

## Episode 145 Transcript

00:00:00:00 - 00:00:07:02

Jenn Pike

Like, you don't have to do seven different things to go to bed. It could be one thing that just actually makes you feel good and supported.

00:00:07:05 - 00:00:32:15

Dr. Jaclyn Smeaton

Welcome to the DUTCH podcast, where we dive deep into the science of hormones, wellness, and personalized health care. I'm Doctor Jaclyn Smeaton, chief medical officer at DUTCH. Join us every Tuesday as we bring you expert insights, cutting edge research, and practical tips to help you take control of your health from the inside out. Whether you're a healthcare professional or simply looking to optimize your own well-being, we've got you covered.

00:00:32:17 - 00:00:55:10

Dr. Jaclyn Smeaton

The contents of this podcast are for educational and informational purposes only. This information is not to be interpreted or mistaken for medical advice. Consult your health care provider for medical advice, diagnosis and treatment. Hi, welcome to this week's episode of the DUTCH podcast. This week's topic is something that I think is near and dear to so many women's hearts, which is how we can be at our best performance.

00:00:55:12 - 00:01:20:21

Dr. Jaclyn Smeaton

My guest today started working with professional athletes and really learned a lot about not just what went into performance, but what went into recovery and the fact that recovery was really the unlock. She said there's whole teams of people dedicated to recovery once athletes perform. Now, what's so cool about this guest is that she's taken that concept and really applied it to the everyday woman who, she explains, we are the athletes of our lives.

00:01:21:00 - 00:01:42:12

Dr. Jaclyn Smeaton

We are in our own performance. I mean, maybe in the gym, but also at work and at home as a mom and with our friends and all the ways that we want to show up in our life and at the same time, we need to be putting that same emphasis and effort into

our own recovery. She's really experienced with DUTCH Testing and walks us through what we can see and what women report.

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Dr. Jaclyn Smeaton

That would lead us to order a DUTCH Test, and also what patterns and trends might indicate to us that a woman is not focusing enough on her recovery. And this goes for every stage of life. You are going to really love this episode. It's so usable. You're going to take the information that you learned today and put it into practice right away now.

00:02:00:17 - 00:02:25:15

Dr. Jaclyn Smeaton

So my guest today is Jenn Pike. She's a functional diagnostic nutrition practitioner, a registered holistic nutritionist, a medical exercise specialist, and a movement educator. And she's got over 30 years working in women's health and hormones. She's the bestselling author of The Simplicity Project and founder of so many programs like The Hormone Project, ignite, the Perry and Menopause Project, and Saint and a cycle informed fitness studio for women.

00:02:25:15 - 00:02:38:12

Dr. Jaclyn Smeaton

She has so much experience, and I loved the insights she shared. I want to get them started so we can share these with you now. So let's go ahead and roll into the episode. Well, John, thank you so much for joining me today on the podcast. I'm so glad to have you here.

00:02:38:13 - 00:02:40:19

Jenn Pike

Thank you for having me. I'm excited to be here.

00:02:40:21 - 00:02:59:14

Dr. Jaclyn Smeaton

Now your expertise is like so diverse, and I love the all the different ways that you've engaged with women. Can you share a little bit about what brought you here? I mean, I know we've heard your basic bio, but how did your own experience and early work with clients kind of shape the way that you think about exercise, women's health, hormone metabolism?

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Jenn Pike

It was honestly, you know, when I came out of school, I was thrust right into, working with professional athletes and players in the NHL and those who had been drafted and were getting ready to go. And so I was actually working in a very male dominant masculine type of industry in fitness, and I was still teaching group exercise classes and doing personal training for women in gym where I had lived.

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Jenn Pike

And I loved working with athletes. I mean, you are exposed to some of just the most incredible technology for training and education. The research is nonstop and that really fed me for a long time until I realized that what was really helping a lot of these athletes thrive was the environment. And it was they had a team. They had like every resource you could possibly imagine.

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Jenn Pike

And I would go back home and I would train these everyday women. A lot of them were moms. I wasn't a mom yet at the time, and I just remember thinking to myself, My God, these women are the everyday athletes of life and they have the fewest amount of resources and tools, and they're trying so hard to carve out the time to take care of themselves, you know, work with what they had.

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Jenn Pike

And I became more and more interested in supporting them and becoming part of their team. And so I left working, you know, with the athletes and dove headfirst into building my business around working with women physically first. And then what I realized is a lot of their questions were, I'm feeling great at the exercise, I'm getting stronger. But I am so freaking tired, or my hair standing and falling out, I feel like maybe I have a thyroid issue.

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Jenn Pike

I'm going to my doctor, I'm getting labs done. They tell me everything is fine. I do not feel fine. And I really started to listen to their stories and their struggles and their questions. And for me, then I was like, well, I need to go back and learn more because I have this scope of what I can train anyone physical fitness like I got you, that's my jam.

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Jenn Pike

But I didn't understand the depth underneath that. So in 2001, I went back to school again and studied nutrition from a more holistic lens and view, because the nutrition I had taught was in school was like Canada's Food guide. It was not very applicable. It was definitely not holistic or functional. And then that drove me into, I need to understand more about blood chemistry.

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Jenn Pike

And, you know, and you just like you're in this industry, Jackson, like, you understand it. It's everything you learn in every client you work with. Every client. For me, every woman was a new class.

00:05:20:05 - 00:05:20:15

Dr. Jaclyn Smeaton

Yeah.

00:05:20:16 - 00:05:39:02

Jenn Pike

I was like, I need to dive deeper and learn more. And, you know, and eventually, like, well, 12 years ago, it's what led me to actually discovering DUTCH as a new tool and a lens as to how I can support clients. So my whole mission now is helping to teach women what I think we should have known about our bodies all along.

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Jenn Pike

I really do believe the epidemic of health issues we have for women currently right now, especially in perimenopause and beyond, is because our generation was not empowered and taught what was going to happen. As a preteen, a teen, your 20s, your 30s, post babies, and yeah, so that's just that's how I got to where I am today.

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Dr. Jaclyn Smeaton

It's funny, I actually had this thought, like in the shower this week where I thought, I have an eight year old daughter, I have four boys and one girl. And I thought to myself, I will ensure I'm like, when's the right time to talk to her about her period? But I will make sure she knows what's coming and what's going to happen before.

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Dr. Jaclyn Smeaton

She's surprised with that because I thought about I don't think my mom ever talked to me about that. And I think, I mean, that's like the very beginning of your reproductive years. But you're right. We never really talked about or learned about fertility, reproductive health, perimenopause, menopause. And we're seeing this kind of push. Now we're finally starting to talk about perimenopause and menopausal women in their 30s, which is like, goodness, that conversation's opening up.

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Dr. Jaclyn Smeaton

Yeah.

00:06:39:11 - 00:06:56:15

Jenn Pike

Now it's like the opposite end of the spectrum where we're drinking from the firehose. And now that every day a woman is just now so confused, right. Because you're trying to meet your body today with, like, all the things that you wish you knew, you know, yesterday in the last ten, 15 years. So I have two kids as well.

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Jenn Pike

My oldest is my daughter, and she's going to be 20. And, you know, I was fortunate when I was growing up, my oldest sister was 12 years older than me, so I was very naturally exposed. A lot of the conversations I was reading Taking Charge of Your Fertility by Tony Wyche there when I was book, you know, at 17.

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Dr. Jaclyn Smeaton

So it's like them.

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Jenn Pike

That also really helped me to frame it where I remember being, you know, 23, 24 training women in their 40s and asking, why do I know more about their body than they do? You know? And it's like.

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Dr. Jaclyn Smeaton

Yeah, there's not a good answer to that. I think there's been just so much, I don't wanna say shame. I don't know if I would say if I would call it shame, but just like lack of awareness, lack of open dialog. Yes. And, almost a fear to even broach the subject. And that wall, I mean, certainly it's come down at this point, which I think is great.

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Jenn Pike

Yeah.

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Dr. Jaclyn Smeaton

Well, I love that.

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Jenn Pike

Bridge into this conversation today of how all how does all this translate into like how you do move your body and exercising care of yourself.

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Dr. Jaclyn Smeaton

Right? I mean, that's a really great place to start is I think, like if I think back to the beginning of your career, the goals women set when they started to work with you, I imagine they're different than what women say to you today in a lot of ways. But like, what's that experience been like?

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Jenn Pike

Yeah, I mean, back then it was very much that was the esthetic, I want to weigh this much. I want to look this way. I do not want to get bulky because when I was, you know, in the gym era, when I started to get into in the late 90s, early 2000, there was a dedicated women's section of the gym.

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Jenn Pike

This is where the women train. Very ballet.

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Dr. Jaclyn Smeaton

Yeah I.

00:08:31:04 - 00:08:47:04

Jenn Pike

Recall yeah. And, you know, if you could find a set of fifteens, you're like, we struck gold. And I was always bringing the women into like, I'm like, let's go into the real gym, like LED. Let's go on over there. And so it was very esthetic then I want to look like this, but not like this. I want to be toned.

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Jenn Pike

I don't want to be bulky. So there was a lot of, reeducation that had to happen. Nowadays women are like, look, I still want to look good. I want to feel good, but I want to feel strong. I my body is changing and my composition in ways that I do not recognize. I don't really feel like I know who I am anymore, and the languaging has changed.

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Jenn Pike

So back then it was very just like goal specific driven. Now it's more I feel like I'm broken or something is broken inside. Like the programing is not lining up with the results. I feel like I'm doing everything and nothing is working. As we're back in the day, women's everything was cardio, it was cardio, it was aerobics. So they weren't, you know, what they were saying back then was I'm open to exploring something new.

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Jenn Pike

Today's woman, she's explored everything she's done, all the classes. She's recovering from being a cardio bunny. She's in the gym lifting weights, but she's exhausted and she's describing herself as this wired but tired woman. So I used to have to encourage women to actually, like, do a little bit more. And now I'm like, can we pull your more back?

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Dr. Jaclyn Smeaton

I found the same thing funny enough, because I worked with fertility clients and patients predominantly for most of my career. And there was the same thing when I first started in practice. I was like, let's get some movement in your life. And then it got

to the point where it was like, all right, we can't be doing CrossFit five days a week.

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Dr. Jaclyn Smeaton

And like under eating and in a cut and trying to get pregnant all at the same time, I've seen that same thing. It's just very interesting. Let's start there. Like a lot of women feel kind of confused and frustrated because they finally are engaging in this healthful activity of exercise. They're watching what they eat, maybe eating less, but then they're feeling like more inflamed, more tired.

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Dr. Jaclyn Smeaton

They're getting sick more often, like what's usually happening beneath the surface. That's contributing to that pattern.

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Jenn Pike

I think, honestly, the number one thing is most women don't realize that they their life is a marathon and that they actually have way more energetic output physically, mentally, and emotionally than an online macros calculator can assume for. And so if they go in and put in simple metrics like I'm this age, I'm this height and this weight, this is how active I am.

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Jenn Pike

And you know, an online calculator spits out, okay, well, based on your values, this is your basal metabolic rate. This is how many calories a day break your calories up into. There's many grams of micro or macros for protein, fat, and carbs. It's not accounting for this woman having five children running her business, looking after her aging parents, the underlying stress that she's not addressing and that's going on.

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Jenn Pike

And so we might be feeding, you know, a visual body, but we're not feeding the body that has to be able to perform and recover and then go build. So most women are still approaching how they nourish their body and their exercise in a deficit mentality. I'm going to do more than I consume, right? I'm going to burn more than I take in, and therefore I should achieve X result without understanding you're actually already depleted.

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Jenn Pike

So this isn't a game of subtraction. This is about addition. We need to actually bring more nutrients into your body. We need to probably bring your caloric load up to at least maintenance, and stay there long enough for your body to feel safe for a response to start to happen.

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Dr. Jaclyn Smeaton

Yeah. Talk a little bit more about that because I know like when women, a lot of women eat in a deficit for years like prolonged periods of time and that can have some metabolic consequences. And I know that from my minimal exercise physiology knowledge that really you'd want to be cycling that like sometimes in a feast mode, sometimes that maintenance, sometimes in a deficit.

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Dr. Jaclyn Smeaton

And I imagine that can be hard for women who are not at their goal yet to like, put it on pause and eat it. Maintenance, you know, can you talk about what that means and like a little bit about the physiology behind that?

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Jenn Pike

So if we're if we have been stuck in this chronic deficit, under eating, under nourishing or a lot of all or nothing mentality and has women like we're incredible multitaskers. So we like to double dip, we like to eat less and fast, and then we like to eat less fast, but then move our body more. So we always think, well, if this works and this works, how would I put those two things together?

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Jenn Pike

And I'll get double the results. And for some women, they may see results in the beginning if they have potentially been, you know, snacking too often over eating in different ways. But how I like to approach it with women is actually for the first 5 or 7 days, I really just need you to track your habits. The best approach we're going to create for you, the individual, is we have to study your personal habits.

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Jenn Pike

So even before we go plug anything into a calculator, can you track everything you're eating? You're drinking, licking off of a spoon, your kid's leftovers. Like the whole let's get the full story, track it for 5 to 7 days. Beautiful. Now I actually have some data now. Now I have your personal data. I know what your meals are made up of.

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Jenn Pike

I know if you're the kind of woman where you your first meal of the day is coffee and then you don't really eat much of your food until later in the day, and most of your calories come in in the evening. I know if you're the opposite. So now I actually have more to go off of, and there could be a lot less that has to be tweaked than what you realize.

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Jenn Pike

Maybe you are actually getting in enough calories in the right balance of macronutrients, but we need to structure it. We need to do the timing around your training, the timing around your meetings, the timing around when your kids get home. And so that's it. So for me, we're doing a little bit of like research in the beginning to actually develop the best protocol.

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Jenn Pike

Most women aren't patient enough to do that or stick with it. So I find for a lot of us, we stop like right before the magic was about to happen, because it gets boring, it gets mundane. You may not be seeing things drop off the way that you want them to, and that our brain thinks, oh, I'm failing.

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Jenn Pike

This isn't working. I'm not doing it right. But for a woman's physiology, the way you actually want to assess this is is your sleep improving? How are your bowels in your elimination? What's your mood like? Like are you actually nicer to be around?

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Dr. Jaclyn Smeaton

Ask your friends.

00:15:08:02 - 00:15:43:17

Jenn Pike

Yeah, yeah. Ask your friends. Ask your partner. Are you losing less hair? Right. Like this is that, you know, do you wake up in the morning with a little bit more pep in your step, as opposed to a dependency on more coffee, more sugar, a pre-workout, a stimulant? So it is. I said this at the beginning. There's a lot of like, we have to unlearn in order to really understand what's needed moving forward, because how the body will adapt to that woman who is under eating over fasting, always choosing the harder path is she will have reduced metabolic flexibility.

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Jenn Pike

She will have dysregulated cortisol, which means like her adrenals. Ability to be able to respond and manage to stress is not going to be as fabulous. It'll have a direct impact on her thyroid, a direct impact on her, her very and reserve, and a direct impact on her body's ability to build muscle. So there's a lot.

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Dr. Jaclyn Smeaton

I love everything that you're saying there. And I think that the, the focus around like adding is so impactful. And, you know, I see the same patterns. It's so kind concerning really concerning because it's like we need to shift and have food be thought about as fuel for our amazing bodies and like, what's the best gasoline you can put in there?

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Dr. Jaclyn Smeaton

The highest octane you can put in there? And I also love that you're focusing on those other modes of biofeedback, because weight change is the last thing to happen, especially when you come in as that like frazzled, stressed out woman with poor metabolism because you've dieted or you've under eaten like so. Yeah, looking at those earlier tools that tell you you're on the right path and really focusing on that rather than weight or body change.

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Dr. Jaclyn Smeaton

Yeah. It's huge. Especially, you know, when you're looking at inflammation coming down and stress being reduced first to kind of be that unlock of the puzzle that women are dealing with.

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Jenn Pike

Yeah.

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Dr. Jaclyn Smeaton

Can you talk a little bit more about stress and the role that stress plays in, like making women feel like their bodies working against them? And also maybe inflammation and tied into that.

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Jenn Pike

Well, you know, I think this whole thing of feeling like our body is working against us is that your body is actually doing exactly what it's meant to do, which is protect you. We just don't like the way in which it's doing it, because it's it's slowing us down on purpose. It is producing inflammation, which a lot of women when you talk about inflammation.

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Jenn Pike

I don't have any inflammation because they think about it like swelling, you know, pain. And sometimes that's how it'll show up. But your mood can be inflamed, your skin can be inflamed, your gut can be inflamed, your bowels can be inflamed, your marriage could be inflamed. You're like relationship to self, your ability to respond to stress, like anything that feels out of alignment, stressful, anxious, like that is inflammation.

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Jenn Pike

And so I think it's when we can like even change the frame of the way that we look at it. It's like, oh, maybe my body actually isn't managing as well as I thought. And you know, it's like that's feedback. That's not a flaw. So inflammation is not something that we go, well, just tell me the supplement to get rid of that information or tell me the medication.

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Jenn Pike

Let's just like thump it down, get it out there. There is a model that that's what that would be is like, oh, you've got inflammation. Take this. Let's get rid of it. The problem

is, is if we just keep trying to get rid of the signal, we're not understanding the messenger. And like really like where is this coming from?

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Jenn Pike

Why why am I so tired? Why do I have brain fog all the time? Why did I never have an issue holding on to weight in my stomach? And now I'm like, what? What is going on in here? So it's getting more curious and asking the questions and then working with people who can provide more insight, provide functional Testing, help you to see that chemistry in your own body.

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Jenn Pike

Because when you start to see it and someone asks you different questions and they can spend time with you going through it, you're like, oh, okay, I see it. Like, I get it now.

00:19:06:10 - 00:19:20:02

Dr. Jaclyn Smeaton

Now, when you're doing that Testing, you mentioned that earlier. What are the patterns or the things that you see that go out of whack that you have correlated with like stalled muscle gain, increased cravings, feeling fatigued rather than energized by workouts, etc.?

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Jenn Pike

I'd say when it comes to when we're looking at like the cortisol patterning in the body, that's something that comes to mind first, which is, I'll see one of two patterns. The first is like flatlined. So very low resiliency, like, you know, like they're it's not that they don't have adrenal fatigue. They're still producing cortisol. The way in which they manage it is dysregulated.

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Jenn Pike

And they're eating it out like it's small amounts. They do not have enough that the body's required. So you see they're kind of hugging the floor. And if you ask them, you know, like how do you feel at the end of the day? Like they're like, I like I just want to lie on the ground. So they're the way they describe themselves.

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Jenn Pike

When I get a client's results back, I don't jump into explaining their results right away. I'll just say, I have a couple questions before we go through, and I'll ask very intentional questions, like when you are at your most tired, what is your body really craving? And oftentimes they'll say things like, I just want to stay in bed.

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Jenn Pike

I just want to lie on the floor. And I'm like, it's 100% what I'm seeing. And so that's one pattern of just like, they can get up and they can go, but it's because they have to the kids need them, their job needs them. They got to get up and go. The other is elevated nighttime cortisol. And so they might actually do pretty well throughout the day.

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Jenn Pike

And then coming into like the time when either the kids would be coming through the door, activities are happening at night, last meeting of the day. And then you just see they are riding high. And then they'll also they say things like, I'm so physically tired, but I cannot fall asleep, right. That can point to it. And then in the morning they there's no get up and go.

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Jenn Pike

So they have very low cortisol awakening response. And then we'll see them, you know, kind of spike as they come into the afternoon. And that's always that woman where I'm like, tell me what you have to do to get up in the morning. And if they're like, oh my God, I use five times. I have clients that are literally like the coffee makers in my bathroom, and I just, like, find my way to the bathroom and push on.

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Jenn Pike

And then once I smell it and I like, then I start to feel like I, you know, come back to life. So yeah, I'd say, I'd say those are things now, sex hormone pattern wise. Oftentimes I will see poor estrogen clearance. So I see a lot of like gut dysregulation in this woman that we're, you know, we're talking about as well.

00:21:37:13 - 00:21:59:07

Jenn Pike

So gas bloating you know irregular kind of bowel activity sometimes she's good average time. She's more constipated. You know, so estrogen clearance, the ability for her body to be able to, to manage that. Not fantastic. And that also will match up with some of the symptoms, like moodiness, late luteal like. I feel like a different person exacerbated PMS.

00:21:59:07 - 00:22:24:14

Jenn Pike

My boobs are so sore my skin's breaking out like I'm a teenager, but I'm 45. Like, what's going on? Progesterone is definitely starting to ride lower. Definitely. We'll see that. And androgen signaling. So DHEA production in this woman we're talking about I typically see it's on the lower end. So it's like if we look upstream everything is actually already sitting in a deficient picture.

00:22:24:20 - 00:22:30:22

Jenn Pike

And now she thinks the answer to the deficiency is deficit.

00:22:31:00 - 00:22:35:09

Dr. Jaclyn Smeaton

That's a really fair point that you're making right there.

00:22:35:11 - 00:22:38:22

DUTCH Podcast

We'll be right back with more.

00:22:39:00 - 00:23:06:18

DUTCH Podcast

If you're already running DUTCH Tests in your practice or thinking about it, there's never been a better time to become an official DUTCH provider. Why? Because we go beyond lab Testing. Our provider community gets exclusive access to clinical education. In-depth report interpretation training, monthly case reviews, and one on one clinical support. Whether you're just getting started or looking to sharpen your functional hormone expertise, we give you the tools to grow.

00:23:06:20 - 00:23:14:16

DUTCH Podcast

Join thousands of providers already making a difference. Visit [DUTCH Test.Com](https://DUTCHTest.Com) today.

00:23:14:18 - 00:23:18:22

DUTCH Podcast

Welcome back to the DUTCH podcast.

00:23:19:00 - 00:23:39:05

Dr. Jaclyn Smeaton

So I want to kind of bring this back. And this is relevant to cortisol too. But we tend to see these like compensation mechanisms. And I love that you framed it up that this is not your body failing. It's your body winning in a harsh environment. Let me just reframe it with those words. When we're in a situation that is not ideal or optimal for our body, it adapts.

00:23:39:05 - 00:23:56:04

Dr. Jaclyn Smeaton

It constantly adapts in order to try, like you said, like to slow you down. That's what fatigue does, is to tell you you don't have the energy reserves to do these things. And this is relevant with cortisol too, because we see this on labs too, where you have early changes. Yeah. And then if you do nothing it gets worse and worse and worse.

00:23:56:04 - 00:24:11:04

Dr. Jaclyn Smeaton

And it's like your body starts with a whisper or a little tap on the shoulder. And then if you don't, that's those early signs of something. These are shift. And then we don't listen to it. That gets louder and louder becomes autoimmune disease. It becomes, you know, type two diabetes. It becomes physical pain if it's a recovery issue.

00:24:11:06 - 00:24:30:22

Dr. Jaclyn Smeaton

And I think that's really interesting when we see that with cortisol, because we see things like cortisol metabolism shifts. Yeah. Which can shift thyroid function. You know that relationship with thyroid. And you know, you mentioned some of the patterns you see in the diurnal curve. Like those things are important to look at early. I love that you're looking at those things and thinking about that.

00:24:30:22 - 00:24:42:13

Dr. Jaclyn Smeaton

And I just want to tie those points together. Because if you are doing a Test and you're not the worst of the worst, congratulations, fix it now, you know, fix it now. Fix it early.

00:24:42:15 - 00:25:00:18

Jenn Pike

Well, and the body doesn't collapse overnight. We don't see that happen in labs overnight. This is like this is the body has been compensating and it's been trying to hold you together for a very long time. And you've been doing a great job because we can do that for periods of time. But this is not our body, is not this by design.

00:25:00:18 - 00:25:20:08

Jenn Pike

We are not meant to be running away or running towards something all the freaking time. And as a woman, especially a woman of today's day and age, you know, our mothers wish they had the audacity and courage to be able to be the kind of women they are. They could have the family pull up a seat at the table, run the business, you know, create the empire and the legacy.

00:25:20:08 - 00:25:45:03

Jenn Pike

And that's all awesome. But we're doing that on top of the expectation of a perfect home. Perfect wife, perfect life. Look amazing. Don't look like you're aging. What the actual f that is, like way too much. That is too much for the average person, let alone, you know, any of us. Like anyone who's listening to this, you are either a practitioner or you are a highly educated woman.

00:25:45:05 - 00:26:09:06

Jenn Pike

Who is that woman who's craving more? And it's a slippery slope when we crave more because we have to be intentional about it, the craving of the more could be pulling us more and more away from how good we could actually feel. So when we start to see a lot of these compensatory patterns, I do a lot of cross analysis looking at DUTCH and the most common Test that we run is the DUTCH complete.

00:26:09:06 - 00:26:11:20

Jenn Pike

I think that's probably fair for most practitioners.

00:26:11:20 - 00:26:16:08

Dr. Jaclyn Smeaton

Yeah, that's our most our most ordered Test. About 70% for sure.

00:26:16:08 - 00:26:35:06

Jenn Pike

Yeah, yeah. And and what's been awesome is like I've been doing it for so long, I've been able to see how it's improved and improved over time and just the, the, the way it's evaluated and explained. But I look at it a lot with functional blood chemistry. I mean, you talked about thyroid to me. This woman that we've just been describing, this is the birthplace of Hashimoto's.

00:26:35:06 - 00:26:59:01

Jenn Pike

It's not that it starts in the gut. It actually starts upstream. It starts with that nervous system. As a woman that has to dis regulate the normal pattern of safety and being nourished enough in that. And now there's a downstream effect. So that woman who, you know, she keeps being told that it's just because your iron's low. I might, but is that the whole picture?

00:26:59:03 - 00:27:34:03

Jenn Pike

Like, can we look a little deeper under that? And if the iron's low, well, what's pulling on that? You know, if your adrenals aren't doing well and therefore your thyroid is not doing well and your system isn't feeling safe as a whole, well, that's going to impact your body's ability to absorb and uptake and assimilate all nutrients, including your iron, your minerals as a whole, your body's ability to convert your thyroid hormones into the usable metabolic kind that's going to give you your brain power back, and you're cognitive function, you know, support stimulating and regulating your blood sugar health.

00:27:34:03 - 00:28:02:12

Jenn Pike

Like there's so many layers that are within that. And I think we get stuck in this sympathetic dominance. Like we actually don't know how to get into recovery mode because as a lot of women, you know, I identified like this for many years, my worth was attached to my productivity. If I wasn't being productive, if I wasn't creating, if I wasn't crushing it, you know, in my career, well, then who was I?

00:28:02:14 - 00:28:23:23

Dr. Jaclyn Smeaton

I'm now, this is so interesting to me because you come from like an exercise

performance background. And, and one of the things that I've come to learn as I've just engage more and learn more on this topic, is the importance of recovery for physical health like your elite athletes? Like maybe share a little bit for our listeners. They might have really intense workouts, but what's their rest routine like?

00:28:23:23 - 00:28:44:10

Dr. Jaclyn Smeaton

It's prescribed from what I understand. Like, can you share a little bit of the insight there? And because I see that being related to our, you know, women who are overtraining and under eating one, that that could have physical manifestations. But what you're bringing up right now is also just recovery from life, from cognitive effort, from the juggling that we handle.

00:28:44:10 - 00:28:47:01

Dr. Jaclyn Smeaton

And it seems like they'd be really connected.

00:28:47:03 - 00:29:05:16

Jenn Pike

Their recovery is massive. And like when I think back to my days of working with professional athletes, the team I'm talking about, their support team was the recovery team. It wasn't the performance team, the performance team like going out. So doing your workout, doing your training, doing the prescribed whatever it is, that's the stimulus and the catalyst for change.

00:29:05:16 - 00:29:27:17

Jenn Pike

It's not where the change happens. So you have to eat to be able to perform. You go out, you do the hard work. You when you are exercising, you are literally creating stress. You are tearing muscle fibers down. You are producing inflammation and cytokines on purpose. So we need to prepare the body. This is why women always doing fasted workouts.

00:29:27:17 - 00:29:52:07

Jenn Pike

If your goal is to build muscle and power, probably not the best approach. You should have something, even if it is like a half a banana and some nut butter, or like a scoop of protein powder. You know, in something where there's just like a little bit of some glucose so we can get some stored glycogen in there, a little bit of protein, just

enough so that you, you know, you've got that support and then the training, you want to go in and you want to train to a certain intensity.

00:29:52:08 - 00:30:11:06

Jenn Pike

You're not leaving an imprint of your sweaty body on the ground. It doesn't always have to be that hard, but it's enough where you feel like you hit a level of training fatigue and healthy failure after you have to go feed the body that you just stressed out and that you inflamed. So you give your body the appropriate nutrition to go in.

00:30:11:06 - 00:30:30:23

Jenn Pike

And now calm that down. To be able to actually go into the actin and the myosin in the muscle repair build, come back stronger enough carbohydrates to go build the belly of the muscle, and then you have to do the things like sleep so that not only your nervous system, but that lymphatic system in the brain get supported.

00:30:31:05 - 00:30:54:11

Jenn Pike

You need to supplement. You need to, you know, mobility work like that is the thing. So all of their team, it was the chiropractors, the osteopaths, it was there was Reiki practitioners that were on the floor in the space. It was all of those things. That really is what allowed them to continue to show up at an elite level.

00:30:54:12 - 00:31:16:04

Dr. Jaclyn Smeaton

It's it is amazing to to just understand the level of intention that goes into that recovery phase. If we were to bring that into women's lives, just generally with recovery like recovery from stress, recovery from long days at work, lack of sleep, all of those things, what are the ties that kind of bind that together? Like what you're we do like what should women be doing there.

00:31:16:05 - 00:31:53:00

Jenn Pike

Yeah, because that's what I just described is not going to be our reality. We don't like finish our workout and be like, you know, where's my fluffer? Where's he going to like, you know, so the reality is, you know, it is your nutrition is so important. And this doesn't have to be complicated. We don't have to be making gourmet meals and having, you know, these expansive recipes very simply, where is your protein, your

carbohydrate, after your training to go in and replenish that, making sure that you are eating enough throughout the day and that you're not going longer.

00:31:53:00 - 00:32:16:14

Jenn Pike

I find with women in our practice, three and a half to four hours is the sweet spot, so they're waking up and they're, you know, having a little pre-workout something. Then they're having their post-workout first main meal, then probably three and a half to four hours later they're having lunch. We find our community does really well with an afternoon snack, typically somewhere in around 330 4:00, so that we are helping to support and stabilize blood sugar.

00:32:16:18 - 00:32:39:05

Jenn Pike

And then they have an incredible dinner and meal that is supporting the right, the right neurotransmitters for sleep and recovery. And then that's it. So for a woman listening, ground level is like start to actually really record what it is you're consuming so you can see for yourself, is this enough calories because 1400 calories isn't going to cut it, you know, do you need 2500 calories?

00:32:39:07 - 00:33:01:04

Jenn Pike

Probably not. Based on your goals, but let's at least understand what's going on. And then instead of thinking like you have to get 120g of protein in a day or 150g of carbohydrates, you could make it a little easier for yourself by thinking meal to meal. So it's like maybe in the morning it's like, can you get 30g of protein and like 30g of carbs?

00:33:01:04 - 00:33:27:15

Jenn Pike

Could we just start with a 1 to 1 ratio? How do you feel after that? My guess, because I see this every day in practice. You're going to tell me I don't have the same cravings I used to have. I actually feel satiated. This actually feels like a lot of food I eat. And these are the types of things like I have a, course I'm teaching right now that's all about metabolic repair, and every day in our, community chat, this is what they're saying.

00:33:27:15 - 00:33:34:23

Jenn Pike

Like, oh my gosh, this feels like a lot of food. And then a week in there, like, I need more food now.

00:33:35:01 - 00:33:36:12

Dr. Jaclyn Smeaton

That's a great sign too.

00:33:36:15 - 00:33:53:16

Jenn Pike

Yeah, it's a really good sign. And then the recovery of sleep, you know, sleep is the one. It's the supplement we don't have in a bottle. Because if we did, you know, we'd all be healed. Sleep is the medicine. So. And if you have trouble sleeping, because this is what a lot of women will say is like, you know, thank you, Captain Obvious.

00:33:53:16 - 00:34:18:18

Jenn Pike

Like, I know I need sleep, I'm trying, but I can't fall asleep or I'm waking in the middle of the night. This is another reason why I love the DUTCH Test so much is this gives us some additional data to understand maybe why that's happening. We look at melatonin you know production that cortisol curve. But also then we can give very specific guidelines to help you start to get more rest.

00:34:18:18 - 00:34:42:02

Jenn Pike

So maybe it's not deeper sleep you're getting, but can we get you more rest. There is a difference. So I like to get a more rested woman in the beginning and help that woman as she becomes more rested, to then be able to become better slept and then wake up with more energy. So I think we're just, you know, we're a society that's like, just give me the melatonin, give me the valerian, give me that.

00:34:42:04 - 00:35:02:01

Jenn Pike

Give me more progesterone. Just like, knock me out. Give me the tranquilizer. And I'm like, if you're taking those things and you're not getting the response, then we haven't actually pinned the tail where it needed to be on on the donkey per se. Right. Like, we may be getting close, but there might be some other support that's needed.

00:35:02:03 - 00:35:29:11

Dr. Jaclyn Smeaton

Well, I think that's the right approach, really, because what we see is when you take like a tranquilizer, sedative, type of supplement or medication, we don't see better recovery overnight. You don't see better quality sleep overnight. You might get more hours logged, but you're not waking up feeling refreshed and like if you use any kind of metric tracking data or a ring watch or whatever, what you see is that that is not producing the same impact that you'd expect it to those hours.

00:35:29:11 - 00:35:51:18

Dr. Jaclyn Smeaton

So it's really interesting, I think that that focusing on more rested as a first strategy, it's probably very root cause impactful, you know, like what are some of the things you're recommending like walks or nature meditation or other things that are specific that you would recommend for that? For people that are like, sleep is my optimum goal, but let me start with rest.

00:35:51:20 - 00:36:09:17

Jenn Pike

Yeah. So I mean, a good sleep at night starts in the morning. We all know this. So it is like how you eat stable blood sugar is going to help with sleep, getting fresh air, all of those things like. But your relationship to light is massive. So one of the ways we support women with Rest is actually getting that circadian patterning back on line.

00:36:09:17 - 00:36:38:11

Jenn Pike

So no big lights at night, no big lights. Everything is soft. When you are getting ready for bed, like, literally, I want you to, like, have a makeout session on your face. Like, take the time massaging your cleanser and take the time, you know, most women are, like, throwing water at their face and catching it, doing a quick thing in that, and then like hopping into bed, get in there earlier, start, watch one less show, let the pan stay dirty, get in there earlier.

00:36:38:11 - 00:36:57:23

Jenn Pike

Take the time to like take care of yourself. You know, in the low lighting. Put your oils on. Do the thing. Get into bed. Allow yourself to close your eyes. Don't touch your phone like I'm telling you have to meditate. You just like breathe for a moment. Can you breathe for like ten breaths and really do the thing that's going to calm you down?

00:36:57:23 - 00:37:13:01

Jenn Pike

Think about what you would tell your child who can't sleep. Would you go? Yeah. No problem. But, I want you to go have this sugary drink which, like, could be not for the kid, but as a woman. Wine. I want you to have the sugar at night. Have quite a few snacks before you get ready for bed.

00:37:13:03 - 00:37:33:16

Jenn Pike

Watch TV until your eyes are burning and you actually might fall asleep on the couch first. That's fine. Just get up and then go in. Barely brush your teeth, launch yourself into bed, wear things that are going to make you hot in the middle of the night. And before you go to sleep, scroll your phone until your eyes keep burning and then just like, throw that phone down next and then you're going to have a great sleep.

00:37:33:18 - 00:37:37:15

Jenn Pike

Never. You say that somewhere else. But we do that.

00:37:37:21 - 00:37:46:18

Dr. Jaclyn Smeaton

We do, we do. We're surprised. And then women are surprised at the outcome, you know. So yeah, absolutely. We got to treat ourselves like babies.

00:37:46:20 - 00:38:15:04

Jenn Pike

Yes. Because we need to be nurtured. And this is the hard thing, I think as women is that we are the nurturers and we're waiting for someone or something or a program or to be the thing that nurtures us. And it's like, no, like that. That is our responsibility and it's actually a gift. And if we stopped looking at it like it's a job and we look at it like, what a gift that I actually get to take care of myself in the way that I need to be taking care of.

00:38:15:06 - 00:38:36:16

Dr. Jaclyn Smeaton

Yeah, a lot of that is. And sometimes it's showing up for yourself in ways no one ever has before. Like if you've been if that type of care has been modeled for you in your life by a partner, by a parent. Yeah, you're in the lucky few. You know, I think a lot of women have to curate that for themselves and then fight off the pressure to be doing

other things for other people oftentimes as well.

00:38:36:18 - 00:38:57:18

Jenn Pike

But I think that's more of what we actually need to see on social right now instead of like, here's my seven point nighttime routine. Like, you don't have to do seven different things to go to bed. It could be one thing that just actually makes you feel good and supported and drops and gets you out of that sympathetic fight or flight into that parasympathetic calm and rest and all of these things.

00:38:58:00 - 00:39:23:13

Jenn Pike

Like in order for us to be able to build muscle, we actually have to have some reserves. We have to have that recovery. So the body has additional resources and material to now get at a fight or flight, get out of protecting our adiposity and laying down more visceral fat and more body fat and going, hey, we actually have enough on board here, and you're doing a great job taking care of us to go and build that muscle.

00:39:23:15 - 00:39:51:18

Dr. Jaclyn Smeaton

Yeah, absolutely. What I've really been, trying to, like, rekindle with what brought me joy when I was younger, too. Like, I do a lot of that as part of my night nighttime routine, because a lot of it is just replacing bad habits with things that are slightly better. So like reading a book or drawing or journaling, but instead of doomscrolling, you know, that would be one example, like trying to find those things that are quiet activities, but that bring you away from those light centered active.

00:39:51:18 - 00:39:56:18

Dr. Jaclyn Smeaton

I mean, we all love a good crime drama, but is that really what we should be doing right before bed?

00:39:56:20 - 00:40:02:00

Jenn Pike

When clients tell me that they watch, like crime dramas or they listen to the crime podcast.

00:40:02:00 - 00:40:02:18

Dr. Jaclyn Smeaton  
Documentary.

00:40:03:00 - 00:40:32:05

Jenn Pike

I'm like, okay, let's back it up for a second. I'm like, that's what's relaxing to you, right? We just I said it in regards to tracking food, but if we study our own personal habits, we can learn a lot. Like if our form of unwinding is being stuck in an adrenaline based energy where we keep the cortisol switch on, no wonder you're not getting good sleep, because you can't have two things happening at the same time.

00:40:32:08 - 00:40:50:04

Jenn Pike

You cannot have cortisol being stimulated and your body being like when you're listening to something or watching a show, it doesn't know that it's not you going through it. The reason you get so enthralled and you're like, oh my God, your pupils are dilating, your heart rate is up, you are producing more cortisol that we don't produce cortisol to go to bed.

00:40:50:06 - 00:41:05:02

Jenn Pike

We are supposed to get it into like a hum and a rhythm so that we can have, you know, the neurotransmitters that step in and hormones like melatonin that are like the moon's up now, my friends. And that that's melatonin is time to shine. So it is our habits.

00:41:05:04 - 00:41:21:00

Dr. Jaclyn Smeaton

Absolutely. So when women are in this state where they're not recovering, which I think a lot of women are, and this is persisting long term, can you talk a little bit about what other patterns you end up seeing emerge? You mentioned thyroid already, but what about reproductive hormones?

00:41:21:02 - 00:41:46:15

Jenn Pike

Oh yeah. I mean this is where I also find this woman. Like she will probably struggle more with PMS, potentially even Pmdd. Spotting irregular cycle activity and probably a little bit more feeling like perimenopause is really serving her a harder time. And then like, why is my friend over here going at the same age, going through the same stage

and she's essentially cruising through it?

00:41:46:17 - 00:42:15:11

Jenn Pike

So yeah, I mean, again, we're we're withdrawing from our bodies bank of support every day. And that's not, you know, only adrenals and thyroid. It's our estrogen. You know, production. It's our progesterone is our androgens. And so the you know your body's really smart. It'll go and borrow from here to try and support over there. And when I see in women that, you know, they're saying to me, I used to just get a period and it was red and I had my bleed.

00:42:15:11 - 00:42:36:03

Jenn Pike

And now I start a spot for a few days before my period. I've never had that before. My period used to be 28, 29 days, and I just had a period show up like 24 days into my cycle. That's not my norm. I never used to get, you know, symptoms or cramps and like, I'm so much more symptomatic now than I was in my teens and in my 20s.

00:42:36:05 - 00:42:52:20

Jenn Pike

And these are all these cues from the body that, you know, it's this thing right now where everyone thinks everything is perimenopause. And I'm like, maybe. And like it could be other things. It's not just all thrown under the rug of that.

00:42:52:22 - 00:43:05:16

Dr. Jaclyn Smeaton

Yeah. Okay. So when women are coming into you, what complaints around like training and general symptom picture would trigger for you? I should run across for this patient.

00:43:05:18 - 00:43:23:18

Jenn Pike

I can't perform the same way that I used to. Every time I try to do the workouts at the intensity I used, do I feel like I'm getting sick? I'm sore for a long time now. I feel like I'm actually gaining weight and I'm feeling puffier and inflamed. And then outside of that, it is, changes in the cycle.

00:43:23:18 - 00:43:41:11

Jenn Pike

My libido is like, non-existent. And they've just got some kind of new symptoms that are cropping up. That's what I'm going to be like. Why don't we look at a DUTCH Test and actually see what's going on? Depending on where she's at, I also might recommend doing the cycle mapping and actually get more than the 24 hour information.

00:43:41:13 - 00:43:58:09

Jenn Pike

And do that. And then in conjunction with that 100%, we're going to go and look at bloodwork. And oftentimes we'll look at gut and we may Test hair. But the DUTCH is really that's going to give me a lot of understanding of what's happening. Like your body's producing it. It's using it. And then what. So we look at production.

00:43:58:09 - 00:44:22:15

Jenn Pike

We look at how the body metabolizes and actually utilizes those hormones. That's what blood isn't showing us. Right. So it's like there is there's such a level of added bonus information that you glean when you look at a DUTCH Test. And to me the DUTCH is like the Test where we can throw it on the wall. And now we have the ability to ask different questions about some of the things we're seeing.

00:44:22:17 - 00:44:23:12

Jenn Pike

Yeah.

00:44:23:14 - 00:44:44:17

Dr. Jaclyn Smeaton

You've explained that so well and I think I mentioned earlier, like with cortisol, you see these other changes in the cell happen. First we see that's the same thing with type two diabetes. The first marker to change is not fasting blood glucose. It's fasting insulin. Right. That is a precursor. Oftentimes by years you see that creep up and up and up.

00:44:44:21 - 00:45:07:03

Dr. Jaclyn Smeaton

So we and I think that's one thing that's really kind of missed when it comes to reproductive hormones. By the time you see changes in the blood stream of reproductive hormone levels, the tissue changes are pretty profound because then the brain is listening to the cells of the body to what is released, and then it's

responding. And production is a it's a pattern of response really to the environment.

00:45:07:03 - 00:45:31:09

Dr. Jaclyn Smeaton

So I think, I mean, I love the way you explain that because with urine metabolites you're actually looking at the environment. So it's a little bit of an early like a leading indicator. If you can take that as a, you know, a a framework to think about it, it's like a leading indicator. And we see that too. We see changes in the patterns of estrogen metabolites, for example, early before we see changes in the hormone patterns that you could measure in serum.

00:45:31:09 - 00:45:42:13

Dr. Jaclyn Smeaton

So I love the way that you explain that. And I think sometimes for women who are not at a disease state yet, but they definitely don't feel like themselves, you can uncover why that's metabolites.

00:45:42:13 - 00:46:10:17

Jenn Pike

That's your greaTest time of opportunity. Yeah. It's when we're in the suboptimal, which means like you can still get by, you know, you you got a lot of good days, but the ones that don't feel good, you're like, oh, something's going on. And that's really the opportunity that we have to go a little bit deeper and do some of the foundational work and work with someone and get some of that added knowledge, because you want to get in front of this, like as you just explained it, what's happening on that cellular level?

00:46:10:23 - 00:46:26:11

Jenn Pike

This is what is informing. This is the feedback loop, right, of like what's informing the symptoms, how the body's going to respond to that. And we're so fortunate to be in a time now where we have the accessibility to this type of knowledge and information for our bodies.

00:46:26:13 - 00:46:52:14

Dr. Jaclyn Smeaton

Yeah, I couldn't agree more. So as we think about like providers who are listening to the podcast today, I mean, I'm loving that there's so much more information out there on things like mobility, recovery, rest. What do providers need to know about, like

nervous system recovery and how they can help their patients? Because I think one of the barriers to us implementing it is that we don't even know how to do it for ourselves, let alone how to coach someone else.

00:46:52:14 - 00:47:07:05

Dr. Jaclyn Smeaton

And I think that when it comes to like women providers, predominantly women serving women, you know, in the women's health field are working with hormones, even with men. Like, what do providers need to know about how they can better deliver this information, this type of care to providers.

00:47:07:09 - 00:47:24:22

Jenn Pike

When you're talking to your clients? Yes, we want to have women doing things that are going to build muscle like we want them strength training. We want them lifting weights. You all you. As a practitioner, I think part of your job is to be the permission slip for her that she can't be for herself right now. Give her permission to walk instead of running.

00:47:24:22 - 00:47:43:18

Jenn Pike

Give her permission to not wear the weighted vest when she's going for a walk. You know, give her permission to not have to listen to a podcast or book and just go, like, listen to yourself, you know, think about, like, clients we attract and work with. My whole thing for most women is like, we're going to get you to strength train 3 to 4 days a week.

00:47:43:19 - 00:48:10:23

Jenn Pike

But your form of that right now might need to be Pilates on the mat or on a reformer. Or maybe it's bar or maybe it's walking for a period of time. Like help her define what it is that she needs for herself, not just telling her, like, be the teacher, not the teller. That's the difference, right? So this is I think, the one of the things that I'm so grateful for as a practitioner, we have a relationship with our clients and that is a be a partner with her.

00:48:11:01 - 00:48:29:10

Jenn Pike

And so what does she love to do? If you have the client where they're everything is

hard, right? So like you tell her to go for a walk. She's like perfect. I just ordered the 30 pound walking bass. Plus I have ankle weights. I'm going to put on. No, take the weight off. You're already wearing a weighted vest in your life every day.

00:48:29:10 - 00:48:47:03

Jenn Pike

We don't need to strap a literal one on. Right. So those kind of things encourage her. You know she has a hard time winding down, get her to lie on the floor and just intuitively like, do some stretches and go have a bath. Go soak in the tub like you want to read your book. Beautiful. Go do it in the bath.

00:48:47:03 - 00:49:00:11

Jenn Pike

Put the magnesium. You're in a trouble taking it. Go put it in the tub. Right? So just paint this picture for her where it actually there's so much simplicity and ease in it and it brings a lot of peace into her body.

00:49:00:13 - 00:49:22:04

Dr. Jaclyn Smeaton

I love that it's beautiful like that ease and that, like, permission to seek out is. Yeah, God, we all need that. I'm going to write that one down. So you have so many programs serving women. We talked about them at the beginning of the podcast, introducing you like the Hormone Project and Ignite, and you have saying, do you have Perry and Menopause, projects.

00:49:22:04 - 00:49:33:17

Dr. Jaclyn Smeaton

You have so much going on. If you can transmit like one kernel of information for women, like what is it that you want to see shift and change for women? That kind of is a thread that motivates you with all these programs.

00:49:33:19 - 00:50:01:12

Jenn Pike

Honestly, you're holding so many more of the answers and solutions and you realize in your body, stop outsourcing everything to believing that someone else knows more than you do. Align yourself with people who will remind you of that. Even when they're teaching you and empowering you, and they're part of your support team, remember that you have the most brilliant gift we've ever been given, which is your body and all of the symptoms of all the ways in which it's talking to you.

00:50:01:12 - 00:50:37:00

Jenn Pike

That feels like a foreign language. These are actually this is trying to get your attention. And so what can you do for yourself to lean in? And I would say if you're looking at like any of the programs and things that we offer, sink is a great landing place for women because we, we, teach you what it is you've been taught to be healthy and strong and fit as a woman, and we give you an opportunity to actually do more with less, to be honest, like exercise in a way that in 35 to 40 minutes you are going to feel so strong and so fit and so fierce and not crushed.

00:50:37:02 - 00:50:52:17

Jenn Pike

You don't need a nap after you're going to move through your day. So I would just say peruse like Instagram is the best place to connect with me. You know Jen Pike here, what we've got going on. But honestly, ladies, trust your body. Trust her the first time she talks to you.

00:50:52:19 - 00:51:06:19

Dr. Jaclyn Smeaton

I love that. What a great place to end. Well, we'll put the link to your, Instagram in the show notes and also your website so people can get more information about you. But it's been a real journey, like just a great time having you on the pod today. So thank you so much. Done for coming.

00:51:06:21 - 00:51:09:07

Jenn Pike

Well, thanks for having me. I really enjoyed this chat.

00:51:09:09 - 00:51:30:08

Dr. Jaclyn Smeaton

Yeah me too. And for those of you who enjoyed this chat and want to learn more about hormones and, how you can support yourself as a busy practitioner, busy woman, I just want to remind you, we release a podcast episode every Tuesday, so stay tuned and subscribe so you can get all the laTest into your inbox. Thank you so much.

00:51:30:10 - 00:51:43:01

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