

WEBVTT

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00:00:02.300 --> 00:00:21.300

Dr. Ritamarie Loscalzo: Hello, everybody, and welcome to our Ind. Office hours for May 2025. We are here to support you in whatever way you need support. Answer your questions, celebrate your successes, help you with your challenges, and just generally talk shop.

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00:00:21.420 --> 00:00:41.469

Dr. Ritamarie Loscalzo: So before we get started a couple of things, one is, I'm doing a webinar tomorrow, and I think you guys got announcement of it. But on protein, the protein confusion, there's so many people who are confused about protein. There's so many people talking about protein like, you know, you just have to eat it

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00:00:41.680 --> 00:00:59.110

Dr. Ritamarie Loscalzo: constantly and putting fear into people. So I'm doing a webinar to address all that tomorrow. The goal of the webinar is to get people excited about customization, that there's no one size fits all and then invite them to come and spend 3 days with us at the wellness, weekend

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00:00:59.110 --> 00:01:22.379

Dr. Ritamarie Loscalzo: wellness, reset weekend in the month of June. So if you have any folks that you want to share that with, we sent out links. We set you guys all up as affiliates. So if you do refer people in using your link, you'll get paid. Isn't that nice? So I encourage you to do that. We need to spread the word. We need to get out there that

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00:01:22.600 --> 00:01:40.469

Dr. Ritamarie Loscalzo: there is a difference between influencers and experts, influencers and people who are knowledgeable about helping people to find the right thing for their body versus hey? Everybody needs to eat 60 grams of protein for breakfast, lunch, and dinner. That's it. The webinar is us

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00:01:40.630 --> 00:01:44.280

Dr. Ritamarie Loscalzo: 7 o'clock or 6 o'clock Central. Let me look it up real quick.

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00:01:44.400 --> 00:01:55.803

Dr. Ritamarie Loscalzo: I can't remember. If it's 6 or 7, I think it's 6 central. I can't find my thing. Welcome to chrome. It just exited me. Where is that. Okay, there it is.

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00:01:57.500 --> 00:02:03.070

Dr. Ritamarie Loscalzo: it's at 6 pm. Central time. So 4 pm. Pacific time. If you're on the Pacific coast.

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00:02:03.240 --> 00:02:06.920

Dr. Ritamarie Loscalzo: all right. So what else can I share?

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00:02:08.479 --> 00:02:10.229

Dr. Ritamarie Loscalzo: I think that's it. For now.

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00:02:10.600 --> 00:02:15.880

Dr. Ritamarie Loscalzo: what are you guys up to share? What's what's new? What's exciting? And what do you need help with.

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00:02:27.980 --> 00:02:29.690

Dr. Ritamarie Loscalzo: hey, Masa? I see you keep talking.

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00:02:29.690 --> 00:02:31.800

Mahsa Javid: Hi, Dr. Rita! Marie! How are you?

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00:02:31.800 --> 00:02:33.609

Dr. Ritamarie Loscalzo: I'm good. How are you?

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00:02:33.610 --> 00:02:40.679

Mahsa Javid: Great. Thank you so much. I actually have a Dutch test that I would love to go through with you.

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00:02:41.040 --> 00:02:41.710

Dr. Ritamarie Loscalzo: Sure.

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00:02:42.410 --> 00:02:46.230

Mahsa Javid: The only thing is I don't want the name to show, so I'm trying to figure out how to

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00:02:47.390 --> 00:02:49.040

Mahsa Javid: get that blocked.

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00:02:50.150 --> 00:02:54.639

Dr. Ritamarie Loscalzo: Well, that's always something you need to prepare in advance to take the name off.

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00:02:54.640 --> 00:02:55.190

Mahsa Javid: Okay.

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00:02:55.190 --> 00:02:58.369

Dr. Ritamarie Loscalzo: So typically you could either. If you have papers.

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00:02:58.370 --> 00:02:58.899

Mahsa Javid: Take questions.

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00:02:58.900 --> 00:03:13.510

Dr. Ritamarie Loscalzo: Write out and then scan it in, or if you have it as a Pdf. What I would typically do is I'd go in with my screen shot software. And I would just take a screenshot of the parts that don't have the name on it. So you have the the basic thing.

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00:03:13.630 --> 00:03:14.479

Dr. Ritamarie Loscalzo: so you can see that.

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00:03:14.480 --> 00:03:15.140

Mahsa Javid: Hi.

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00:03:15.140 --> 00:03:18.450

Dr. Ritamarie Loscalzo: You know I don't wanna compromised your.

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00:03:19.290 --> 00:03:24.479

Mahsa Javid: Yes, let me see if I can do that. In the meantime, if someone else has a question, and I'll be back.

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00:03:24.690 --> 00:03:26.170

Dr. Ritamarie Loscalzo: Okay. Great.

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00:03:26.480 --> 00:03:27.619

Mahsa Javid: Thank you. Great.

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00:03:28.050 --> 00:03:32.039

Dr. Ritamarie Loscalzo: Who else, Rob? Who do I see here, let's see.

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00:03:32.800 --> 00:03:40.410

Dr. Ritamarie Loscalzo: Let me make my thing bigger, so I can see everybody's name. Masa, Lisa, Catherine, Deborah, Rob.

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00:03:40.620 --> 00:03:42.880

Dr. Ritamarie Loscalzo: and nobody has their cameras on

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00:03:43.270 --> 00:03:47.879

Dr. Ritamarie Loscalzo: except for Rob and Masha. Masa. Do I say your name right? It's Masa.

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00:03:49.320 --> 00:03:50.910

Dr. Ritamarie Loscalzo: Okay, great great.

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00:03:50.910 --> 00:03:53.390

Mahsa Javid: Got it. Yeah, Masa, like Casa. But Masa.

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00:03:53.744 --> 00:03:57.639

Dr. Ritamarie Loscalzo: But mas, yeah, or like corn, like, Masa is corn. Yeah.

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00:03:57.640 --> 00:03:58.310

Mahsa Javid: Exactly.

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00:03:58.840 --> 00:04:04.250

Mahsa Javid: I think I figured it out. But I just wanna make sure it's off of everything, and I'll I'll be back.

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00:04:05.090 --> 00:04:07.770

Dr. Ritamarie Loscalzo: Okay, Deborah, what you got.

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00:04:17.166 --> 00:04:26.950

Deborah Nelson: I was trying to be incognito, because I'm still. I'm getting ready for my sessions and stuff like that. You know what my biggest question is, there's so much information. How does

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00:04:27.310 --> 00:04:34.129

Deborah Nelson: who has mastered the ability to organize the information for their practice?

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00:04:34.410 --> 00:04:35.290

Dr. Ritamarie Loscalzo: Oh, boy!

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00:04:35.730 --> 00:04:37.780

Deborah Nelson: That's the hardest.

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00:04:38.510 --> 00:04:39.010

Deborah Nelson: Yeah.

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00:04:39.010 --> 00:05:05.410

Dr. Ritamarie Loscalzo: It's the hardest thing I mean reading labs and understanding biochemistry to me. That's the easy part. But keeping records. I was just talking to somebody this morning who said, she's like so far behind in her record keeping, you know. You drop little dots and notes down, and then try to keep everything organized. So tell me specifically what you're trying to organize, and I can give you some of the things I've learned over the years. I mean, I'm way more organized now than I ever was, but.

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00:05:08.406 --> 00:05:10.639

Deborah Nelson: Oh, goodness! Let's see.

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00:05:10.920 --> 00:05:18.860

Deborah Nelson: Well, it's really everything. It's I feel like I'm just sort of in a in a disorganized

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00:05:20.940 --> 00:05:23.919

Deborah Nelson: creative. I will just say creative chaos.

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00:05:24.357 --> 00:05:35.289

Dr. Ritamarie Loscalzo: Is it the notes related to specific clients that you're keeping track of? Or where are your technical reference materials, or all of the above.

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00:05:35.290 --> 00:05:38.979

Deborah Nelson: Can we start with the technical reference materials? Let's start there.

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00:05:39.320 --> 00:05:42.390

Deborah Nelson: And in accessing things, because, you know, I've

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00:05:42.640 --> 00:05:46.020

Deborah Nelson: downloaded the information as I'm studying it right.

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00:05:47.710 --> 00:05:53.599

Deborah Nelson: And it's it's really being able to

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00:05:54.700 --> 00:06:04.140

Deborah Nelson: access things. So in a manner that's really with ease and with a certain amount of quickness.

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00:06:04.730 --> 00:06:06.930

Deborah Nelson: you know, because I know.

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00:06:06.930 --> 00:06:10.478

Dr. Ritamarie Loscalzo: So files and folders are helpful.

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00:06:11.650 --> 00:06:34.399

Dr. Ritamarie Loscalzo: one thing that would be helpful and I'm looking into. There's this, there's this softwares that you can put all your stuff into, and then it will do like an AI type intelligence. But in lieu of that I would say, when you're downloading things, how do you think like, if you're going to reference things, you have to think in terms of how you're going to need it like.

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00:06:34.630 --> 00:06:45.069

Dr. Ritamarie Loscalzo: what would you be your process be all of a sudden you're saying, oh, I need a whatever. I have a reference material for it. How am I going to find it. So what? What's your thought process? There.

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00:06:45.620 --> 00:06:50.070

Deborah Nelson: Well, that's interesting, because I've been. I've been organizing everything by the modules.

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00:06:50.310 --> 00:06:50.900

Dr. Ritamarie Loscalzo: Oh!

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00:06:50.900 --> 00:06:55.680

Deborah Nelson: As as you've set them up. And so now I need to take that. And I need to

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00:06:56.600 --> 00:06:57.619

Deborah Nelson: like you're saying.

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00:06:57.620 --> 00:07:19.582

Dr. Ritamarie Loscalzo: Like, organize it by. Okay. So there are ways. There are a few resources that we've given you on the site in terms of, like our done for you materials we went and organized them by. They're organized by module, but they're also organized by topic, and you know, modules are roughly related to topic, but not necessarily right. So you have to think in terms of

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00:07:20.210 --> 00:07:29.169

Dr. Ritamarie Loscalzo: Like all the things related to gluten free diets and have everything. But the problem becomes that there's overlap

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00:07:29.600 --> 00:07:39.980

Dr. Ritamarie Loscalzo: right? So there may be a resource that covers 5 different things, and you want to be able to find it. So really, databases is the way to go

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00:07:40.500 --> 00:07:49.080

Dr. Ritamarie Loscalzo: now. Not all of us are trained in creating databases. Maybe Rob knows what to do to create a database, but most people don't.

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00:07:49.180 --> 00:07:54.660

Dr. Ritamarie Loscalzo: There is a software that somebody in my company brought in called Coda.

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00:07:55.240 --> 00:07:59.200

Dr. Ritamarie Loscalzo: and it allows you to do things like creating spreadsheets

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00:07:59.290 --> 00:08:25.430

Dr. Ritamarie Loscalzo: almost like spreadsheets, but you're really creating it as a database. So then you can print things out and look things up. I still, I'm not sure they have it organized real well, because I still have trouble finding things. So think about me. I do tons and dozens and dozens of webinars and modules on this, and courses, and 3 day events, and all that. And I want to be able to go back and say, I want to find all the things where I talked about bone health

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00:08:26.180 --> 00:08:33.490

Dr. Ritamarie Loscalzo: like. So I sit on my computer typing searches into my Powerpoint and into my word.

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00:08:33.640 --> 00:08:48.029

Dr. Ritamarie Loscalzo: right? So it's thinking in terms of, I think the 1st thing is thinking in terms of how you'd want to access things. But the problem comes in without a database or something like that is that things can be sorted into many different.

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00:08:48.030 --> 00:08:49.100

Mahsa Javid: Get my code.

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00:08:49.680 --> 00:09:08.069

Dr. Ritamarie Loscalzo: Right. It's like at home if you're doing it. The old fashioned way we had papers you'd go. Oh, wait! Which drawer did I put that in? Did I put that into the Gluten Free diet thing, or did

I put that into anti-inflammatory? It could go into many places with paper. You have to make a choice or make duplicate copies of it

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00:09:08.250 --> 00:09:28.239

Dr. Ritamarie Loscalzo: online, you can put them in as like a whole collection, and then you categorize them. Now do I have a system for that? No, but look at this thing called coda. We have a free version of it, and see if that makes it easier for you to put things in and then get them out. You want to be able to easily get things out. That's the thing.

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00:09:29.760 --> 00:09:41.100

Deborah Nelson: Exactly, precisely. And so what I was starting to do is I was finding myself doing the duplicates like. If this applies here, I would put it there, there and there.

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00:09:41.100 --> 00:09:42.190

Dr. Ritamarie Loscalzo: Yep, yep.

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00:09:42.410 --> 00:09:53.210

Dr. Ritamarie Loscalzo: yeah. And quickly you run out of space. And it's it's inefficient. And yeah, it's nice for it to be in one place, but it's tagged with a lot of different access points.

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00:09:53.810 --> 00:09:58.309

Deborah Nelson: Right. And if you ever want to update it, it's in multiple places.

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00:09:58.310 --> 00:10:00.799

Dr. Ritamarie Loscalzo: Right? That becomes a disaster. Yeah.

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00:10:00.800 --> 00:10:01.910

Deborah Nelson: Yeah, it's.

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00:10:02.400 --> 00:10:06.530

Dr. Ritamarie Loscalzo: Yeah, I wish I had an easy answer for you, but I don't.

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00:10:07.670 --> 00:10:07.944

Dr. Ritamarie Loscalzo: Okay.

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00:10:08.360 --> 00:10:34.499

Dr. Ritamarie Loscalzo: Still, working on it when I figure it out. The one of the reasons that I create, and I always have. Ever since I was in college. I create sheets like you've seen my different spreadsheets where it organizes things in different ways. So I may have a spreadsheet of all of foods.



For example, I took the Content, and it's on. You guys have it somewhere on the site I took the Content from like the nutrients modules.

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00:10:34.680 --> 00:11:03.410

Dr. Ritamarie Loscalzo: and I created and had help with creating a sheet where the nutrients are across the top, and they're also listed down the side, and then you can find all the which ones benefit each other, which ones contraindicate and which are neutral together, like, so people say. Well, should I take my zinc with my magnesium? And I heard that you shouldn't take this with that you could easily reference on that chart and find where those 2 nutrients intersect, and see either whether it's red, green, or yellow.

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00:11:04.910 --> 00:11:05.940

Dr. Ritamarie Loscalzo: Make sense.

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00:11:06.620 --> 00:11:18.569

Dr. Ritamarie Loscalzo: Yeah, but it takes work, and I haven't figured it out how to make it easier looking for an AI tool for that. Maybe ask Chat Gpt if it knows of a way to do that.

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00:11:19.300 --> 00:11:21.279

Dr. Ritamarie Loscalzo: That's a good idea. I think I might do that.

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00:11:22.050 --> 00:11:25.120

Dr. Ritamarie Loscalzo: Okay, so, Masa, are you ready.

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00:11:25.120 --> 00:11:27.110

Mahsa Javid: I got it. I got it. Yeah.

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00:11:27.350 --> 00:11:27.750

Dr. Ritamarie Loscalzo: Great.

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00:11:27.750 --> 00:11:31.380

Mahsa Javid: Alright, let's do this. I'm gonna share it.

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00:11:34.180 --> 00:11:35.010

Mahsa Javid: Okay?

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00:11:36.110 --> 00:11:37.690

Mahsa Javid: So.

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00:11:38.500 --> 00:11:41.140

Dr. Ritamarie Loscalzo: If you don't mind, I'll go through it.

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00:11:41.350 --> 00:11:43.660

Mahsa Javid: Yeah. And then you can just stop me or.

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00:11:44.810 --> 00:11:49.849

Dr. Ritamarie Loscalzo: Yeah, go through it. And then, wherever you have questions or you want help, just tell me

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00:11:50.140 --> 00:11:54.519

Dr. Ritamarie Loscalzo: and I'll stop. You see something where I think you could, you know, use a little help.

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00:11:55.280 --> 00:12:02.139

Mahsa Javid: Okay, amazing. So this is a 41 year old female. She complains of really heavy periods.

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00:12:02.862 --> 00:12:09.809

Mahsa Javid: And has a very stressful life, like work, kids, everything. So.

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00:12:09.810 --> 00:12:16.720

Dr. Ritamarie Loscalzo: 41. So assume she is not post. Last menstrual period was, okay. So she's still menstruating. Okay? Got it.

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00:12:16.720 --> 00:12:23.459

Mahsa Javid: She is, she is so 1st look, I can tell that her estrogens are low.

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00:12:24.430 --> 00:12:30.982

Mahsa Javid: Progesterone is good and testosterone's okay. It's good. It's within range.

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00:12:31.470 --> 00:12:34.369

Dr. Ritamarie Loscalzo: Within range. But it's not ideal. I would just say.

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00:12:34.370 --> 00:12:35.110

Mahsa Javid: Okay.

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00:12:35.420 --> 00:12:36.450

Mahsa Javid: Okay.

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00:12:37.839 --> 00:12:40.040

Mahsa Javid: The is the saliva port.

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00:12:42.000 --> 00:12:46.190

Deborah Nelson: I'm sorry. Could you enlarge your your document?

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00:12:47.610 --> 00:12:49.480

Mahsa Javid: Let me see that better.

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00:12:50.240 --> 00:12:51.929

Dr. Ritamarie Loscalzo: Oh, yeah, that's better. Yeah.

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00:12:53.000 --> 00:12:56.030

Mahsa Javid: Yeah, let me do more good.

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00:12:56.030 --> 00:12:56.790

Dr. Ritamarie Loscalzo: Good.

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00:12:57.450 --> 00:13:03.890

Mahsa Javid: Okay. Okay? So when I look at the saliva cortisol, it just looks like.

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00:13:04.050 --> 00:13:09.020

Mahsa Javid: basically it's plumbing. I mean, she's she's struggling.

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00:13:09.260 --> 00:13:16.710

Mahsa Javid: The free cortisol is low, and the amount that the body is making is also low.

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00:13:17.700 --> 00:13:20.300

Mahsa Javid: Yep. So she's gonna need some help. There.

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00:13:20.520 --> 00:13:21.220

Dr. Ritamarie Loscalzo: Yep.

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00:13:21.870 --> 00:13:24.140

Mahsa Javid: Okay, that's all I see here, though. Right.

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00:13:24.140 --> 00:13:31.330

Dr. Ritamarie Loscalzo: You know the other. The thing I would notice is her dhea given her cortisol is so low her dhea doesn't look bad.

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00:13:31.750 --> 00:13:34.650

Dr. Ritamarie Loscalzo: She might actually be in the

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00:13:34.850 --> 00:13:41.690

Dr. Ritamarie Loscalzo: like the last hurrah stage of like complete burnout, like oftentimes, you see, in a

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00:13:42.230 --> 00:14:02.240

Dr. Ritamarie Loscalzo: for lack of a better word, I'd swear I've been trained and think about it is Stage 3 adrenal fatigue. You'll see the dhea low, but then, when they're like hitting Rock bottom, it's like the body's trying, like desperately, to get out of hitting Rock bottom, and you sometimes see a rise in the dhea, and that might be what she's going through there.

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00:14:03.230 --> 00:14:03.900

Mahsa Javid: Okay.

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00:14:04.240 --> 00:14:04.960

Dr. Ritamarie Loscalzo: Yeah.

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00:14:05.140 --> 00:14:06.510

Mahsa Javid: Okay, interesting.

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00:14:08.920 --> 00:14:09.409

Dr. Ritamarie Loscalzo: So we'll look.

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00:14:09.410 --> 00:14:14.649

Mahsa Javid: How do you know when to look at Dhea, and when to look at dhes? Because that was low.

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00:14:15.360 --> 00:14:35.269

Dr. Ritamarie Loscalzo: The dhas is low. Well, that's the active, or that's the storage right? This is the total. The dhas is the more active, and the Edaclinolone and the Androstestine, which goes into the Dha. Those are more the metabolites. So that's the other thing, I would say on the next page, where you look at the

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00:14:35.270 --> 00:14:41.940

Dr. Ritamarie Loscalzo: okay, gonna see the dhs, and if that's low, then yeah, that's what's going on. So she's getting

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00:14:42.200 --> 00:14:45.819

Dr. Ritamarie Loscalzo: that those the metabolites are usually what the body's getting rid of.

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00:14:45.850 --> 00:14:51.750

Mahsa Javid: Okay, okay. Cause her dhea. S. Was low on the lower end.

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00:14:51.750 --> 00:14:54.239

Dr. Ritamarie Loscalzo: Yeah, on the lower end. Yeah.

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00:14:54.940 --> 00:14:58.219

Dr. Ritamarie Loscalzo: And testosterone's on the lower end.

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00:14:58.810 --> 00:15:15.890

Dr. Ritamarie Loscalzo: And it's not that she's aromatasing. So this is a clear like, just to, you know, if if she had low testosterone, but her estrogens were higher, we could say, she's maybe over aromatizing, which is the conversion here where it, says aromatase, going down, but she's she's just really tanked.

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00:15:18.180 --> 00:15:23.899

Mahsa Javid: She's tank, and then the estrogens are low. But then this estriol is like super high.

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00:15:23.900 --> 00:15:25.670

Dr. Ritamarie Loscalzo: She taking Estriol.

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00:15:26.300 --> 00:15:27.240

Mahsa Javid: No.

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00:15:27.510 --> 00:15:28.540

Dr. Ritamarie Loscalzo: You sure.

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00:15:29.410 --> 00:15:31.919

Mahsa Javid: I'll double check. But she said, she's not taking anything.

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00:15:31.920 --> 00:15:44.549

Dr. Ritamarie Loscalzo: Double check if she's doing anything, or if she's doing any kind of vaginal moisturizers or lubricants, or something, it's rare to see Estriol highlight that when the others are low.

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00:15:45.470 --> 00:16:00.789

Dr. Ritamarie Loscalzo: very rare, unless she's taking it, and Estriol is easy to come by, so she might be taking some kind of over the counter. You know, female helper kind of supplement that has estriol in it, because you can include it in.

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00:16:00.790 --> 00:16:01.450

Mahsa Javid: Included.

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00:16:01.450 --> 00:16:13.389

Dr. Ritamarie Loscalzo: Like Jolva, I think, has semesterol in it, and there are some other creams. Is she taking any kind of formulation like? Oh, that has Maca in it, or anything like that.

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00:16:14.440 --> 00:16:16.309

Mahsa Javid: She says she's not taking anything.

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00:16:16.690 --> 00:16:23.750

Dr. Ritamarie Loscalzo: Nothing. Okay? Well, that's something to look at. That's because that's unusual. That's real like, why is her body

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00:16:23.900 --> 00:16:29.619

Dr. Ritamarie Loscalzo: converting all that estrone? And Estradiol down into Estriol.

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00:16:31.280 --> 00:16:39.380

Mahsa Javid: I mean, I was just looking through the lectures and stuff, and I thought, maybe she's taking iodine, and it's causing that I wasn't sure. So I was going to ask her about that.

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00:16:39.600 --> 00:16:47.269

Dr. Ritamarie Loscalzo: You could ask her about that that could cause it. Usually I would see more in the 16. 0, being super high! Oh, in the 16 ohs!

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00:16:47.270 --> 00:16:48.010

Mahsa Javid: It is.

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00:16:48.010 --> 00:16:48.490

Dr. Ritamarie Loscalzo: Yeah.

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00:16:48.490 --> 00:16:48.940

Mahsa Javid: Yeah.

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00:16:48.940 --> 00:16:52.969

Dr. Ritamarie Loscalzo: Yeah, I would ask her about iodine. That's a good call, absolutely.

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00:16:53.940 --> 00:16:57.150

Mahsa Javid: Okay, but I didn't know like how to guide.

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00:16:57.460 --> 00:17:14.499

Dr. Ritamarie Loscalzo: 3 a 4 cyp. 3. If she has any genetic testing, she may have an overactive you know how, with genetics it could be that there's a reduced activity of that enzyme, but it could also be an over, and she may have an overactive cyp. 3, a 4.

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00:17:14.500 --> 00:17:15.210

Mahsa Javid: Okay.

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00:17:15.470 --> 00:17:22.150

Dr. Ritamarie Loscalzo: And then the other thing to look at would be, what else does? 3 a. 4 do? I think there's a couple of medications that it

156

00:17:22.349 --> 00:17:25.159

Dr. Ritamarie Loscalzo: detoxifies. So it may be over

157

00:17:25.300 --> 00:17:32.999

Dr. Ritamarie Loscalzo: overactive because of it's being overstimulated to do some of the detox work. I can look that up. Let me find

158

00:17:35.930 --> 00:17:39.550

Dr. Ritamarie Loscalzo: I don't have anything open with that in it, but I can find it.

159

00:17:42.770 --> 00:17:43.580

Dr. Ritamarie Loscalzo: I see.

160

00:17:48.560 --> 00:17:49.679

Dr. Ritamarie Loscalzo: Let me find that

161

00:17:54.123 --> 00:17:59.000

Dr. Ritamarie Loscalzo: it's opening. I have those charts that we can look at

162

00:18:00.162 --> 00:18:03.819

Dr. Ritamarie Loscalzo: if you don't know where they are, I can tell you.

163

00:18:03.980 --> 00:18:19.829

Dr. Ritamarie Loscalzo: But on the unstoppable site I mean, it's it's somewhere in the on the Nept site as well, but I always know how to find them easily on the unstoppable site, and those are the genetic charts. Does she have any genetic testing.

164

00:18:20.690 --> 00:18:21.660

Mahsa Javid: No.

165

00:18:21.810 --> 00:18:24.250

Dr. Ritamarie Loscalzo: Right, and it may be worthwhile to look at.

166

00:18:25.010 --> 00:18:25.630

Mahsa Javid: Okay.

167

00:18:26.940 --> 00:18:27.660

Dr. Ritamarie Loscalzo: To see if there's.

168

00:18:27.660 --> 00:18:28.350

Mahsa Javid: Okay.

169

00:18:28.350 --> 00:18:32.859

Dr. Ritamarie Loscalzo: Stuff that's going on with that. Okay, keep going. And I'll I'm opening this up right now.

170

00:18:32.860 --> 00:18:42.860

Mahsa Javid: Okay? So I mean, I thought, this is the reason she's having these heavy periods like, even though there's low estrogen. There's more of this proliferative estrogen.

171

00:18:43.510 --> 00:18:47.309

Dr. Ritamarie Loscalzo: Yeah, well, estriol is not a proliferative estrogen.

172



00:18:48.380 --> 00:18:50.580

Mahsa Javid: Oh, okay, I thought, if it's high, it is.

173

00:18:51.900 --> 00:18:58.370

Dr. Ritamarie Loscalzo: I mean, that may be true, if it's high, it is, but I know that you know we think in terms of it being more protective.

174

00:18:58.700 --> 00:18:59.460

Mahsa Javid: Okay.

175

00:18:59.630 --> 00:19:05.469

Dr. Ritamarie Loscalzo: So her heavy periods are all the time every month, or is it periodic? You know what I mean?

176

00:19:05.470 --> 00:19:11.920

Mahsa Javid: No, she says it's like so bad. She's just going through pads constantly.

177

00:19:12.230 --> 00:19:16.759

Dr. Ritamarie Loscalzo: Okay? And does she have like normal length of them? Are they lengthened at all?

178

00:19:18.315 --> 00:19:22.280

Mahsa Javid: That's a good question. I'll ask her that, but I think it's just.

179

00:19:22.280 --> 00:19:22.810

Dr. Ritamarie Loscalzo: Yeah.

180

00:19:23.090 --> 00:19:23.570

Dr. Ritamarie Loscalzo: The other.

181

00:19:23.570 --> 00:19:24.460

Mahsa Javid: Per usual. She didn't.

182

00:19:24.460 --> 00:19:33.040

Dr. Ritamarie Loscalzo: Consider. To get more information on this is, I would look at her do one of the the cycle, the full cycle mapping.

183

00:19:34.440 --> 00:19:38.100

Dr. Ritamarie Loscalzo: Right? Because it's going to give you what's happening throughout the cycle.

184

00:19:38.810 --> 00:19:39.270

Dr. Ritamarie Loscalzo: Okay.

185

00:19:39.270 --> 00:19:39.970

Mahsa Javid: Okay.

186

00:19:39.970 --> 00:19:50.860

Dr. Ritamarie Loscalzo: In a luteal, you know. Does she have luteal phase? Is she anovulatory? There's a lot of things that could be happening. So think about it right? The lining is

187

00:19:51.230 --> 00:19:53.349

Dr. Ritamarie Loscalzo: building up more than it should.

188

00:19:53.650 --> 00:20:01.150

Dr. Ritamarie Loscalzo: and then shedding. Let's look scroll up a little bit. I want to see her, Progesterone compared to her estrogen.

189

00:20:03.090 --> 00:20:05.860

Dr. Ritamarie Loscalzo: Let the snow go back marketing page.

190

00:20:05.860 --> 00:20:07.500

Mahsa Javid: Presentation.

191

00:20:07.500 --> 00:20:08.390

Dr. Ritamarie Loscalzo: Yeah, that same page? Right?

192

00:20:09.160 --> 00:20:10.440

Dr. Ritamarie Loscalzo: Yeah. They ring.

193

00:20:10.620 --> 00:20:13.870

Dr. Ritamarie Loscalzo: And her progesterone is pretty high compared to her progesterone.

194

00:20:13.870 --> 00:20:15.080

Mahsa Javid: That's right.

195

00:20:15.080 --> 00:20:17.510

Dr. Ritamarie Loscalzo: Is she taking anything? Any.

196

00:20:17.510 --> 00:20:18.310

Mahsa Javid: No.

197

00:20:18.560 --> 00:20:20.100

Dr. Ritamarie Loscalzo: He's not taking Progesterone.

198

00:20:20.800 --> 00:20:21.430

Mahsa Javid: No.

199

00:20:21.430 --> 00:20:29.470

Dr. Ritamarie Loscalzo: Okay, High Progesterone could be causing the lining to be thickening.

200

00:20:29.960 --> 00:20:33.150

Dr. Ritamarie Loscalzo: More interesting.

201

00:20:33.440 --> 00:20:42.309

Dr. Ritamarie Loscalzo: Okay, all right, give me a second. I'm just going to pull up that chart to see about the Cyp. 3. A. 4. What's her diet like.

202

00:20:45.710 --> 00:20:51.760

Mahsa Javid: She's she's eating whatever she wants right now. She's so stressed out.

203

00:20:52.170 --> 00:20:55.320

Mahsa Javid: So she's not following any.

204

00:20:55.320 --> 00:21:02.910

Dr. Ritamarie Loscalzo: Look at getting enough magnesium and B 6, because those are super important for the cycles. Give me a second.

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00:21:02.910 --> 00:21:03.570

Mahsa Javid: Okay.

206

00:21:05.070 --> 00:21:06.120

Dr. Ritamarie Loscalzo: Interpreting.

207

00:21:08.020 --> 00:21:21.060

Dr. Ritamarie Loscalzo: I mean, that's where I'd start with people is to try to get them to clean things up because it just messes with the hormones if she doesn't have the right b vitamins if she doesn't have the right, how's her moods?

208

00:21:21.670 --> 00:21:22.449

Dr. Ritamarie Loscalzo: Does she.

209

00:21:22.450 --> 00:21:32.330

Mahsa Javid: She says she's a mess. She's angry. Yeah, she gets very, very depressed. She recently lost someone close to her. So yeah, she's not in a good place.

210

00:21:32.530 --> 00:21:34.149

Dr. Ritamarie Loscalzo: She's not in a good place.

211

00:21:34.649 --> 00:21:40.089

Dr. Ritamarie Loscalzo: Okay, keep going down. I want to see her, Methy, her methylation pieces. Let me see. Here.

212

00:21:43.250 --> 00:21:43.940

Mahsa Javid: And.

213

00:21:44.130 --> 00:21:50.309

Dr. Ritamarie Loscalzo: I'm just looking up that 3 a 4 while you do that detail. Here we go. Methylation.

214

00:21:56.790 --> 00:21:58.990

Dr. Ritamarie Loscalzo: 3, 8, 4. Here we go.

215

00:21:59.540 --> 00:22:01.680

Dr. Ritamarie Loscalzo: It's the gnat gnat.

216

00:22:07.090 --> 00:22:08.802

Dr. Ritamarie Loscalzo: Okay, here we go.

217

00:22:15.640 --> 00:22:17.980

Dr. Ritamarie Loscalzo: she on. Any other medications.

218

00:22:18.810 --> 00:22:19.670

Mahsa Javid: No.

219

00:22:20.070 --> 00:22:21.790

Dr. Ritamarie Loscalzo: She's not any medications.

220

00:22:23.560 --> 00:22:27.580

Dr. Ritamarie Loscalzo: Does she eat organic food by any chance, or is she mostly.

221

00:22:27.580 --> 00:22:32.630

Mahsa Javid: She does. No, she's very healthy as far as that. Yeah, they're very conscious about.

222

00:22:32.630 --> 00:22:35.770

Dr. Ritamarie Loscalzo: When you just said she eats anything she wants. What does that mean?

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00:22:35.770 --> 00:22:39.570

Mahsa Javid: I mean she's doing gluten. She's doing dairy but.

224

00:22:39.570 --> 00:22:43.099

Dr. Ritamarie Loscalzo: She's careful about, not because that it's this one grapefruit juice.

225

00:22:43.100 --> 00:22:46.589

Mahsa Javid: Yeah, they don't eat like junk food, but she's not.

226

00:22:46.820 --> 00:22:47.240

Dr. Ritamarie Loscalzo: Yeah.

227

00:22:47.240 --> 00:22:48.180

Mahsa Javid: Any.

228

00:22:56.430 --> 00:23:02.060

Dr. Ritamarie Loscalzo: It doesn't look like that's there's anything specific.

229

00:23:05.040 --> 00:23:17.600

Dr. Ritamarie Loscalzo: Because I'm thinking it's overactive versus underactive. So none of this stuff I'm looking at applies to that. Okay, let's see her methylation. So she's got a very, very, very high 16. Oh.

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00:23:18.990 --> 00:23:19.760

Mahsa Javid: Yes.

231

00:23:19.760 --> 00:23:26.069

Dr. Ritamarie Loscalzo: Or oh, is low and very low, too, so her 16 2 ratio is very, very off.

232

00:23:27.545 --> 00:23:28.830

Dr. Ritamarie Loscalzo: Usually.

233

00:23:30.106 --> 00:23:33.369

Dr. Ritamarie Loscalzo: Let's see. So her 2. 0, h!

234

00:23:34.480 --> 00:23:39.849

Dr. Ritamarie Loscalzo: Her methylation is not either way messed up.

235

00:23:40.710 --> 00:23:45.369

Dr. Ritamarie Loscalzo: Go to the next page of the organic acids. I want to see if she's got any specific like.

236

00:23:47.007 --> 00:23:52.169

Dr. Ritamarie Loscalzo: the next page. Oh, wait! Wait! Wait here, let's see. It's just tanks.

237

00:23:52.170 --> 00:23:53.169

Mahsa Javid: Like I'm feeling.

238

00:23:53.170 --> 00:23:54.020

Dr. Ritamarie Loscalzo: No keep going.

239

00:23:54.020 --> 00:23:54.540

Mahsa Javid: So.

240

00:23:55.060 --> 00:23:58.040

Dr. Ritamarie Loscalzo: Okay, here we go, mma, within range

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00:23:58.690 --> 00:24:05.660

Dr. Ritamarie Loscalzo: indicant everything's really within range. Her dopamine is below her. Hva is below.

242

00:24:06.242 --> 00:24:09.197

Dr. Ritamarie Loscalzo: But everything else looks good over here.

243

00:24:09.620 --> 00:24:13.489

Mahsa Javid: I thought the joker was just because of the cortisol issue. Maybe.

244

00:24:13.490 --> 00:24:23.919

Dr. Ritamarie Loscalzo: It very well be. It's not, you know. It's not terrible, but there's nothing here that's out. I was expecting to. Maybe the Chiron 8, and the xanthurate B. 6 markers.

245

00:24:24.580 --> 00:24:28.170

Dr. Ritamarie Loscalzo: High Endocan, or well, how's her gut.

246

00:24:30.170 --> 00:24:35.109

Mahsa Javid: She's never complained about anything she would have. But I'll dig in more.

247

00:24:35.960 --> 00:24:36.520

Dr. Ritamarie Loscalzo: Okay.

248

00:24:37.306 --> 00:24:39.373

Dr. Ritamarie Loscalzo: Give me a second.

249

00:24:41.740 --> 00:24:42.425

Dr. Ritamarie Loscalzo: Okay?

250

00:25:14.550 --> 00:25:15.180

Dr. Ritamarie Loscalzo: Sick.

251

00:25:17.360 --> 00:25:18.060

Mahsa Javid: He's.

252

00:25:40.430 --> 00:25:42.360

Dr. Ritamarie Loscalzo: Has she ever been on Birth Control pills?

253

00:25:43.300 --> 00:25:44.080

Mahsa Javid: Yes.

254

00:25:46.040 --> 00:25:47.150

Dr. Ritamarie Loscalzo: How long ago.

255

00:25:49.053 --> 00:25:51.029

Mahsa Javid: I'll have to clarify.

256

00:25:55.060 --> 00:25:57.960

Mahsa Javid: But from what I know not. Yeah, not recently.

257

00:25:58.600 --> 00:26:08.840

Dr. Ritamarie Loscalzo: Not recently. Okay? And then any indication that there's like fibroids or any cysts.

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00:26:09.810 --> 00:26:10.820

Mahsa Javid: No,

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00:26:12.450 --> 00:26:20.354

Dr. Ritamarie Loscalzo: Like pain or anything like that, I would certainly check that with the high, heavy bleeding like that, or endometriosis

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00:26:20.750 --> 00:26:21.450

Mahsa Javid: Okay.

261

00:26:22.270 --> 00:26:30.769

Dr. Ritamarie Loscalzo: Okay, so I'm looking this up. Cypn 3 enzyme upregulation. That's what I had said. Right, let me see if there's some other.

262

00:26:34.940 --> 00:26:41.289

Mahsa Javid: I mean it has them drugs here. I I just shared through the Dutch interpretive guidelines.

263

00:26:42.200 --> 00:26:43.030

Dr. Ritamarie Loscalzo: Okay.

264

00:26:43.570 --> 00:26:46.260

Mahsa Javid: I'm not sure if that's what you're looking at.



265

00:26:47.266 --> 00:26:48.490

Dr. Ritamarie Loscalzo: I'm looking at something.

266

00:26:48.490 --> 00:26:52.170

Mahsa Javid: Oh, she does drink a lot of caffeine. Actually, she does have caffeine.

267

00:26:53.620 --> 00:27:01.260

Mahsa Javid: Okay? Pesticides. That's I asked her about the pesticides. But caffeine yep. Moderate alcohol. Does she drink?

268

00:27:02.300 --> 00:27:05.570

Mahsa Javid: She says now she does, because she just needs it to relax.

269

00:27:06.360 --> 00:27:07.490

Dr. Ritamarie Loscalzo: Is she overweight?

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00:27:07.490 --> 00:27:11.209

Mahsa Javid: So we a little bit.

271

00:27:17.590 --> 00:27:26.020

Dr. Ritamarie Loscalzo: So there's a few other polymorphisms that might be present, that if you do get a genetic test might contribute Comt

272

00:27:26.140 --> 00:27:33.650

Dr. Ritamarie Loscalzo: glutathione and the ugt genes b vitamin

273

00:27:33.790 --> 00:27:37.109

Dr. Ritamarie Loscalzo: deficiency. Does she take any supplements at all?

274

00:27:37.910 --> 00:27:40.010

Mahsa Javid: She says no right right now. She doesn't.

275

00:27:40.200 --> 00:27:44.199

Dr. Ritamarie Loscalzo: Had she been? And how long has this heavy period thing been going on.

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00:27:45.385 --> 00:27:47.439

Mahsa Javid: Maybe a year.

277

00:27:48.320 --> 00:27:48.990

Dr. Ritamarie Loscalzo: Yeah.

278

00:27:50.270 --> 00:28:05.709

Dr. Ritamarie Loscalzo: well, so. And when I look at something like this, and I can't come up with like, this is the cause. Right? So you have some ideas, maybe, but maybe over up regulation of that that cyp, 3, a 4

279

00:28:06.070 --> 00:28:07.850

Dr. Ritamarie Loscalzo: Chronic inflammation.

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00:28:08.210 --> 00:28:13.999

Dr. Ritamarie Loscalzo: Does she have any other indications of inflammation, joint pain stuff.

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00:28:15.100 --> 00:28:20.170

Mahsa Javid: No, I'm gonna have her do a lab work because she doesn't have anything that's recent at all.

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00:28:20.420 --> 00:28:24.630

Dr. Ritamarie Loscalzo: Okay. So when I see something like this, right, she's.

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00:28:24.630 --> 00:28:25.240

Mahsa Javid: Hmm.

284

00:28:27.600 --> 00:28:31.480

Dr. Ritamarie Loscalzo: And poor Detox. Poor liver detoxification.

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00:28:33.450 --> 00:28:55.710

Dr. Ritamarie Loscalzo: you know, when you don't have a specific. Oh, this is what's causing this. You've got to start with the foundational stuff. Right? She stressed. The Max clearly, has been for a while because she's in extreme adrenal exhaustion here. Right? So it's identifying those things adaptogens vitamin c vitamin b. 5.

286

00:28:55.720 --> 00:29:19.749

Dr. Ritamarie Loscalzo: So things to help her to improve that liver, looking at her liver, looking at detoxification, enhancing that. What kind of just really going through. What kind of things could she be exposed to? That's stressing her pathways? Does she have heavy metals? Does she have dental fillings

doing a hair analysis or something to see if there's some heavy metal exposure. Does she have Lyme exposure at home?

287

00:29:20.210 --> 00:29:26.259

Dr. Ritamarie Loscalzo: History of viral stuff, right? So all of those things. So there's stress on her system

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00:29:26.400 --> 00:29:44.759

Dr. Ritamarie Loscalzo: right? Clearly, a lot of stress on her system. So cleaning up her diet, getting her off the gluten, getting her off the dairy, getting her off the blood sugar dysregulators getting a good blood panel and seeing what her blood sugar numbers are, seeing what her thyroid numbers are right, but she's

289

00:29:45.520 --> 00:30:06.100

Dr. Ritamarie Loscalzo: I mean, that's what's really clear here. She's depleted. So likely, you know, simple like B vitamins and vitamin C can be very helpful, supporting the liver. You have plenty of resources on the site with liver support, you know, herbs and foods. And you know, cruciferous vegetables, things like that.

290

00:30:07.810 --> 00:30:19.020

Dr. Ritamarie Loscalzo: So basically to address what you see here. Right you go for what are the underlying causes? But you do need to address and get her back into some kind of semblance of balance.

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00:30:20.620 --> 00:30:24.269

Mahsa Javid: Okay, so she might, you would not do.

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00:30:24.430 --> 00:30:24.830

Mahsa Javid: But

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00:30:25.550 --> 00:30:25.970

Dr. Ritamarie Loscalzo: Go ahead!

294

00:30:25.970 --> 00:30:33.340

Mahsa Javid: You wouldn't do dim or anything to shift it over to the like. The 2 hydrox.

295

00:30:33.340 --> 00:30:35.270

Dr. Ritamarie Loscalzo: Estrogen overall.

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00:30:35.270 --> 00:30:40.429

Mahsa Javid: Okay. I thought I heard you say that in another lecture. So I I wasn't sure if I.

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00:30:40.430 --> 00:30:48.280

Dr. Ritamarie Loscalzo: Can. Specifically, let's just see if there's anything specifically.

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00:30:54.030 --> 00:30:57.650

Dr. Ritamarie Loscalzo: just basically everything that I'm telling you, I'm gonna.

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00:30:57.650 --> 00:30:58.350

Mahsa Javid: Okay.

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00:31:02.130 --> 00:31:06.699

Mahsa Javid: Would you try to down? Regulate this? 3 a 4 with like grapefruit juice? Let's say.

301

00:31:06.700 --> 00:31:14.559

Dr. Ritamarie Loscalzo: You can. Yeah, I mean, definitely can look. And because none of those things, peppermint was one of them. And you can try to down, regulate it right, but

302

00:31:15.590 --> 00:31:31.139

Dr. Ritamarie Loscalzo: and that may help the other 2 estrogens go up because she's in the postmenopausal range. There you might check her. Fsh and lh, you can do that on and see if she's going into menopause, or she's getting close to being in menopause.

303

00:31:32.790 --> 00:31:39.749

Dr. Ritamarie Loscalzo: right? This could be the the storm before you know what I mean, and perimenopause can last for 10 years.

304

00:31:40.860 --> 00:31:49.330

Mahsa Javid: Okay, but nothing also nothing like red clover or anything, because of that shift to the E 3. Right.

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00:31:49.560 --> 00:31:53.119

Dr. Ritamarie Loscalzo: You can try it. But if the E 3 goes up higher.

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00:31:53.280 --> 00:32:00.000

Dr. Ritamarie Loscalzo: then you know that that it is definitely that that pathway is moving up. It might shift it.

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00:32:02.980 --> 00:32:21.439

Dr. Ritamarie Loscalzo: you know I would. I would play with things like that, you know, adaptogen things that aren't going to hurt. I've just never seen an estriol when I the only time I've ever seen an estriol that high is, when somebody was taking it. So if she's not taking anything check her cosmetics, though? Does she use any skin creams because a lot of them do have

308

00:32:21.560 --> 00:32:23.179

Dr. Ritamarie Loscalzo: estrogens in them?

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00:32:24.730 --> 00:32:25.530

Mahsa Javid: Okay.

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00:32:25.530 --> 00:32:26.000

Dr. Ritamarie Loscalzo: Deprived.

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00:32:26.000 --> 00:32:26.680

Mahsa Javid: Good point.

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00:32:26.680 --> 00:32:28.393

Dr. Ritamarie Loscalzo: No, yeah.

313

00:32:41.690 --> 00:32:42.250

Dr. Ritamarie Loscalzo: hey?

314

00:32:43.020 --> 00:32:45.430

Dr. Ritamarie Loscalzo: Let's see if we come up with anything else.

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00:32:45.970 --> 00:32:55.209

Dr. Ritamarie Loscalzo: But yeah, any of those things that are on that list. That down regulated as long as they're not contraindicated in her, can definitely do that and might help.

316

00:33:07.280 --> 00:33:08.500

Dr. Ritamarie Loscalzo: Okay, let's see.

317

00:33:23.230 --> 00:33:36.560

Dr. Ritamarie Loscalzo: you know, you might consider the dim might be a problem, ma'am. Just watch her gut and go slow with it, because sometimes people get really distraught with it. If you if you go too fast calcium deglucarate. I mean, if you were to do an.

318

00:33:36.560 --> 00:33:37.410

Mahsa Javid: Yeah.

319

00:33:37.410 --> 00:33:43.469

Dr. Ritamarie Loscalzo: Dual test, you might see that calcium deglucurate, or the glucuronic acid is elevated.

320

00:33:45.600 --> 00:33:51.120

Dr. Ritamarie Loscalzo: and then other general things to support the other detox pathways.

321

00:33:55.730 --> 00:34:00.154

Dr. Ritamarie Loscalzo: Hmm, no, that you don't wanna do that

322

00:34:02.380 --> 00:34:06.700

Dr. Ritamarie Loscalzo: just I would really go heavily on the liver Detox pathways.

323

00:34:07.160 --> 00:34:07.720

Dr. Ritamarie Loscalzo: Huh!

324

00:34:07.720 --> 00:34:08.060

Mahsa Javid: And.

325

00:34:08.060 --> 00:34:22.536

Dr. Ritamarie Loscalzo: Reishi mushroom may help modulate estrogen, receptor and balance. Immune response directly might be. We can't hurt with Reishi because it supports adrenals right? So, looking at adaptogens that are going to be supportive here.

326

00:34:23.550 --> 00:34:40.169

Dr. Ritamarie Loscalzo: I'm not sure I would do, Maca, because it might. It might increase those estrogens. I'm not sure if Maca could increase that definitely. Cruciferous vegetables getting or eating a lot of those broccoli sprouts, broccoli sprout powder that's going to favor the 2 hydroxy pathway. Okay.

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00:34:40.179 --> 00:34:40.919

Mahsa Javid: Okay.

328

00:34:42.159 --> 00:34:47.959

Dr. Ritamarie Loscalzo: Fermented foods, B vitamins and liver support. Yeah.

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00:34:56.560 --> 00:34:57.170

Mahsa Javid: Okay.

330

00:35:00.860 --> 00:35:07.360

Dr. Ritamarie Loscalzo: I'm not sure about Maca. Some of these, some of these things that are listed are Rhodiola.

331

00:35:07.660 --> 00:35:11.210

Dr. Ritamarie Loscalzo: Rhodiola could be helpful, or Ashwagandha could be helpful.

332

00:35:12.670 --> 00:35:22.860

Dr. Ritamarie Loscalzo: and when you get her thyroid tested you just get a regular lab and get her thyroid full thyroid panel to see if that's indicated. If she also has low thyroid function that would be definitely

333

00:35:22.990 --> 00:35:26.527

Dr. Ritamarie Loscalzo: a plus. Let me just look up, maka

334

00:35:28.550 --> 00:35:32.519

Mahsa Javid: Would you start those before the lab work or no way.

335

00:35:32.580 --> 00:35:36.510

Dr. Ritamarie Loscalzo: Well, if she's the type that's going to do the labs right away.

336

00:35:36.800 --> 00:35:46.360

Dr. Ritamarie Loscalzo: then I would have her do the labs right away. If she's, gonna you know, be wishy washy and not get it done right away. Then I would just start. You got to get her out of this situation.

337

00:35:46.360 --> 00:35:46.890

Mahsa Javid: Okay.

338

00:35:46.890 --> 00:35:50.139

Dr. Ritamarie Loscalzo: If even not during her period, she probably feels like crap.

339

00:35:50.800 --> 00:35:51.820

Mahsa Javid: Yeah, she does.

340

00:35:52.440 --> 00:35:53.100

Dr. Ritamarie Loscalzo: Yeah.

341

00:35:53.550 --> 00:35:57.360

Dr. Ritamarie Loscalzo: Yeah. So, ox.

342

00:36:03.600 --> 00:36:18.049

Dr. Ritamarie Loscalzo: I'm looking at things that will go if you look at that chart again. If you want to put that one up again. The chart from the interpretation guide. Anything that increases the conversion to the 2. Hydroxy is going to be helpful. Cyp. one a 1

343

00:36:18.200 --> 00:36:25.649

Dr. Ritamarie Loscalzo: and one a 2 are involved in estrogen, and a 2 is involved in caffeine metabolism. So that's where the.

344

00:36:25.650 --> 00:36:26.380

Mahsa Javid: Kathy.

345

00:36:26.380 --> 00:36:32.970

Dr. Ritamarie Loscalzo: It plays a role here. Those cop 3, a 4, right?

346

00:36:33.720 --> 00:36:39.740

Dr. Ritamarie Loscalzo: I don't see any. Oh, there's another picture.

347

00:36:40.020 --> 00:36:47.739

Dr. Ritamarie Loscalzo: Look, Cyp, one a 1. Let me see that one may be increased by vegetables. So yeah.

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00:36:48.020 --> 00:36:53.469

Dr. Ritamarie Loscalzo: decreased by high sugar diet. So yeah, I would do all the things you know how to do right.

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00:36:53.690 --> 00:37:00.059

Dr. Ritamarie Loscalzo: Sugar, balancing diet, get her on some good microbiome support through her food.

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00:37:00.290 --> 00:37:12.680



Dr. Ritamarie Loscalzo: Explain to her that the food is making a difference, and yes, she may want to drink wine and eat crap because she doesn't feel good. But the only way to get her out of that loop is to get her eating well.

351

00:37:13.910 --> 00:37:14.550

Mahsa Javid: Okay.

352

00:37:14.830 --> 00:37:33.630

Dr. Ritamarie Loscalzo: And really anything you can do to help her like, figure out what is going on with the stress levels? Right? What caused that to tank her so she can build it back. But B, 5 b 6 and C are super important nutrients, and if you go back to your adrenal modules and see

353

00:37:33.840 --> 00:37:53.690

Dr. Ritamarie Loscalzo: what what other things you can do. And sometimes it's trial and error, right? There's a long list of adaptogens and things like that, and what I typically do is I like to read all the indications. We have a couple of different documents for you on that of specific herbs. And you like this 1. 0, that one sounds good because she also has.

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00:37:53.930 --> 00:37:58.469

Dr. Ritamarie Loscalzo: you know, other things, you know, with the moody, the moody depression, and all that.

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00:37:58.720 --> 00:37:59.740

Dr. Ritamarie Loscalzo: Okay.

356

00:38:00.460 --> 00:38:01.390

Mahsa Javid: Okay.

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00:38:01.390 --> 00:38:04.020

Dr. Ritamarie Loscalzo: Bitters with her food. Make sure she's digesting.

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00:38:04.020 --> 00:38:04.620

Mahsa Javid: Appreciate it.

359

00:38:05.170 --> 00:38:07.319

Mahsa Javid: Oh, is that perjury

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00:38:07.700 --> 00:38:12.470

Mahsa Javid: do? Would I work on that at the same time, cause I was? I didn't know if I should.

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00:38:13.480 --> 00:38:15.410

Dr. Ritamarie Loscalzo: Would say that again, would what?

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00:38:15.410 --> 00:38:20.629

Mahsa Javid: The main thing. Actually, here I was. It didn't make sense to me why, her body is favoring also

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00:38:20.850 --> 00:38:23.169

Mahsa Javid: going to Cortisone, is it?

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00:38:23.380 --> 00:38:24.620

Mahsa Javid: No, it's not.

365

00:38:24.620 --> 00:38:26.077

Dr. Ritamarie Loscalzo: Looked it up a little bit.

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00:38:26.640 --> 00:38:27.790

Dr. Ritamarie Loscalzo: It doesn't, Cortis.

367

00:38:27.790 --> 00:38:28.600

Dr. Ritamarie Loscalzo: They're both changed.

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00:38:28.600 --> 00:38:29.280

Mahsa Javid: It's not.

369

00:38:29.570 --> 00:38:30.760

Mahsa Javid: They're both synced. Okay.

370

00:38:30.760 --> 00:38:37.119

Dr. Ritamarie Loscalzo: They're both tanks. That's what I thought when I 1st switched to that. But look at them, they're both. Their patterns are very similar. They're both tanks.

371

00:38:37.120 --> 00:38:44.280

Mahsa Javid: But how about over here is it does this mean it's preferring Cortisone, or it's just, it doesn't matter. They're so low.

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00:38:45.430 --> 00:38:52.699

Dr. Ritamarie Loscalzo: They're so low, but it could be that it's favoring cortisone. Because I just you have any hypertension, any high blood pressure.

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00:38:53.030 --> 00:38:53.840

Mahsa Javid: No law.

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00:38:54.160 --> 00:39:01.090

Dr. Ritamarie Loscalzo: Yeah, I would expect in a situation like that, that it would be favoring cortisol, because it's just trying to give her some oomph.

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00:39:01.470 --> 00:39:03.389

Dr. Ritamarie Loscalzo: Right? So that's

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00:39:03.900 --> 00:39:13.219

Dr. Ritamarie Loscalzo: but it's still in the range of green, and they're so close they're such. If you look at them, they're really really close.

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00:39:14.240 --> 00:39:18.179

Mahsa Javid: Okay, would you do like pregnenolone for her

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00:39:18.970 --> 00:39:22.950

Mahsa Javid: licorice? Would you go down that road right now or no?

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00:39:23.180 --> 00:39:24.360

Dr. Ritamarie Loscalzo: I would check to make sure.

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00:39:24.360 --> 00:39:24.870

Mahsa Javid: GA.

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00:39:24.870 --> 00:39:26.863

Dr. Ritamarie Loscalzo: Hypertension stuff.

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00:39:27.860 --> 00:39:28.420

Mahsa Javid: Yeah.

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00:39:30.660 --> 00:39:40.679

Dr. Ritamarie Loscalzo: The only concern I have with supporting any of those earlier on precursors is when something's super high like that. You don't want it to get even higher.

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00:39:41.093 --> 00:39:42.609

Dr. Ritamarie Loscalzo: Let me just see what.

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00:39:42.610 --> 00:39:47.860

Mahsa Javid: Okay. So leaving. That might make the Estr even more.

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00:39:48.090 --> 00:39:59.450

Dr. Ritamarie Loscalzo: That's what I always work whenever we're going to add precursors. The body right now is favoring. Going down that pathway to the Estuary hall. I'm looking up. What are dangers of high?

387

00:40:00.140 --> 00:40:06.249

Dr. Ritamarie Loscalzo: It's certainly not like I would freak out if it was high estrone or Estradiol, because those are so proliferative.

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00:40:15.430 --> 00:40:21.690

Dr. Ritamarie Loscalzo: it, I mean it does. At that level. You're right. It does have more of a proliferative. It can be proliferative.

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00:40:25.980 --> 00:40:32.480

Mahsa Javid: It, I guess, for me it was more worrisome because of that, because it was so high. It's like.

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00:40:34.130 --> 00:40:39.810

Dr. Ritamarie Loscalzo: Right. That's why I'm considered I'm concerned about anything that would increase like when you say Clover.

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00:40:39.810 --> 00:40:41.749

Mahsa Javid: Yeah, makes sense that makes sense.

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00:40:41.750 --> 00:40:44.680

Dr. Ritamarie Loscalzo: Act that I'd be concerned about

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00:40:45.660 --> 00:40:46.729

Mahsa Javid: Okay. Fair.

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00:40:49.730 --> 00:40:57.929

Dr. Ritamarie Loscalzo: And it's the thing I'm concerned about is that 16, because that 16 is definitely DNA damage and all that.

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00:40:57.930 --> 00:40:58.660

Mahsa Javid: Right.

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00:40:59.810 --> 00:41:08.660

Dr. Ritamarie Loscalzo: Yeah. And I'm looking up. I'm looking up Estriol to see if there's any. Any. But heavy, painful, or regular periods are common

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00:41:08.800 --> 00:41:10.329

Dr. Ritamarie Loscalzo: with high estriol.

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00:41:11.200 --> 00:41:12.020

Dr. Ritamarie Loscalzo: So.

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00:41:12.020 --> 00:41:12.430

Mahsa Javid: It's really.

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00:41:12.760 --> 00:41:17.740

Dr. Ritamarie Loscalzo: I think, dampening that 3 a 4 pathway is a good idea, whatever.

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00:41:17.740 --> 00:41:18.470

Mahsa Javid: Okay.

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00:41:18.470 --> 00:41:26.739

Dr. Ritamarie Loscalzo: Producer. I think I saw peppermint on there and other. Yeah, I would. I would look at that.

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00:41:26.980 --> 00:41:34.199

Dr. Ritamarie Loscalzo: And then, if you can get that pathway shifted a little bit. Then you can look at other things for upstream.

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00:41:34.300 --> 00:41:37.630

Dr. Ritamarie Loscalzo: and with the But with the I wouldn't. I'm not

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00:41:37.760 --> 00:41:50.879

Dr. Ritamarie Loscalzo: comfortable with adding hormones at this point with what she's got going on, I would do things adaptogens and herbs and foods and supportive things like that. So Reishi, etc.

406

00:41:53.340 --> 00:41:54.240

Dr. Ritamarie Loscalzo: Yeah.

407

00:41:56.320 --> 00:42:07.109

Mahsa Javid: Okay, so would a good plan be to try to 1st deal with the that Estria, and then would I test again in like 3 months and see where we're at.

408

00:42:07.110 --> 00:42:15.999

Dr. Ritamarie Loscalzo: Again in 3 months, but I would address, I would address the the tanked adrenals as well. So the b vitamins, the vitamin. C, okay.

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00:42:16.190 --> 00:42:16.510

Mahsa Javid: Yeah.

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00:42:16.510 --> 00:42:17.819

Dr. Ritamarie Loscalzo: I would say.

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00:42:19.770 --> 00:42:22.810

Dr. Ritamarie Loscalzo: You know, Ashwagandha Rhodiola, some things that make.

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00:42:22.810 --> 00:42:23.150

Mahsa Javid: Sure.

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00:42:23.150 --> 00:42:29.100

Dr. Ritamarie Loscalzo: Read about them and see which ones make sense. Licorice, I mean, if she doesn't have a tendency.

414

00:42:31.830 --> 00:42:35.690

Mahsa Javid: She says she's always had low blood pressure, like very low.

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00:42:35.910 --> 00:42:39.690

Dr. Ritamarie Loscalzo: Okay. Then then I would say, there's probably no let me just see.

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00:42:40.190 --> 00:42:42.460

Mahsa Javid: I was. Gonna just have her do tea cause

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00:42:43.481 --> 00:42:45.470

Mahsa Javid: like a licorice tea instead of.

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00:42:45.470 --> 00:43:11.509

Dr. Ritamarie Loscalzo: And don't underestimate the value of tea like a licorice. Tea would be good instead of her coffee. Yes, and if she overdoes licorice tea. It can also go the other way. So just watching it, you know, having her check her blood pressure, especially if she has it, and it is low. It would be nice to see it going up, so if she checks her blood pressure at least once a day would be nice, but once a week would be fine.

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00:43:12.210 --> 00:43:13.400

Mahsa Javid: Okay.

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00:43:17.590 --> 00:43:18.620

Dr. Ritamarie Loscalzo: Emergency.

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00:43:19.840 --> 00:43:20.819

Mahsa Javid: If you hear me.

422

00:43:25.030 --> 00:43:25.930

Mahsa Javid: Yes.

423

00:43:30.770 --> 00:43:31.280

Mahsa Javid: hey?

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00:43:31.280 --> 00:43:34.530

Dr. Ritamarie Loscalzo: And given that her cortisone is also very low.

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00:43:35.310 --> 00:43:36.150

Mahsa Javid: Yes.

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00:43:36.150 --> 00:43:37.290

Dr. Ritamarie Loscalzo: Going to do the trick.

427

00:43:38.830 --> 00:43:44.410

Dr. Ritamarie Loscalzo: because that's the mechanism that it's the conversion between cortisol and Cortisone that the licorice works on.

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00:43:44.410 --> 00:43:45.040

Mahsa Javid: Okay.

429

00:43:45.210 --> 00:43:49.230

Dr. Ritamarie Loscalzo: That one H. 11 S. Hsg. Or whatever the name of.

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00:43:49.230 --> 00:43:49.790

Mahsa Javid: Yes.

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00:43:49.790 --> 00:43:58.279

Dr. Ritamarie Loscalzo: Time is, yeah, that that's the mechanism. So it's like she doesn't even have the raw material to raise it. So I would be doing more things like.

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00:43:58.580 --> 00:44:05.580

Dr. Ritamarie Loscalzo: you know. Maybe some Ashwagandha, maybe some Reishi, not sure about Maca.

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00:44:07.100 --> 00:44:08.280

Mahsa Javid: Okay. I'll look.

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00:44:10.920 --> 00:44:14.949

Dr. Ritamarie Loscalzo: Yeah. It inhibits 11 Beta. Hsg, 2.

435

00:44:15.320 --> 00:44:17.180

Dr. Ritamarie Loscalzo: Indirectly.

436

00:44:17.180 --> 00:44:17.770

Mahsa Javid: Okay.

437

00:44:25.860 --> 00:44:32.479

Dr. Ritamarie Loscalzo: Yeah. So some of the downsides could be that licorice can increase estrogens.

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00:44:33.950 --> 00:44:34.780

Mahsa Javid: No.

439

00:44:35.830 --> 00:44:37.590



Dr. Ritamarie Loscalzo: And in this case, until this

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00:44:37.710 --> 00:44:40.949

Dr. Ritamarie Loscalzo: pathway gets fixed, I don't want to increase

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00:44:43.760 --> 00:44:45.129

Dr. Ritamarie Loscalzo: Let me just see.

442

00:44:47.060 --> 00:44:50.860

Dr. Ritamarie Loscalzo: Oh, got a whole bunch of information here.

443

00:44:55.130 --> 00:44:56.479

Dr. Ritamarie Loscalzo: let me see.

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00:45:01.070 --> 00:45:13.489

Dr. Ritamarie Loscalzo: yeah. So Licorice works by prolonging cortisol action. But it doesn't work by increasing the production of cortisol. And since her cortisol is so low I don't think it's going to have that big of an.

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00:45:14.630 --> 00:45:17.160

Mahsa Javid: My only raise.

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00:45:19.530 --> 00:45:26.549

Dr. Ritamarie Loscalzo: And it can slow the clearance of estrogen, which means slowing. The metabolites like the 16 would not be

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00:45:26.840 --> 00:45:31.976

Dr. Ritamarie Loscalzo: eliminated. Yeah, that's that's my concern.

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00:45:32.970 --> 00:45:37.520

Dr. Ritamarie Loscalzo: let's see, it's always nice when you have a feeling about something, and then you look it up and

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00:45:38.360 --> 00:45:48.360

Dr. Ritamarie Loscalzo: it's supportive. Let's see Rhodiola Ashwagandha, holy Basil B. 5, for sure I would definitely give her that.

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00:45:55.830 --> 00:45:56.620

Dr. Ritamarie Loscalzo: Yeah.

451

00:46:02.035 --> 00:46:02.720

Mahsa Javid: Okay.

452

00:46:02.890 --> 00:46:04.030

Mahsa Javid: Okay.

453

00:46:04.030 --> 00:46:04.710

Dr. Ritamarie Loscalzo: I hope that was helpful.

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00:46:04.710 --> 00:46:08.890

Mahsa Javid: Very, very helpful. Yeah, very helpful. Cause I I wasn't sure what to do with it.

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00:46:09.170 --> 00:46:09.800

Dr. Ritamarie Loscalzo: Okay.

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00:46:09.930 --> 00:46:10.800

Dr. Ritamarie Loscalzo: Yeah.

457

00:46:10.800 --> 00:46:11.170

Mahsa Javid: Great.

458

00:46:11.480 --> 00:46:17.590

Dr. Ritamarie Loscalzo: Throwing me. But you know, whenever you're not sure what to do with something. Always have to go back to basics. Always have.

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00:46:17.590 --> 00:46:18.050

Mahsa Javid: Okay.

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00:46:18.400 --> 00:46:38.309

Dr. Ritamarie Loscalzo: Because we we don't. We're not inside here right, and you can't just try to find the thing and leave them swimming in swamp. You know what I mean? I get. There's all this other stuff that's out of balance. They've got to do it. Look at her sleep and and giving her techniques and strategies for controlling stress.

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00:46:39.720 --> 00:46:40.590

Mahsa Javid: Okay.

462

00:46:41.160 --> 00:46:41.620

Dr. Ritamarie Loscalzo: Okay.

463

00:46:41.620 --> 00:46:43.890

Mahsa Javid: Okay, thank you so much.

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00:46:43.890 --> 00:46:45.000

Dr. Ritamarie Loscalzo: You're welcome.

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00:46:50.960 --> 00:47:11.639

Dr. Ritamarie Loscalzo: I mean this. Sometimes people benefit. You know. This kind of situation she might benefit from like desiccated adrenal, but I wouldn't use that as a 1st pass, because that can be super stimulating, and if she tends to be a you know hypertensive person that could be that could make it worse.

466

00:47:13.610 --> 00:47:23.280

Mahsa Javid: The interesting thing is, she is so high, like high, strong. And I, when I saw her test I couldn't believe like, where is she getting the energy to do all the things she's doing? I don't even understand.

467

00:47:23.280 --> 00:47:25.480

Dr. Ritamarie Loscalzo: Crash real soon if you don't support her.

468

00:47:26.270 --> 00:47:28.619

Mahsa Javid: Okay. She's running on fumes.

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00:47:28.970 --> 00:47:32.849

Dr. Ritamarie Loscalzo: Right? And yeah, and yeah, see it a lot.

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00:47:34.110 --> 00:47:35.200

Mahsa Javid: Okay.

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00:47:35.820 --> 00:47:39.820

Dr. Ritamarie Loscalzo: Yeah, but get the caffeine out for sure.

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00:47:39.820 --> 00:47:42.829

Mahsa Javid: How will she do it without the caffeine like.

473

00:47:43.420 --> 00:47:45.900

Dr. Ritamarie Loscalzo: Yeah, that's problem because we need.

474

00:47:45.900 --> 00:47:46.930

Mahsa Javid: I was gonna do liquor.

475

00:47:48.580 --> 00:47:51.670

Dr. Ritamarie Loscalzo: Yeah, I don't know about the licorice, I would say, cordyceps, maybe.

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00:47:51.670 --> 00:47:53.380

Mahsa Javid: Okay. Okay.

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00:47:53.380 --> 00:47:54.320

Dr. Ritamarie Loscalzo: Let me see.

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00:47:55.700 --> 00:47:56.870

Dr. Ritamarie Loscalzo: Cordyceps.

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00:47:57.725 --> 00:47:59.209

Dr. Ritamarie Loscalzo: Power of all.

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00:48:00.340 --> 00:48:11.310

Dr. Ritamarie Loscalzo: Yeah. Okay. Cordyceps is in many ways a better better fit than licorice or maca. When cortisol is low, and the 16 estrone is high.

481

00:48:12.150 --> 00:48:13.560

Mahsa Javid: Oh, amazing. Okay.

482

00:48:14.030 --> 00:48:22.690

Dr. Ritamarie Loscalzo: And you can have her make a little elixir right? What about

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00:48:29.120 --> 00:48:34.616

Dr. Ritamarie Loscalzo: sometimes? A little bit of cacao? I'm just like going to do a contraindication thing here.

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00:48:35.070 --> 00:48:36.680

Dr. Ritamarie Loscalzo: Some oops.

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00:48:39.820 --> 00:48:48.659

Dr. Ritamarie Loscalzo: cortisol and cortisone are both low. Estriol and 16 are elevated needs energy, stress. I would say that could be the perfect one for her.

486

00:48:50.560 --> 00:48:51.170

Mahsa Javid: Okay.

487

00:48:53.950 --> 00:49:00.819

Dr. Ritamarie Loscalzo: Yeah, and that gives you stamina and I'm just thinking about cacao

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00:49:04.810 --> 00:49:07.730

Dr. Ritamarie Loscalzo: and that might be a good way to wean her off the coffee.

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00:49:08.820 --> 00:49:09.760

Mahsa Javid: Okay.

490

00:49:10.740 --> 00:49:13.090

Dr. Ritamarie Loscalzo: Helping with dopamine. Yeah.

491

00:49:18.270 --> 00:49:32.160

Dr. Ritamarie Loscalzo: Knowing her genes. We, you know, there's certain genetic contraindications like maos and stuff like that. But it might be worthwhile, if it's just a little bit of cacao mixed with the cordyceps, and just have that be her morning beverage to get her started.

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00:49:33.510 --> 00:49:36.300

Mahsa Javid: Okay, amazing. That's very helpful.

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00:49:36.300 --> 00:49:36.680

Dr. Ritamarie Loscalzo: Great.

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00:49:36.680 --> 00:49:37.480

Mahsa Javid: Thank you.

495

00:49:38.840 --> 00:49:41.350

Dr. Ritamarie Loscalzo: And Rob, you had your hand up for a while. There.

496

00:49:41.980 --> 00:49:44.877

Rob Vanderwal: Yeah, I had a question on that report.

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00:49:45.890 --> 00:49:55.969

Rob Vanderwal: you didn't mention too much about her history, but you know, because her 2 0, pathway is so high. I thought maybe she had a history of osteoporosis, or something.

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00:49:57.180 --> 00:49:59.779

Dr. Ritamarie Loscalzo: Her 2. 0, isn't high, it's actually low.

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00:49:59.940 --> 00:50:00.440

Dr. Ritamarie Loscalzo: It's.

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00:50:00.440 --> 00:50:01.370

Mahsa Javid: 6.

501

00:50:01.780 --> 00:50:11.359

Dr. Ritamarie Loscalzo: That's high, and the 16 will actually support bone. So I would think maybe the opposite, that she's got pretty strong bone.

502

00:50:12.793 --> 00:50:17.519

Dr. Ritamarie Loscalzo: But it's not such a high amount. The total amounts aren't huge.

503

00:50:17.760 --> 00:50:20.219

Rob Vanderwal: It's 6, 60%.

504

00:50:20.220 --> 00:50:21.240

Dr. Ritamarie Loscalzo: Team is on.

505

00:50:22.020 --> 00:50:23.480

Dr. Ritamarie Loscalzo: Where? Where are you looking at.

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00:50:23.980 --> 00:50:25.649

Rob Vanderwal: Look at the pie chart.

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00:50:25.990 --> 00:50:28.800

Rob Vanderwal: Yeah, it's 60.

508

00:50:28.800 --> 00:50:31.290

Dr. Ritamarie Loscalzo: Percent. That's the 16. Yeah.

509

00:50:31.660 --> 00:50:32.180

Rob Vanderwal: Yeah.

510

00:50:32.310 --> 00:50:37.470

Rob Vanderwal: Oh, that's a 16. I'm sorry. That's the blue. No, the blue, the blue is.

511

00:50:37.470 --> 00:50:45.499

Dr. Ritamarie Loscalzo: Is the 16. The green is the 2, and the 2 is only like 35%. And we want that to be in the 60 to 80.

512

00:50:46.950 --> 00:50:49.479

Rob Vanderwal: The blue is the 2. 0, h.

513

00:50:49.480 --> 00:50:51.189

Dr. Ritamarie Loscalzo: Yeah, no. The blue is the 16.th

514

00:50:51.190 --> 00:50:51.870

Mahsa Javid: No.

515

00:50:52.480 --> 00:50:53.230

Dr. Ritamarie Loscalzo: Think of it, this

516

00:50:53.230 --> 00:51:01.370

Dr. Ritamarie Loscalzo: green is go right. 2 is the protective. Go, go. Red is 4, which is like the really dangerous one, and the blue.

517

00:51:01.370 --> 00:51:02.250

Rob Vanderwal: This kind of.

518

00:51:02.490 --> 00:51:08.032

Dr. Ritamarie Loscalzo: In between. You want a decent amount, right? You want. What are they saying is a good amount

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00:51:08.340 --> 00:51:09.200

Rob Vanderwal: 13.th

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00:51:09.200 --> 00:51:11.139

Dr. Ritamarie Loscalzo: 30. Right? Yeah.

521

00:51:11.140 --> 00:51:13.433

Dr. Ritamarie Loscalzo: Okay, yeah. Okay. I got that messed up.

522

00:51:13.720 --> 00:51:15.659

Dr. Ritamarie Loscalzo: But you're you're right to connect

523

00:51:15.850 --> 00:51:23.360

Dr. Ritamarie Loscalzo: 16 with osteoporosis. But I think it would tend to be more in this case, protective.

524

00:51:24.360 --> 00:51:35.759

Dr. Ritamarie Loscalzo: If this has been going on for a while, that she may not have, you know and I'm not. I wanna I don't want to go there and extrapolate, and you know, say anything about that. But but you're right to connect them. Yeah.

525

00:51:35.760 --> 00:51:36.370

Rob Vanderwal: Yeah.

526

00:51:36.590 --> 00:51:40.899

Rob Vanderwal: Oh, and I also I also can, you know, Vodge, for

527

00:51:41.110 --> 00:51:43.600

Rob Vanderwal: getting rid of caffeine or coffee?

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00:51:43.730 --> 00:51:50.797

Rob Vanderwal: Cause I was. I was highly addicted to coffee, and once I stopped I felt so much better.

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00:51:51.830 --> 00:51:52.440

Dr. Ritamarie Loscalzo: Yeah.

530

00:51:52.640 --> 00:52:08.939



Dr. Ritamarie Loscalzo: I'm glad to hear that. And so many people are addicted to their coffee, and they don't want to hear it when you tell them to go off of it like coffee. Is this health food? And honestly, yeah, it has some good benefits. It does. It has some good benefits, but it's also beating a dead horse

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00:52:09.120 --> 00:52:27.980

Dr. Ritamarie Loscalzo: right? And in her case she has been. She's been under stress for a long time. It's really clear, right? And she's drained, and she's just got that little bit of oomph in the morning, right? Because her her cortisol in the morning was like right in the middle of the range, but the rest of the day she's probably completely

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00:52:28.860 --> 00:52:30.110

Dr. Ritamarie Loscalzo: basket case.

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00:52:30.920 --> 00:52:35.010

Dr. Ritamarie Loscalzo: Does she sleep well? Does she fall into bed, and just like crash or no.

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00:52:35.310 --> 00:52:37.220

Mahsa Javid: Crashes. She just crashes.

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00:52:37.220 --> 00:52:39.680

Dr. Ritamarie Loscalzo: Yeah, yeah. I mean, look at those numbers like.

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00:52:39.910 --> 00:52:42.930

Dr. Ritamarie Loscalzo: there's nothing keeping her going throughout the day.

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00:52:43.370 --> 00:52:47.389

Dr. Ritamarie Loscalzo: Yeah, she can do it.

538

00:52:48.250 --> 00:52:48.870

Mahsa Javid: Okay.

539

00:52:48.870 --> 00:52:58.089

Dr. Ritamarie Loscalzo: He's gonna need. You know the coaching support, right? Because it's it's issue of changing your mindset and changing your behaviors.

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00:52:58.120 --> 00:53:21.140

Dr. Ritamarie Loscalzo: And if these are things she's been doing for a long time, and then she has other behaviors to counteract one. You know what I mean like. Then she has the wine to calm her down and right, and maybe give her some things if she's wired, and she's feeling that way. But that might, you

know, chamomile or lemon balm, or something like that. But I would be careful about not doing too much of that, because you really want to build

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00:53:21.220 --> 00:53:25.670

Dr. Ritamarie Loscalzo: that, that you build up the the cortisol.

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00:53:25.920 --> 00:53:27.190

Mahsa Javid: And the reserve. Okay.

543

00:53:27.670 --> 00:53:28.170

Dr. Ritamarie Loscalzo: Okay.

544

00:53:28.500 --> 00:53:28.970

Mahsa Javid: Okay.

545

00:53:28.970 --> 00:53:29.449

Dr. Ritamarie Loscalzo: And the beat.

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00:53:29.450 --> 00:53:29.880

Dr. Ritamarie Loscalzo: Okay.

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00:53:29.880 --> 00:53:35.049

Dr. Ritamarie Loscalzo: help her to convert more of the cholesterol. I don't know where her lipids are, either, so you don't know.

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00:53:35.050 --> 00:53:36.090

Mahsa Javid: Yeah, me, too.

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00:53:36.530 --> 00:53:36.980

Dr. Ritamarie Loscalzo: Right. You don't.

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00:53:36.980 --> 00:53:37.400

Mahsa Javid: No.

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00:53:37.400 --> 00:53:45.109

Dr. Ritamarie Loscalzo: Lipids are, because a lot of times people like this, their cholesterol is off the charts, but it's not coming down into the steroid pathways.

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00:53:46.590 --> 00:53:51.830

Dr. Ritamarie Loscalzo: And you know, if you can get her, you know, B, 5 really helps to support that pathway.

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00:53:52.030 --> 00:53:52.700

Dr. Ritamarie Loscalzo: It helps.

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00:53:52.700 --> 00:53:56.130

Mahsa Javid: Okay. I mean, it took me a year to get her to do this. So.

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00:53:56.130 --> 00:53:56.960

Dr. Ritamarie Loscalzo: Oh, wow!

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00:53:57.180 --> 00:53:57.960

Dr. Ritamarie Loscalzo: Is this around.

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00:53:57.960 --> 00:54:00.140

Mahsa Javid: Want to maybe yeah.

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00:54:00.300 --> 00:54:02.609

Dr. Ritamarie Loscalzo: Yeah, it's hard to work with relatives.

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00:54:03.440 --> 00:54:04.190

Mahsa Javid: Yeah.

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00:54:04.970 --> 00:54:11.089

Dr. Ritamarie Loscalzo: Yeah. But you know, use the I love you, and I care about you. And I want you to get the best. And you know.

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00:54:12.020 --> 00:54:14.310

Dr. Ritamarie Loscalzo: yeah, okay.

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00:54:14.310 --> 00:54:15.030

Mahsa Javid: Sounds good.

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00:54:15.250 --> 00:54:15.649

Dr. Ritamarie Loscalzo: All right.

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00:54:15.650 --> 00:54:16.700

Mahsa Javid: Thank you.

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00:54:16.700 --> 00:54:19.309

Dr. Ritamarie Loscalzo: You're welcome. Yeah, if you could stop sharing we could.

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00:54:22.590 --> 00:54:29.419

Dr. Ritamarie Loscalzo: Great helpful was that was that interesting? Everybody? I would love to see your comments.

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00:54:31.100 --> 00:54:52.539

Dr. Ritamarie Loscalzo: That's an unusual one. But you know, here's the thing. This is how I work right? I get something that's unusual, and I just start to dig and dig and dig, and then you just see connections. We can't keep all this information in our heads at the off the tip of our tongues, but you have the overall. You have the ways things connect, and then you go back and you look up and go. Oh, yeah.

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00:54:52.640 --> 00:55:14.070

Dr. Ritamarie Loscalzo: oh, yeah. Oh, cortisol! I didn't realize. I thought of cortisol. And then I'm not cortisol cordyceps. And then I thought, Okay, let's just see. And then you look at the interactions you go. Oh, that sounds like a good one. Which is what that that document that I have that's on the adaptogens, where you can just read little blurbs about them, and you can go online and get way. More information. And sometimes a particular herb may sound

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00:55:14.070 --> 00:55:22.979

Dr. Ritamarie Loscalzo: pretty good for one aspect, but it's like contraindicated for other aspects. But sometimes you read one and you go. Oh, my God! That sounds perfect.

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00:55:23.220 --> 00:55:26.289

Dr. Ritamarie Loscalzo: right? Because it has. It covers a lot of bases.

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00:55:29.490 --> 00:55:31.349

Dr. Ritamarie Loscalzo: comments, questions Deborah.

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00:55:34.310 --> 00:55:36.070

Deborah Nelson: Well, I found that very interesting.

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00:55:36.360 --> 00:55:45.110

Deborah Nelson: It was very interesting, and I like Ginger's comment that she just made that she'd love this as a case, study after labs and repeat the Dutch. That'd be great to bring it back and.

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00:55:45.110 --> 00:55:45.560

Dr. Ritamarie Loscalzo: Yes.

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00:55:47.130 --> 00:55:48.090

Deborah Nelson: That'd be awesome.

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00:55:48.090 --> 00:56:07.810

Dr. Ritamarie Loscalzo: And to see some of the labs. The blood labs right? Where's her blood sugar? Where's her thyroid at? What's her inflammatory markers look like, because cortisol is very inflammatory. But right now she's depleted. But where she came from was probably very high levels of cortisol.

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00:56:08.120 --> 00:56:10.989

Dr. Ritamarie Loscalzo: and her body's barely hanging on yeah, great.

578

00:56:11.675 --> 00:56:22.700

Deborah Nelson: I have. If you're gonna move on. Yeah, I have. I have. I I'd like to share my screen if I could. I'm not sure. How do I do that? Oh, I hit share.

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00:56:22.840 --> 00:56:23.500

Dr. Ritamarie Loscalzo: Yeah.

580

00:56:24.830 --> 00:56:29.910

Deborah Nelson: Okay? Oh, here it is. Oh, that's good. Okay. Whoops.

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00:56:30.220 --> 00:56:31.900

Deborah Nelson: Oh, and then hit share again.

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00:56:35.110 --> 00:56:36.750

Deborah Nelson: Okay, you can see it.

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00:56:38.140 --> 00:56:41.540

Dr. Ritamarie Loscalzo: I can. Yes. Yeah, what's going on there?

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00:56:41.540 --> 00:56:43.760

Deborah Nelson: Did it go later?

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00:56:44.080 --> 00:56:46.050

Deborah Nelson: It's off my screen now.

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00:56:46.440 --> 00:56:49.010

Dr. Ritamarie Loscalzo: No, I saw her hand. I just see your gmail.

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00:56:49.880 --> 00:56:55.449

Deborah Nelson: Yeah. Sorry. Stop share. How do I get back to the photo, I wonder?

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00:56:56.040 --> 00:57:00.620

Dr. Ritamarie Loscalzo: There is right up there. It says, hands up, photo hands photo. Just click that Jpeg

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00:57:01.170 --> 00:57:05.139

Dr. Ritamarie Loscalzo: right at the top of you. See it Js hand photo.

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00:57:05.250 --> 00:57:06.700

Dr. Ritamarie Loscalzo: and then it's oh, it's just there.

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00:57:06.700 --> 00:57:08.820

Deborah Nelson: Okay. Yeah. Okay. Okay.

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00:57:09.290 --> 00:57:09.820

Dr. Ritamarie Loscalzo: Yeah.

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00:57:09.820 --> 00:57:19.259

Deborah Nelson: Okay. So alright. So I was, actually, I wasn't thinking about sharing this today. So I'm not really prepared. But this is the 21.

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00:57:19.260 --> 00:57:28.880

Dr. Ritamarie Loscalzo: I want you to know, guys, that that we're almost at the end of our time. So we this would be a good thing to bring back. If you do have more information and be prepared to take it through, because it looks very interesting.

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00:57:29.400 --> 00:57:32.930

Deborah Nelson: Well, it's I'll just if I could just sort of preview it. Then.

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00:57:32.930 --> 00:57:33.670

Dr. Ritamarie Loscalzo: Yeah.

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00:57:34.080 --> 00:57:45.090

Deborah Nelson: When I say I'm not prepared. I don't remember the technical, the medical name for this. It's this something rather. Anyway. What's going on here when I researched it

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00:57:45.430 --> 00:57:52.300

Deborah Nelson: is this is a very clear pattern that's well documented. This is the 21 year old that can't get out of that doesn't

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00:57:52.620 --> 00:57:54.469

Deborah Nelson: out of bed. She never leaves her room.

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00:57:54.880 --> 00:57:59.030

Deborah Nelson: She has very, very pale skin, as you can see by the upper arm.

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00:58:00.110 --> 00:58:00.780

Dr. Ritamarie Loscalzo: Yeah. But then.

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00:58:00.900 --> 00:58:15.714

Deborah Nelson: The forearm. Yeah, and but this has developed over the last. Oh, I don't know. 5 months, 6 months, and it's and what I believe it to be is, it's a cellular. It's a

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00:58:17.140 --> 00:58:26.470

Deborah Nelson: compromised cellular membrane, and it allows the iron to seep out of the red blood cells.

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00:58:26.870 --> 00:58:34.850

Deborah Nelson: And what I've researched so far is that the the iron itself is not dangerous.

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00:58:35.670 --> 00:58:39.629

Deborah Nelson: but it's like, well, but what else is happening in her body?

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00:58:39.740 --> 00:58:46.180

Deborah Nelson: If she has cellular membrane issues. So I was researching B 5

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00:58:46.490 --> 00:58:50.530

Deborah Nelson: and B 5. She also has. This is the girl who

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00:58:51.090 --> 00:59:10.820

Deborah Nelson: she's sensitive to sounds, tastes, textures, smells everything. But I did find oh, I don't know if I have the B 5 here. B. 5. Yes, okay, yes, okay. So she has. Fatigue, decreased appetite, so she might feel hungry, but she

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00:59:11.020 --> 00:59:13.919

Deborah Nelson: but everything sounds or just sounds really

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00:59:14.400 --> 00:59:18.310

Deborah Nelson: repulsive to her, that's all she says, so decreased appetite.

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00:59:19.088 --> 00:59:23.349

Deborah Nelson: I'm positive she has decreased horm adrenals.

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00:59:24.450 --> 00:59:27.149

Deborah Nelson: She can't do any real blood testing.

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00:59:28.000 --> 00:59:29.069

Deborah Nelson: She can't do any.

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00:59:29.070 --> 00:59:31.179

Dr. Ritamarie Loscalzo: Because of the sensitivity he can't.

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00:59:31.820 --> 00:59:32.770

Dr. Ritamarie Loscalzo: Yes, is that one?

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00:59:33.760 --> 00:59:36.829

Dr. Ritamarie Loscalzo: And what about what about doing a Dutch test? A urine test?

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00:59:37.420 --> 00:59:44.999

Deborah Nelson: We could, we could possibly do that. The thing is like when you were going through this other case. Study with Masa.

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00:59:45.705 --> 00:59:47.240



Deborah Nelson: Yeah, if

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00:59:47.820 --> 00:59:58.440

Deborah Nelson: you have a plan, you have, you go. Okay. These are the things that we could do to support adrenal or liver detoxification, or whatever. Right? Okay? So with this girl.

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00:59:58.810 --> 01:00:02.880

Deborah Nelson: The thing is, you almost have to. When you're going to do a test.

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01:00:03.270 --> 01:00:06.169

Deborah Nelson: think ahead to well, what is the

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01:00:06.490 --> 01:00:09.620

Deborah Nelson: what are your options. When you get the test results.

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01:00:09.620 --> 01:00:13.620

Dr. Ritamarie Loscalzo: Right are they things she could potentially do or not do right.

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01:00:13.620 --> 01:00:20.560

Deborah Nelson: Exactly because she's she's been. She has been poked and prodded by.

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01:00:21.130 --> 01:00:27.000

Deborah Nelson: I would say dozens of doctors since she was 5, and she's 21 now.

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01:00:27.290 --> 01:00:31.639

Deborah Nelson: and she just said to me, she pretty much broke down last week and said.

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01:00:31.840 --> 01:00:33.870

Deborah Nelson: I can't be a guinea pig anymore.

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01:00:34.270 --> 01:00:37.569

Deborah Nelson: you know, because she's her mother's thinking

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01:00:37.880 --> 01:00:44.786

Deborah Nelson: they moved. She needs a new doctor, and the doctors don't understand anything that's going on with her.

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01:00:45.680 --> 01:00:50.810

Deborah Nelson: because she has. She was diagnosed early on in her life with pots.

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01:00:51.670 --> 01:00:53.600

Dr. Ritamarie Loscalzo: Yeah, that's what I was thinking. She was.

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01:00:54.030 --> 01:00:55.380

Deborah Nelson: And and I remember.

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01:00:55.380 --> 01:01:00.760

Dr. Ritamarie Loscalzo: She able to take any supplements orally, topically.

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01:01:00.940 --> 01:01:03.599

Deborah Nelson: That's the other thing. Nothing topically.

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01:01:04.784 --> 01:01:08.260

Deborah Nelson: Oral supplements. She is taking a B complex.

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01:01:08.410 --> 01:01:12.249

Deborah Nelson: I've had her on that for a while, and that seemed to help.

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01:01:12.720 --> 01:01:29.079

Deborah Nelson: She takes a from a naturopath. She does take something called Zenpep, which is a digestive enzyme, and I've energy tested. That seems it seems to be a good thing that she's doing those 2 things she's able to tolerate and still

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01:01:29.590 --> 01:01:31.880

Deborah Nelson: try to eat. But

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01:01:32.020 --> 01:01:38.150

Deborah Nelson: she's extremely oh, I think I told you last time. She's her vitamin D tested at 18.3,

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01:01:39.010 --> 01:01:39.520

Deborah Nelson: I know.

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01:01:39.700 --> 01:01:42.839

Deborah Nelson: So I put her on A on a d. 3

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01:01:43.200 --> 01:01:46.230

Deborah Nelson: d. 3 K. 2, right? Okay? And

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01:01:47.100 --> 01:01:50.190

Deborah Nelson: she took that for about 5 days.

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01:01:50.350 --> 01:01:55.640

Deborah Nelson: And then I'm energy testing that. The D is not the problem. But

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01:01:55.940 --> 01:02:06.319

Deborah Nelson: it seems that when she takes more than the 2 supplements it interferes with her body's ability to eat when she drinks or eats anything.

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01:02:07.000 --> 01:02:14.460

Deborah Nelson: or ingests anything. She has pain. Now she's had every scan known to man.

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01:02:14.630 --> 01:02:17.040

Deborah Nelson: and they can't find anything physically.

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01:02:17.310 --> 01:02:18.860

Dr. Ritamarie Loscalzo: Finding. Yeah.

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01:02:19.050 --> 01:02:30.529

Deborah Nelson: I'm working with her energetically and emotionally, and we've cleared a lot of things, but she still has these. She goes up. She's she's better, relatively better, and then

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01:02:30.890 --> 01:02:36.179

Deborah Nelson: she might crash. And so the the B. 5,

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01:02:36.410 --> 01:02:46.720

Deborah Nelson: the B. 5 tested extremely strong for her, and I've been trying to get her to take that, but it it interferes with her being able to eat anything.

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01:02:47.870 --> 01:02:53.560

Dr. Ritamarie Loscalzo: So when you say fear she's unable to, she loses her appetite, or she gets sick.

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01:02:53.560 --> 01:02:57.889

Deborah Nelson: She? Let's just say she has no appetite. She might have hunger.

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01:02:58.120 --> 01:03:14.200

Deborah Nelson: but she has no appetite. So so if you suggest something that she's had in the past that was like a safe food for her like steak. She could have a little steak, or she could have some carrots or some peas or something, and now she'll say, Oh, if I even think about

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01:03:14.510 --> 01:03:15.879

Deborah Nelson: any of these.

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01:03:16.220 --> 01:03:24.340

Deborah Nelson: it makes her feel nauseous so, but she'll say she feels hungry, but there isn't anything. So it's this appetite versus.

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01:03:24.340 --> 01:03:27.760

Dr. Ritamarie Loscalzo: Sounds like a very strong emotional, mental component. Here.

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01:03:28.580 --> 01:03:40.550

Deborah Nelson: We have been working on that. And okay, I I agree. But we haven't found the linchpin.

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01:03:40.990 --> 01:03:45.810

Deborah Nelson: We haven't found the the thing that will do it, and I think.

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01:03:45.810 --> 01:03:51.340

Dr. Ritamarie Loscalzo: She ever had Iv. Nutrition? Is that even something that's a remote possibility.

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01:03:51.580 --> 01:03:58.470

Deborah Nelson: It's not a possibility, nothing that pokes her. She can't even take a shower or bathe, because the water.

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01:03:58.470 --> 01:03:59.719

Dr. Ritamarie Loscalzo: Yeah, yeah, yeah.

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01:04:00.110 --> 01:04:07.689

Dr. Ritamarie Loscalzo: all right. Look, I've got to go to another call. But this is a interesting case. What I would do is kinda

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01:04:07.880 --> 01:04:12.630

Dr. Ritamarie Loscalzo: pull it together like a case, with all all the information that you have.

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01:04:12.950 --> 01:04:16.710

Dr. Ritamarie Loscalzo: And let's just see what what you know.

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01:04:17.340 --> 01:04:21.440

Dr. Ritamarie Loscalzo: because it's I mean, you know the emotional, energetic pieces very well

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01:04:21.640 --> 01:04:24.640

Dr. Ritamarie Loscalzo: yet there's there. Just seems like there's

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01:04:25.350 --> 01:04:31.829

Dr. Ritamarie Loscalzo: you know, she'll get better. She'll get better, and then she'll plateau. That's almost like a pattern that's not allowing her

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01:04:32.300 --> 01:04:33.380

Dr. Ritamarie Loscalzo: to get better.

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01:04:34.430 --> 01:04:47.049

Deborah Nelson: Exactly, and I've been working on resistance. I've worked on right now. She had. Her mother went away for a a conference for 5 days. And now we're gonna this week we're gonna work on

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01:04:48.270 --> 01:04:50.589

Deborah Nelson: What's it called attachments?

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01:04:51.310 --> 01:04:53.720

Deborah Nelson: Because she was having separation, anxiety.

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01:04:53.940 --> 01:04:54.610

Dr. Ritamarie Loscalzo: Hmm.

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01:04:55.350 --> 01:05:01.600

Deborah Nelson: And she hadn't had that she didn't think since she was, you know, very, very young.

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01:05:01.960 --> 01:05:04.820

Deborah Nelson: So anyway, it's a new thing to that's in that.

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01:05:04.820 --> 01:05:25.920

Dr. Ritamarie Loscalzo: Yeah. And then the other thing to look at is, are there things that interfere with the nervous system, I mean? Is, was there any kind of Lyme co-infections, mold cytomegalovirus ebv any things like that that could have could trigger. She's had this pots for a long time right.

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01:05:26.490 --> 01:05:45.020

Deborah Nelson: Well, you know what to your point. Really fast. She, when her mother was away, she had other people come in and take care of her, and she got some kind of viral infection. And so we were working on the viral infection, because that seemed to trigger a lot of these things over the past 2 weeks.

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01:05:45.270 --> 01:05:49.580

Deborah Nelson: but not this. This isn't on. This has been going on this hand.

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01:05:49.580 --> 01:05:54.059

Dr. Ritamarie Loscalzo: And maybe not associated, but it was certainly looking at pans and pandas.

680

01:05:54.740 --> 01:05:58.710

Deborah Nelson: Oh, no, she was diagnosed with that previously.

681

01:06:00.390 --> 01:06:05.729

Deborah Nelson: So that's that's been in the that's been on the table.

682

01:06:06.490 --> 01:06:13.900

Dr. Ritamarie Loscalzo: Check out the the podcast episode I did with Dr. Robert. What's his name? Now, Roberto Scott.

683

01:06:14.190 --> 01:06:20.859

Dr. Ritamarie Loscalzo: what's his last name, anyway? Look, look up pans and pandas on my blog.

684

01:06:21.740 --> 01:06:24.270

Deborah Nelson: Okay, yeah, it's pandas. Yeah. Alright.

685

01:06:24.270 --> 01:06:24.690

Dr. Ritamarie Loscalzo: Guys.

686

01:06:25.250 --> 01:06:26.290

Deborah Nelson: Okay, thanks, so much.

687

01:06:26.290 --> 01:06:30.070

Dr. Ritamarie Loscalzo: Lots of great information, and I'll see you guys soon. Bye, bye.