – there has to be another solution to this story than getting medication and getting in a hospital. And that's what we're trying to do for you, listeners, is trying to prevent this by getting this message.

Dr. Keesha: In my book Solving the Autoimmune Puzzle, I call it the Misery to Motivation Ratio. And I wish it weren't human nature but I am a living example of it. You have to get that miserable to be motivated to make the changes. And I'm just saying, please don't get that miserable. Start listening when it's really early, so these quiet, little sounds your body is making, like acne, a tongue that has a coating on it, red face or joint issues. These things are all signals from your body. Don't take an Advil and cover up your headache. Start asking why. "What's happening right now for you. body? What do you need from me right now?" Instead of saying, "Oh, I hurt. Take this." Cramps, menstrual cramps, all of it is just feedback from your body.

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Stephanie: And I will add to this. In particular for people that are challenged with emotional eating or craving, we often get into a vicious cycle of beating ourselves up because we can't control our cravings, which then exasperate the whole cycle and make you eat more, make you feel even more depressed and get you more sick depending on your underlying health condition. So really listening to that is critical and listening to what could be causing it. And one of those things, as we went deep dive into it, is nutritional deficiency. And in some way we could say that autoimmune disease is in part triggered by nutritional deficiencies. Could we say that?

Dr. Keesha: Oh my gosh, yes, whether it's emotional nutritional deficiency, mental nutritional deficiency or physical nutritional deficiencies, absolutely. And that's what's so important to understand is, okay, you're not actually deficient – okay, let's say you have heartburn. You don't get heartburn because you're deficient in Prilosec. You don't get depression because you're deficient in Prozac. You don't get cholesterol build-up because you're deficient in a statin.

Stephanie: A deficiency.

Dr. Keesha: That's not accurate. The deficiency is actually nutritional, it's not medication. And so what we have to do is instead of matching symptom to drug, which causes more nutritional deficiencies, we've got to figure out what's going on.

If you take a statin drug, you will become deficient in a coenzyme that's necessary for so many functions in your body called CoQ10. You must know that when you take a medication, Prozac for depression, what happens is you're affecting serotonin which then affects dopamine. Serotonin and dopamine share the same synapse so when you take something that increases your serotonin re-uptake inhibition, then actually your dopamine will go down.

Stephanie: Yeah, because it doesn't have anywhere to connect anymore.

Dr. Keesha: It doesn't have anywhere to connect. You're affecting it in a bad way and so you become deficient in dopamine, which actually makes you crave more food because dopamine is necessary for you not to crave. So, yes, when you walk in to see your doctor and you say, "I'm having a hard time because of the weather," or "I'm having a hard time because I just had a baby," or "I'm having a hard time because my husband's out of job," or "I just lost my job," and they say, "Well, then let's give you this anti-depressant," please know that even though your serotonin will be impacted in a way that could make you feel better in the short term, in the long term you are likely to gain weight, your sexual desire will go into the toilet because the things that dopamine impacts will now be affected poorly. And so I get – I'm sure you do too, my patients come in on these

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medications saying, "Please get me off these meds, I feel awful," and we do. But anyone listening, you do not ever take yourself off these medications, please.

Stephanie: That's not what we said.

Dr. Keesha: Don't take yourself off. Don't listen to my voice and say, "Oh, I've got to take this off." No. You have to get to the root cause and then bridge yourself off with the help of a medical person that knows what they're doing. Otherwise, you won't succeed and you'll say, "Well, that didn't work."

Stephanie: And the other thing people need to understand, and I often will do that, is give people the supplement to bridge them while we're taking off the medications. For an example, you can easily take a CoQ10 supplement while you're working on the root cause of your high cholesterol. So I'll link to a document that I have that shows people the potential nutritional deficiency based on a medication to help you identify if you need supplementation based on your medication.

Dr. Keesha: Yeah, so important. And the other piece about that is that cholesterol in women often goes up because they have a hormone imbalance, because cholesterol is the raw material your body needs to make hormones. And so your body will say, "We need more cholesterol down here because you have a hormone imbalance," and so your cholesterol goes up. Now you take a statin, you poison the enzyme that makes your hormones. So what you're doing is you're creating an automatic hormone imbalance. Well, when that happens, guess what? Your estrogen is going to go up, you become estrogen dominant, you'll crave sugar, you'll gain weight, you'll be weepy, you'll be depressed. And guess what's going to happen next? You're going to buy yourself a prescription for Prozac.

That's how it's going to run. That's how it we roll in Western medicine. We keep chasing the side effects and the nutritional deficiencies with another drug. And so it's really important to understand that there's a reason your hormones went out of whack in the first place.

This is what I teach my students in the Academy for Integrative Medicine Health Coach Certification Program, is to how to do this for the people, how to do it for yourself, how to run that testing, how to figure out what's going on at the root and then how to do something about it. And I just think it's so empowering to know that your body, its messages should not be ignored and you can actually figure out what it's trying to tell you.

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Stephanie: Absolutely. And that's why I'm so passionate about cravings because I see them as the gateway to us actually discovering the root cause because they're associated with what we're most passionate about as women, which is weight, and we blame our cravings for our weight and if we can only look underneath.

Now before we run out of time, I want to talk about stress because I know stress to be a root cause of autoimmune conditions but also linked to a lot of nutritional deficiencies.

Dr. Keesha: Absolutely. Let me take you through the thing I always do for my patients. Stress is actually not a bad guy. Everyone always says that stress is the root cause of everything. The World Health Organization now says that 90% of diseases are caused by stress. That's phenomenal that they recognize that but it isn't true. It's not that stress is the problem, it's how you perceived your stress. Nobody can get through this life without stress. It's ridiculous to say to somebody, "Reduce your stress" You have a woman with a special needs child, you have a woman that's taking care of her parents, you have a woman going through a divorce but just got a raise at work and now is doing the job of five people. We are in a place as females in this generation where we are bringing home the bacon, frying it up in a pan and trying to look hot at the same time. That is burning us out. And our perception is put on us by ourselves, not society. This does not come from the Cosmopolitan magazine covers in the grocery store's aisle. This comes from inside of you. And so your perception of your stress is the problem, not your stress.

When you perceive something as overwhelming – that's the word I get in my office all the time, "I'm so overwhelmed." When you perceive yourself as overwhelmed, what happens is the neurotransmitters that are responsible for you fleeing or fighting the lion that you think is on your tail and about to eat you, will say to your adrenal glands, "We've got to get out of danger. Cortisol, send it out." So cortisol goes out into the body. That cortisol breaks down the gut lining in your intestinal tract. When that lining falls apart, now food particles that aren't quite digested could leak through the immune system, seize those sitting out there. Even if it's broccoli, cauliflower, coconut oil, blueberries, whatever you're eating a lot of, your immune system starts to attack it and create antibodies against you, against your food.

Now you're going to gain weight because anytime there's inflammation and your immune system turning in that direction, it's going to create extra water weight. People always do this where they go, "Wow, I just lost 20 pounds," but it's just water weight. And I go, "That water didn't belong outside those cells. Don't say it's just water weight. You just like wrung out the sponge in a way that was necessary. You're not supposed to have sock lines on your ankles, you're not supposed to not be able to put your rings on. Water weight is a thing, you don't want to discount it. You're not supposed to have it."

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That's what's causing all that puffiness. And like I said, the rings not being able to go on, the bloating, that's all inflammatory. And that's from perceiving your stress as overwhelming. So when you read my book *Solving Auto Immune Puzzle* – it doesn't matter if you don't have an autoimmune disease, just read that because it goes through how to stop doing that.

Stephanie: The whole pathway to prevent that.

Dr. Keesha: Yeah. Get your neurotransmitter signaling properly. "Oh, I'm not in danger. I actually have a full calendar and thank God because it means I'm doing what I love. It means that I'm actually" – think about it. I had four kids and one of the things that used to drive me bonkers is when my mirrors would get all fingerprinty and slobbery all over them. And one day I had the bottle of Windex and the rag in my hand for like the third time in one day and I was squirting it, rubbing it and then I went, "Oh my gosh, what am I doing?" I'm looking at my children and I'm thinking, "Oh my gosh, I'm running around trying to keep this house perfect with toddlers and it's stressing me out. I'm feeling overwhelmed. That's ridiculous." This happens once a week and once a week only. And then I realized, as I was getting irritated with my husband for leaving his coat on the dining room table everyday and the shoes right in front of the door – I would just get so irritated by that – I thought, "The minute that that coat is gone, he's dead." Okay, that means that I have this wonderful companion and partnership in my life, that coat is a signal of that.

Stephanie: Perfection – we could do an entire summit on that, an entire series of episodes.

Dr. Keesha: It's the enemy of contentment.

Stephanie: Yes, and it's a disease that many of us women have for many other reasons, but perfection is the root of stress.

Dr. Keesha: Including the perfection of what the body looks like.

Stephanie: Yes.

Dr. Keesha: The body is going to age and die, that is going to happen. You are going to age and die, fighting it is ridiculous. No one gets out of this alive. And so own it, celebrate it. When you get a new wrinkle, think about what that wrinkle represents – a new level of wisdom. When I think about how stupid I was at 20 years old, I go, "Oh my gosh, I would never be 20 again."

Stephanie: Yes, me neither.

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Dr. Keesha: I actually feel like as I'm aging I look better because inside I'm starting to shine from inside with more wisdom.

Stephanie: And you appreciate every moment where we are now as opposed to at 20 where we're chasing moments.

Dr. Keesha: Right. And when you meet somebody that's a wise woman elder – and then not all of them are wise women elders, some of them are just old ladies. When you meet someone that's a wise woman elder, the kindness and the compassion that shines from her face and the ready smile and those eyes and that smile are in the middle of a sea of wrinkles and you don't notice that. What do you see? You see this beauty. So become that woman, become her. You don't look at her body and say, "Gosh, she doesn't look like the cover of a Cosmo magazine." You don't do that and yet you expect that of yourself, which keeps you trapped from becoming the wise woman elder.

As long as you're striving for perfection in your body, you will never become that elder. And the younger generation needs you to become the elder. We have to teach our younger women this. It's so important.

Stephanie: Absolutely. In French we say we have to pass the baton to the other generation.

Dr. Keesha: Yes, absolutely.

Stephanie: Well, what you've talked about is so important. I think it should be a foundation course that all of us women have. Unfortunately, it is not given, so thank you very much for sharing that to us today.

Dr. Keesha: It's definitely passion of mine, you can tell.

Stephanie: Before we close, I want to know – what are three tips, three action points you would give women that want to start preventing and healing their cravings that could be due to nutritional deficiency, emotional deficiency? What are the three things that they could do to start?

Dr. Keesha: Okay. The first one is to watch your language. And I don't care if you're saying fuck, bullshit, asshole, damn, hell. I don't care about these words. What I'm talking about is your language to yourself, that you speak to yourself in a compassionate, generous, loving way that does not let yourself off the hook. You take responsibility, but it's in a generous way, the way you would to your child. That you actually think about how you parent your child and you do that for yourself. You give yourself that gift. Watch your

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inner language. It's so important because it impacts what your next behavior will be. So that's number one.

Number two is to understand that on your fork or in your cup there is nothing that is either not inflammation-producing or it is inflammation-producing. So in other words, there's no gray area, either what you're eating and drinking causes you inflammation or it doesn't. And you can't say, "Well, moderation" – you can't do that because if you've got that yeast to the point where it's almost gone and then you moderate with another glass of wine, there it goes, bloomed right back up.

So you just have to take responsibility for your choices. And you can't blame, "Oh, it's my birthday," or "I'm on vacation," or "I went to a friend's house for dinner and I couldn't say that I can't have that." That's ridiculous. You take responsibility whether you're on an airplane, in an airport, on a conference, in a hotel, for what you put in your mouth. And it either caused inflammation or it doesn't and there's nobody to blame except for you. And don't blame yourself, just take responsibility. Okay, so that's number two.

And then number three, I would say really get off the scale. Get off the damn scale and just use your body's feedback. Start to get in a collaborative relationship rather than a combative relationship.

Here's what I hear from my patients, "I've been fighting with my weight my whole life. I've been struggling with my weight my whole life." That's the language I'm talking about. If you're in a fight with your body, guess who loses? Both of you. There's a lose-lose situation, and that's what autoimmune disease is, it's you attacking you. And so you have to get in a loving, collaborative alliance with your body. If your clothes start getting tight, take it as feedback, "Oh, my clothes are getting tight, I got to start looking at what I'm doing here." It has no shame, no blame, no guilt, no sadness, no anger, no hurt, no frustration, no annoyance until you put it there. It's just feedback. And then you take an action based on the feedback instead of ignoring it, putting your head in the sand, eating to make yourself not feel the pain.

Stephanie: Amazing. You're a brilliant teacher.

Now, how can people find out more about you? Tell us about where we can find you because I know there're going to be a lot of people want to get more from you.

Dr. Keesha: Thank you. Drkeesha.com, D-R-K-E-E-S-H-A.com, and if you have a history of abuse in your past, there's a program on my website called You Unbroken and it takes you through building skills to do those three things that I just talked about if they don't come easily for you. And don't think that every skill that you should have as an adult should

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have been trained in you when you were a child because you're supposed to learn your whole life. So you don't have that skill? Learn it. Get super excited about it. Roll up your sleeves and say, "Okay, I want to learn a new skill," and it will help your brain develop in such a way that you can move beyond whatever is holding you back today.

Stephanie: That's amazing. And the health coaching course you're talking about, that's for general population to learn about health coaching, am I correct?

Dr. Keesha: Yes. In fact my best students are ones that don't have any medical background because there's nothing to unlearn. So some of my best students are people that were hair stylists or in the corporate world or didn't have anything in their background that had to do with medicine. Then I train nurses, I train doctors, I train nutritionists and registered dietitians and massage therapists and yoga teachers and meditation teachers also, and it's for anybody who really wants to do what I just talked about in the last bit with you.

Stephanie: And that's interesting because I'm starting to get a lot of listeners and women wanting to take the next step after beginning their own journey, so a program like this could be a great place for them to start.

Dr. Keesha: Yes. That's why I built it because I had patients that had binders full of information. It was tabbed, they were highlighted, they were so much smarter than the doctors and I thought, "You know what? You need to be doing this for other people. You've learned so much about you now. Everyone's coming to you anyway and asking your advice, you might as well make it a career for yourself." And so that's why I started the program is because when you are an advocate for your own health or your child's health or someone you love and you learn that much, put it to work.

Stephanie: Yeah. And that becomes your purpose and that's when you feel fulfilled and that's when you become ultimately – optimal health is when you actually are happy and living your purpose, so that's a brilliant program. Thank you for doing that.

Well, thank you. We're going to wrap this up and I'm going to put all the information where you can reach Dr. Keesha in the show notes. And I thank you very much for your time today and we're going to have you again to talk about trauma at some point. I think that could be very interesting.

Dr. Keesha: Thank you.

Stephanie: There you have it. I hope you enjoyed it and I'm so glad you stuck around till the end with me. If you did learn something today with Dr. Ewers or you enjoyed the show, please send me a message, put in a review in iTunes. You can go to **Stephanie Dodier CNP 2016 | www.stephaniedodier.com | 20**

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stephaniedodier.com/review, let me know what you thought of the show and share with other people. Share with people on social media, either on Instagram or Facebook and tag me or Dr. Ewers and tell us what you learned or ask us more questions about the content of the show. We want to be there to support your journey.

Now we've got some great stuff coming up. We've got Dr. Melissa McCreery in the next show, Show 61 to talk about hidden hungers, desire and cravings. What do these all have to do with cravings? You will be surprised what you will learn from Dr. McCreery.

Again, thank you very much that you were here with me for this episode and I was able to share this experience with you, and I'll see you in the next show.

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