

Episode 175 Transcript

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Andrea Donksy

Only about a quarter women. A quarter of women see their doctor once and they get their answers. 75% of women are going to their doctor anywhere between 2 and 5 plus times. I've had women come back to me and say, Andrea, I'm on my like, 10th Doctor, and I still don't have the answers I'm looking for.

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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.

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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 there! Welcome to this week's episode of the DUTCH podcast. Now, if you've ever thought about the weird myriad of symptoms that comes your way in your 40s and 50s, thinking is this perimenopause?

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Dr. Jaclyn Smeaton

Things like phantom smells or your body odor changing, or a wide variety of things that you're thinking, God, this could this be related to my hormones? Today is your episode. My guest today surveyed over 20,000 women and has really built all this research out to better understand over 103 symptoms that are tied to the perimenopause and menopause transition.

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Dr. Jaclyn Smeaton

This conversation was a ton of fun, but also really importantly, full of tips that you can utilize on the lifestyle side. So if you're doing HRT or not, there's still so much

more that can be done during perimenopause and menopause to make sure that you're really maximizing your health and your lifespan, and all the good things that we want to feel in our life.

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Dr. Jaclyn Smeaton

So my guest today is Andrea Donsky and she turned her own rough perimenopause into her life's work. She's a registered holistic nutritionist with 26 years in health and wellness. She co-founded Naturally Savvy Media in 2007 and later morphs a menopause focused nutrition and supplement company. She has over 350,000 followers on TikTok who call her the menopause researcher. And like I said, she's surveyed more than 20,000 women and published findings in the journal menopause, documenting 103 distinct symptoms of this transition.

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Dr. Jaclyn Smeaton

She hosts the podcast Menopause Reimagined, and as the author of the bestselling Nourishing Menopause, which was published earlier this year. Really excited to get started with this conversation. Let's go ahead and get rolling. Well, Andrea, welcome and thank you so much for joining me today. I'm so excited for this conversation.

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Andrea Donksy

Well, thank you for having me. I'm so happy to be here.

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Dr. Jaclyn Smeaton

Now you have surveyed like I want to just start with this. You've surveyed more than 20,000 women, and you published your findings on the realities of perimenopause and menopause. This is really fascinating to me because we were just chatting before we jumped on that recording, that so many women experience these different nuances with perimenopause and menopause. So what first pulled you towards this kind of a large scale research versus like staying in a pure 1 to 1 nutrition type of practice?

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Andrea Donksy

Yeah, I mean, my own personal experience, because when I was going through perimenopause, I actually had no idea I was going through it. I was in

perimenopause for a total of 14 years, 11 of which I didn't know. So for 11 years I was asking questions to everyone around me. Do you feel this? Are you experiencing this? Like, why is this happening?

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Andrea Donksy

And a lot of the women back then, we weren't really talking about it and they were like, I don't know what you're talking about. So I thought, oh my gosh, I feel so alone. So I really turned to women online. I turned to the medical journals. I turned to anywhere I could actually gather information, and I relied on other women's experiences.

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Andrea Donksy

And when we started our TikTok page, when we started our company, Morpheus, we quickly grew a community of women who were like minded. And then I thought, okay, I have these women. Let's go and ask them what they're experiencing. And it just took off from our surveys and we have 15 of them on our website. We have I'll have ten published abstracts by the end of this year, which is really exciting.

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Andrea Donksy

And over 20,000 women, like you said, have answered our surveys. So as much as it's so important one on one work, what really drew me to it was being able was being able to look at patterns and then turning those patterns into data. And that data was such and such a large scale is hard to ignore.

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Dr. Jaclyn Smeaton

It really is hard to ignore it. I mean, just for listeners like Andrea's research, has documented more than 100 symptoms of perimenopause and menopause, like far beyond what we see frequently cited in published research, and found that, like a lot of women see providers over and over again multiple times before their symptoms are ever connected to a hormonal change, which is a really scary thing, but probably not surprising to people who are listening.

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Andrea Donksy

Yeah. So we have research called our doctor Visit survey, and women were telling us that about 40% of them are dismissed. So when they go to their doctor and they tell their doctor how they're feeling, they're being dismissed. And women have to see, like you said, only about a quarter women a quarter of women see their doctor once and they get their answers.

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Andrea Donksy

75% of women are going to their doctor anytime, anywhere between 2 and 5 plus times. I've had women come back to me and say, Andrea, I'm on like like 10th Doctor. And I still don't have the answers I'm looking for. So it's really important that health care providers understand what those symptoms are. So like you're saying, we have published research on the 103 plus symptoms and understanding what those symptoms are and providing that information to our health care providers will allow them or and enable them to have that education to say, oh, so if someone walks into their office and they're saying, okay, doc, I'm not feeling like I used to, I feel off, my

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Andrea Donksy

ears are super itchy. I've got B.O. in one or both armpits, like my vertigo is kind of, you know, I'm have vertigo. I never had it before. My anxiety's worse. Then doctors can start putting two and two together and saying, oh, okay, maybe. How old are you? Oh, you're over 35. Maybe. Let's start looking at something like perimenopause and menopause, of course, always ruling everything out, but at least having that conversation around hormones and what can be happening.

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Dr. Jaclyn Smeaton

I love that you mentioned that, like always ruling everything else, I think there's kind of, a pendulum swing, right where we used to really just ignore perimenopause and menopause and tell women know you're just getting older, right? This is how this is normal. This happens when you get older. But we're almost swinging to the other side of that.

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Dr. Jaclyn Smeaton

You know, pendulum swing right now where everything is being attributed to perimenopause and menopause. And I do worry about that with so much light

shined on this that we could be overlooking serious concerns. Like, you look at women who have painful periods that never have before. Like that requires a pretty substantial workup. Or you have, abnormal bleeding or something like that.

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Dr. Jaclyn Smeaton

These are things that we shouldn't just be chalking up to perimenopause and menopause without ruling out more serious or concerning things. So I love that you say that. I mean, I know I had.

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Andrea Donksy

I was just going to say like 100%. So another really good example are phantom smells. So phantom smells are very common in perimenopause and menopause. That was one of my first symptoms that I had that I didn't even know.

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Dr. Jaclyn Smeaton

Tell us more like what is the phantom smell for people who have no idea what that is? This is so.

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Andrea Donksy

Fascinating to me because like I said, it was one of my first symptoms. So a phantom smell is when you smell things that doesn't they don't actually exist in your immediate environment. So they're phantom. And we know I'll be published in this in December, which is very exciting, and that we know that the number one phantom smell for women in perimenopause and menopause is something burning.

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Andrea Donksy

So it could be cigaret smoke, campfire burning, electronics, something burning, burn coffee burn, toast. And to your point of always getting things checked out. Like if you go online and you look up phantom smells, what comes up is, oh my gosh, could it be a stroke? Could it be this, could it.

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Dr. Jaclyn Smeaton

Be like, so all this brain.

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Andrea Donksy

Trauma. Yeah. All these scary things. So always my mantra is always please go to your doctor, get every single symptom that is new or that you've never had before. That's exacerbated. Now that you're in this phase of life, always go get it checked out. Get that you know that clear, get the all clear. And then you can have the conversation of, well, maybe it's a perimenopause or menopause symptom and phantom smells being one of those really crucial ones where I've had friends call me and they're like, oh my gosh, Andrea, thank you for talking about phantom smells because she was on the beach and she smelled smoke and she's like, oh my gosh, what's happening

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Andrea Donksy

to me? So at least it was.

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Dr. Jaclyn Smeaton

Walking around like, I don't smell anything. Yeah.

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Andrea Donksy

Exactly. Like or gasoline is another really big one. Women will smell gasoline and they're like calling for the fire department to come in. And again, it's a phantom smell. So again, I always get things checked out. Of course.

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Dr. Jaclyn Smeaton

That's so fascinating. I mean, the phantom smells thing is, must have been just a surprising finding. What are the things like? You had over 100 symptoms through this transition. What are the things that, like most, surprised you when you really start to dig into that data?

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Andrea Donksy

So if we look at specific symptoms, we can talk about that. And then actually what some of the data showed. So the symptoms yes. Phantom smells definitely like

whoa what is this. Never had that before. Also knowing like tonight is vertigo worsens like anxiety exacerbated anxiety cold flashes like we always hear about hot flashes because it's anonymous. Actually, I just did a post on this on Instagram because it's synonymous with menopause.

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Andrea Donksy

But what's so interesting is that hot flashes just fell to the number 11th position, so it's not even in the top ten most common symptoms of perimenopause. And menopause at this moment. Right now, which we have over 1300 responses on our survey. So things like this where you're just like, oh, it's so we know we know hot flashes, we know sleep issues, we know moodiness, which are very common.

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Andrea Donksy

But something like hot flashes, not even in the top ten. That really. And it was number ten for a long time. So I would say that really surprised me. And then really.

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Dr. Jaclyn Smeaton

Understanding because menopause is like defined by hot flashes, like our whole management protocol is based around hot flashes.

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Andrea Donksy

Right. And it's not even like number ten or number 11, which was really interesting. And then other symptoms like itchy ears was a really big one. And that's something that a lot of women we may not, you know, again, it could be a lot of different things, but we may not associate itchy ears with menopause. But it's when estrogen is going lower.

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Andrea Donksy

It dries out the mucous membranes, including the mucous membranes in our ears. So a very common symptom. Yeah. Not something you will necessarily connect to period. Menopause.

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Dr. Jaclyn Smeaton

Now you said like armpit sweat or smell and one or both. Which makes me think both of those are things that came up.

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Andrea Donksy

Yeah. So a lot of women will say that their left side is way smellier than the right side. And it has to.

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Dr. Jaclyn Smeaton

Determine that.

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Andrea Donksy

I mean, it has it just the smell, I guess. You know, it's funny, when I was going through perimenopause, I remember I could only wear certain materials because other materials would literally. And I was wearing I was doubling up on my, on my deodorant because I'm like, what is happening? Because it's much more pungent when we go, like when it's our hormones are affecting it.

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Andrea Donksy

So it has to do with how our body is getting rid of things, and it has to do with like the flow and lymph and all that stuff. But yeah, women are like, my left is much stinkier than my right.

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Dr. Jaclyn Smeaton

It's funny because I remember when I was pregnant, I worried or I felt like I smelled so much worse, but everyone around me but like my husband was like, no, you don't, you're fine. Like you don't smell at all. And I think that was just like sensitivity to smells change as well with hormone changes. Do you know, for with the surveys that you did, is it more that the women could maybe be more sensitive to a smell, or are other people perceiving that as well?

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Andrea Donksy

No, definitely a lot. So heightened sensitivity is one of the things that women will say that they are hypersensitive. So even though so it may not be a phantom smell

because that doesn't actually exist. But someone will say, yes, I'm hypersensitive to smell. So everybody. And what's so fascinating to answer your go back to your question about like what fascinated me or what I you know, really what I found interesting about our research is that we all experience it differently.

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Andrea Donksy

So the way I go through menopause may not be the way you do and vice versa. And we all have our own unique experiences with our own unique symptoms that we're experiencing. So many of us are experiencing the symptoms. They say only about 13 to 15% of women don't. But I kind of challenge it. In my book. I talk about this because I think when we originally thought of what the symptoms are.

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Andrea Donksy

So if you look online anywhere, how many symptoms of menopause, you'll always see the same 34 that keep coming up. So if you're basing it on those 34, then I actually think the 13 to 15% is much less, because now we have that list of 100 and 303 plus that you may not even associate with perimenopause or menopause.

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Dr. Jaclyn Smeaton

That's really interesting. And I think you're right. Like no women experience it the same way. I was just telling you, like I'm texting my for my little text chat with my friends and everyone's, you know, perimenopausal. And they're all like talking about how they're experiencing differently. And we're talking they were talking about hot flashes and one was like, oh, mine start in my chest and go to my scalp.

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Dr. Jaclyn Smeaton

And the difference is like minor in my thighs. But nowhere else. Like, everyone had a different experience. And I was literally like, before I was getting ready to come on the podcast. My phone's like lighting up with this chat. And I'm like, oh, this is the perfect conversation to lead into because it is. It's so unique from person to person.

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Dr. Jaclyn Smeaton

Yeah, it really is. Now when we talk about like how someone can make sense of that, like when the symptoms don't match the classic list that they've heard about. What's that experience like for women?

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Andrea Donksy

So it goes back to and so for women themselves, they might feel confused. They might feel alone, they might not understand what's happening to their body. And then when they go to their health care provider and explain what's happening to them, and if their health care provider isn't up to date on the latest research of the 103 plus, they might dismiss them, they might gaslight them.

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Andrea Donksy

So it kind of becomes this vicious circle of who's getting helped, how are they getting treatment? Because at the end of the day, what we want for women now, and there are so many tools in our toolbox that women can get help with. We want women to get the treatment they need and that they deserve. So that's why I'm so passionate about the research that I'm doing and the education that I do.

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Andrea Donksy

Because when we like to quote Doctor Maya Angelou, who absolutely love when we know better, we do better. So we have to actually know first what those symptoms are so that we can help women so they can get the treatment that they need and deserve.

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Dr. Jaclyn Smeaton

Now you talk about like when women go to their doctors, they might not feel heard or they might get gaslit. What do you think like from a clinical training standpoint? Why do so many providers miss this? I mean, we feels like we talk about it all the time now, but still so many providers aren't making those connections for their patients.

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Andrea Donksy

Well, I think there's a lot of reasons. So like for providers who have been practicing for a really long time, they're very, very busy. They're seeing patients all the time.

They're probably doing research of their own in different areas that they may not be up to date on the current research that's available, because my data is fairly new.

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Andrea Donksy

We were published in 2024 on the signs and symptoms of menopause. So 2024 or 2025 and I'll again, I'll have another three published in 2026. So it's all newer. So if they're not looking at what that newer data is, that could be one of the reasons that they're not getting it. And then the education piece. Right. So staying on top of what the newest education is, and that's why I'm I always tell doctors, follow me, follow the read my book.

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Andrea Donksy

Like my book, I have so many people that gifted my book to their doctors and said, please read this book because this has the latest research and I approach it. I have everything covered in the book. I have an incredible, incredible doctors who talk about hormones. My lane is nutrition, lifestyle and supplements and research, so we cover it all.

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Andrea Donksy

And that's why having a book like mine really can make a difference, to help educate them on that broader perspective, so that they can help their patients and provide them with what they need.

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Dr. Jaclyn Smeaton

And for those of you listening, we do link to the book in the show notes. So if you want to take a look at Andrea's book, you can find that link there wherever you're streaming from now. So with this kind of let's call it the provider knowledge gap, this clinical knowledge gap, if you could pick one finding from your research that you just wish every provider knew, what would it be?

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Andrea Donksy

Definitely the list of the symptoms, I think like we're talking about like it's all in line with this conversation because when they know what that list is, the women come in to them, then they can provide them. They won't be dismissed as much as they are

now. And I'm hoping when they do have that education in that list of symptoms, then women won't have to go and jump from doctor to doctor to be able to find the help that they need, because right then and there, I mentioned before we have our toolbox, right?

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Andrea Donksy

So we've got hormones as an option for a lot of women. And we have nutrition license supplements. So all of those together provide this amazing toolbox that women don't have to suffer anymore. There are solutions now. And because we're talking about it more, it's so much more out there. So to me, that's what's so exciting about it. You can't even go onto social media now, at least my algorithm, of course, because I'm in the space constantly seeing things about perimenopause and menopause.

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Andrea Donksy

But I think back to when I was in my 30s and my 40s, and I didn't know. I only got my first hot flash at 47. So that was when it first clicked to me to think, oh wait, everything that I've been experiencing for the last 11 years since I had my third baby at 41, could be perimenopause like so.

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Andrea Donksy

Now we have that information sooner, so women are educated. They're going to their health care providers saying, okay, I think this could be a perimenopause symptom. Let's talk about it. So everything's changing in such a great way. And more education and knowledge and research is becoming available. So it's to me it's a very exciting time.

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Dr. Jaclyn Smeaton

Yeah, I completely agree. And just for listeners like we kind of have these reproductive stages, there's this straw criteria that was described that looks at how cycles tend to change over time for women during perimenopause and menopause. And it's unpredictable from a timing perspective. But the patterns are really similar where first we tend to see progesterone coming down.

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Dr. Jaclyn Smeaton

You don't you don't make as much progesterone per cycle. And sometimes you can actually make way more estrogen in a cycle than you did during your peak reproductive years, because your body's like pushing and pushing. Your brain's trying to signal your ovaries to like, make an egg. And sometimes it catches a good one. And there's this like massive hyper response.

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Dr. Jaclyn Smeaton

But you said we tend to see progesterone lower first, but estrogen sometimes can be even too high. And then you get these estrogen dominant type symptoms. That's still perimenopause. It's kind of early perimenopause. So I'm not surprised to hear you say Andrea your first hot flash was at 47. Because that's the later stage of perimenopause when you're just not making as much estrogen anymore.

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Dr. Jaclyn Smeaton

And the low estrogen is a sign of of that later perimenopausal stage before you hit menopause. But you're totally right that menopause window. I'm not surprised to hear you say, like you had a decade of symptoms almost before that, because early perimenopause is usually the longer part of that transition time for women.

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Andrea Donksy

Yeah. And I also had PCOS, now renamed so now we have a new name for it, but I wasn't getting regular cycles. So a lot of women will say, but I get my period regularly, so I can't be in perimenopause. Like there's so many myths out there. But like you just said, there are so many other, other symptoms that could present as perimenopause.

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Andrea Donksy

And just because you could still have a regular cycle and still be in perimenopause. So understanding all the nuances that are happening with us is really key.

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Dr. Jaclyn Smeaton

Now I want to talk a little bit about gut health because it's something that you talk about as well. Like the role, the gut has a big role in estrogens detoxification and

recirculation. We love this topic. It does because we measure this. So yeah, we love to talk about it. Now from a nutrition standpoint, how connected do you think gut health and hormone symptoms are based upon your discussions with women?

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Andrea Donksy

Yeah, no, they're definitely very connected. And our gut health can change and shift as we go into perimenopause and menopause. And a lot of women will say, so we know, according to our published research, that 50% of women are experiencing gut changes. So gut symptoms gas, bloating, indigestion, loose stools, constipation, they may feel really full even after they're eating, or it might take a lot longer for their body to digest it.

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Andrea Donksy

Whereas before they were feeling their food, digest it after a couple hours and now it's like four hours later and they're like, oh, I still feel really full. So things are changing, right? And that's a large percentage of women. We're talking 50% of women, and that could be tied into things like weight gain. It it ties into self-esteem.

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Andrea Donksy

It ties into so many different things. Right. Especially if you have gas and bloating all the time and you're feeling really full after. We also know it's related because of the gut brain axis, right. The vagus nerve. So we know. So here's something so interesting, Doctor Jacqueline in our research on our signs and symptoms research, when we looked at the top ten symptoms, 50 to 90% of them are actually mental health related, cognitive mental health related.

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Andrea Donksy

So we think about perimenopause and menopause as a as physical symptoms, right? We think of hot flashes and joint pain. But actually in reality it's closer to 90% of the top ten are related to cognitive health. So that gut brain axis gut health, it plays a role in everything from digestion to mood to immunity. Right? So there's so many things that are going on how we absorb nutrients, inflammation, blood sugar, regulation.

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Andrea Donksy

So gut health is completely, intricately related to our hormones. And that's why a lot of women will see changes like for example, they may have been able to eat certain foods all the time, never had an issue. And now it's like, wait a second, that's food. Not agreeing with me. I'm more sensitive to it. So I'm having reactions to it.

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Andrea Donksy

So all of these things can happen as we go into it. And a lot of that is tied into hormones.

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Dr. Jaclyn Smeaton

Yeah. It's so interesting because estrogen we know estrogen directly impacts the microbiome. So estrogen is when it's high it's associated with greater microbial diversity. And there's like the characteristic composition that women have in fact if you look at like cycling females versus men, I'm a little obsessed with all this like hormone gut connection. I love that about it.

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Dr. Jaclyn Smeaton

I love, if you look at stool, you can, like, tell if it's a man or a woman. Stool based upon the makeup and the complexity of the stool, which is pretty amazing. Like women with higher estrogen tend to have more Bacteroides and fewer for Mcvities. And that estrogen also helps preserve the gut lining and that kind of barrier integrity.

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Dr. Jaclyn Smeaton

So I'm not surprised to hear because as estrogen comes down, actually gut function decreases, our microbiome becomes less diverse, which makes it harder for us to digest food and our barrier integrity gets more lax. So you're totally that fits in exactly with what you're saying, that people find that they can't, you know, processed the same way and then that creates this, like, self-reinforcing cycle.

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Dr. Jaclyn Smeaton

You lose estrogen, you have dysbiosis. And then with dysbiosis that changes our ability to conjugate estrogen and to process estrogen properly. And it just becomes it's like cat chasing its tail.

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Andrea Donksy

Yeah. It's like a vicious cycle actually. What's interesting. So I love props by the way. So like I'm a total prop person.

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Dr. Jaclyn Smeaton

Oh you brought a prop. I hope you guys are watching the video and not just streaming, but tell us what the prop is. Yeah, I love comedy.

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Andrea Donksy

I love prop because I did TV, I do TV segments, so I love prop. So I call them a colon and a prop of emoji. So it's just and also what can change too is motility. So the contractions right of our colon can slow down. So stool can last in our colon a little bit longer than we than you know, which should.

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Andrea Donksy

And that's what you're talking about not eliminating things. Estrogen getting reabsorbed. So it plays a role in so many different things. So one thing I thought that was really interesting that I learned when I was writing my book, is that as we go into perimenopause and menopause, actually menopause in particular, our gut microbiome resembles more of a man's gut microbiome.

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Andrea Donksy

Yeah. So kind of what you're saying. So I thought that was so interesting. You're like, oh, we can look at poop and actually see if it's a man or a woman's. But in menopause they say it resembles and it resembles it a lot more like they resemble each other a lot more. So more research is being done. But I thought that was interesting.

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Dr. Jaclyn Smeaton

Yeah, it's totally fascinating. Now, one of the things when you talk about like stool and consistency, like one of the things that we talk about a lot is fiber. And I know you're in nutrition, so I'm sure you love fiber too. Fiber is constantly recommended for gut health, but people don't always get it right. So like what do you see women getting wrong when it comes to fiber?

00:23:49:23 - 00:23:54:02

Dr. Jaclyn Smeaton

When like in order to support estrogen clearance and have those good bowel movement? Yeah.

00:23:54:02 - 00:24:12:21

Andrea Donksy

Like so like you were saying fiber helps with, you know, getting rid of the hormone metabolites or ways bacteria undigested food. So that's really key I think the biggest issue with fiber is is taking too much too quickly. And because that can upset your, your, your gut and that can lead to gas and bloating and then maybe not getting enough.

00:24:13:02 - 00:24:29:10

Andrea Donksy

So we know that according to the research, we are not we're not getting at least even 50% of the amount of fiber that we need in a day. So as a nutritionist, I talk about this a lot in the book, is we need about 25 to 30g of fiber a day, and we want to get that from our food.

00:24:29:10 - 00:24:50:05

Andrea Donksy

So you want to make sure that you are eating your low glycemic fruits. You're eating the rainbow of vegetables, legumes, if you can tolerate it, nuts and seeds if you can tolerate it, complex carbohydrates, everything in moderation. But getting enough fiber is really key. So because we're not even getting 50% of the fiber that we need, I always say you can supplement with something with a fiber supplement.

00:24:50:09 - 00:25:10:07

Andrea Donksy

I love a soluble prebiotic fiber. We have something called fiber US here at Morpheus. So for me, fiber is so crucial because it's helping. Like we talked about before with my little prop, it's helping to move things out of the body, right. So that

we could clear it. So that, like you were saying before, that estrogen doesn't get reabsorbed and all those things that are happening.

00:25:10:07 - 00:25:28:19

Andrea Donksy

So I always say start slowly, introduce the fiber a little bit at a time, and then work your way up to that 25 to 30g a day. And that's what can help you get rid of it. It'll also help with like get, you know, if you feel like your stomach is kind of bigger, like if you feel like you're putting on weight, it helps with weight management.

00:25:28:19 - 00:25:54:11

Andrea Donksy

It helps with absorption of minerals. Really important like a good prebiotic soluble fiber helps with absorbing the minerals. It helps with going to the bathroom every single day. Making sure you're drinking enough is really key with fiber, too. So if you're going to take fiber, please make sure you're drinking at least half your weight in ounces because that'll help to hydrate your body, but as well as your colon, so it can help move the poop along the colon so that it can come out.

00:25:54:13 - 00:26:23:03

DUTCH Podcast

We'll be right back with more. The Perimenopause Management Course, created by the DUTCH Test, is designed to give registered DUTCH providers the clarity and confidence to identify and treat perimenopause in their practice. Perimenopause can be challenging to identify and symptoms can be difficult to correlate with hormonal shifts. Providers may also be unsure what to test for or how to treat patients who are experiencing more severe quality of life changes.

00:26:23:05 - 00:26:43:05

DUTCH Podcast

This course will guide providers through perimenopause physiology and lab testing. Lifestyle and supplements support hormone therapy risks and benefits, and more. Sign up for this course in your provider portal or become a DUTCH provider today to get access. Welcome back to the DUTCH Podcast.

00:26:43:07 - 00:27:01:00

Dr. Jaclyn Smeaton

It's funny because we're really like obsessed with protein right now, really. But I think if especially if you want to lose weight or you're trying to focus on food like

fiber is the right nutrient for us to be protein so important too. But fiber, it's I mean, people think about fiber, but it's not as glamorous as protein. But it really should be.

00:27:01:02 - 00:27:20:11

Andrea Donksy

I am so with you. So like protein protein everywhere. And and it's funny because it's like we can find you can walk down the aisle of a grocery store now and you're finding protein in every single thing. I laugh because years ago when my kids were young, like, now my kids are much older, I was like, I wish we had foods that had more protein because my kids never wanted to eat anything other than carbohydrates.

00:27:20:11 - 00:27:36:17

Andrea Donksy

So I'm like, can we have protein in like, some other foods? And now it's everywhere, which is great. But I agree, we're forgetting about the fiber, which is why 50% weight, we're not even getting 50% of the fiber that we need. Fiber is so crucial. Everything, all of our macronutrients are crucial, right? We want fiber. We want protein.

00:27:36:17 - 00:27:49:14

Andrea Donksy

We want good quality fats. But not having not prioritizing one over the other is important. And making sure you're getting enough fiber. Like I can't stress it enough. You can't stress enough. Like you said, it is so important for so many things.

00:27:49:16 - 00:27:57:20

Dr. Jaclyn Smeaton

Somehow a fiber not like relegated to like what our grandparents do. It's like prunes and fiber One cereal and like it needs a rebrand or needs like a refresh, like a.

00:27:57:20 - 00:27:59:12

Andrea Donksy

Young, cool fiber.

00:27:59:14 - 00:28:17:12

Dr. Jaclyn Smeaton

Full fiber. Totally. Now, I love that you take this kind of broad approach because that your baseline nutrition guidance covers protein, fiber, foods, targeted supplements like magnesium, omega threes, vitamin D like you give this really great starting point, which is your balanced blueprint. Can you talk a little bit about that?

00:28:17:13 - 00:28:35:21

Andrea Donksy

Yeah, absolutely. So I wrote the book with her name is Lisa Sacco. So she's a clinician, a practicing nutritionist for almost 30 years. And the two of us, actually, she taught me back in nutrition school way back when, which is really funny. And I love her, I respect her, and between the two of us, we created the Balanced Blueprint.

00:28:35:21 - 00:28:57:06

Andrea Donksy

Because for me, it's really important because we hear everywhere like, don't do this, don't do this. You should, you should do this, you shouldn't do this. And it kind of came to the point where I'm like, even I'm overwhelmed. And I'm a nutritionist for more than 20 years. So I wanted something that was really simple. So her and I looked at all of the parameters like, what are the things we want to be focusing on?

00:28:57:06 - 00:29:16:07

Andrea Donksy

And not that you should or shouldn't. It's here are some ideas. Here are the guidelines that we believe are crucial for us now. Because one thing that's important to note is when I was before and like right around when I was writing the book and before that, I had to relearn everything because I thought, and this was back in 2016.

00:29:16:09 - 00:29:31:12

Andrea Donksy

This is way before the book. But in 2016, I remember saying to myself out loud and to my friends, be like, I don't understand why am I gaining weight? Why am I not feeling good? Why am I exhausted all the time? I'm not changing anything. I'm doing everything I always need to do. I'm eating the same things I always eat.

00:29:31:15 - 00:29:50:16

Andrea Donksy

I'm exercising the same way, but nothing's working for me anymore. So I had to myself, as somebody who is in this for 26 years, day in, day out, I had to relearn

everything. So that knowledge of the relearning is what we brought to the balance blueprint. It's like, okay, so what are the guidelines that we need to follow?

00:29:50:16 - 00:30:14:17

Andrea Donksy

And then from that you customize it for your particular body because what works for me, Doctor Jacqueline, may not work for you and vice versa. So here are the guidelines. Number one balance blood sugar levels. Number two add more fiber like we were talking about right. Loading up on protein, adding good quality fats, nurturing your digestion which we talked about choosing more plants and ensuring you're hydrated.

00:30:14:18 - 00:30:33:21

Andrea Donksy

Very simple guidelines that we're like oh yeah, of course. Yeah that makes sense. But then how do we add that in? How do we do that on a daily basis and make and customize it for where we are now in this phase of life? Because our needs change, so do the way we have to eat and exercise and all the other things as well.

00:30:33:23 - 00:30:44:21

Dr. Jaclyn Smeaton

Can you talk a bit more about like because I know it needs to be customized, but just generally with the basics of the blueprint, what are you recommending for like protein, fiber, fluid? You said fluid about half of your body weight in ounces.

00:30:44:23 - 00:31:06:06

Andrea Donksy

Yeah. So for that fiber 25 to 30g a day. And then the protein one is really interesting to us. Again another thing that we we spent if I tell you how much time we spent on the protein part, because everywhere you hear it's like something different. Like you can hear, it's like it's all over the map. So what we did, Lisa and I, is we really dug deep into the research.

00:31:06:06 - 00:31:30:07

Andrea Donksy

We looked at her clients, we looked at all of our experiences. We looked at women's, what they're experiencing. We talked to fitness experts and what we decided was, is we came up with a really easy formula. So if you're 140 pounds or less, aim for and this is starting point for 20 to 25g of protein per meal, assuming three meals a day.

00:31:30:09 - 00:31:32:01

Andrea Donksy

So that's the starting point.

00:31:32:03 - 00:31:34:14

Dr. Jaclyn Smeaton

That's lower than I typically hear. Recommended.

00:31:34:16 - 00:31:58:05

Andrea Donksy

So this is the starting point. Foundation rate 60 to 75. Grams okay. Starting point then if you're 140 pounds or more 25 to 30g per meal, assuming three meals a day starting point right now, from there we add extra. So okay, how tall are you? How active are you? Are you on a GLP one? What are your goals.

00:31:58:05 - 00:32:13:20

Andrea Donksy

So that's just the base foundation. And then you add on top of it. So you're going to end up somewhere around that 90 to 100g of protein a day, depending on what it is for your body. And having looked at all the research, having looked at all the data, we were like, yeah, that makes sense. And then that.

00:32:13:20 - 00:32:17:16

Dr. Jaclyn Smeaton

Becomes that calculation so specific to with all these different parameters.

00:32:17:18 - 00:32:38:11

Andrea Donksy

And it makes it so much easier because then because the other one is like point this per kilogram per kilograms of body weight, like it's so confusing to me, I'm like, no, no, no, okay. If I weigh this, I do that starting point and then add on on top of it based on what we recommend. And then we also in the book I give you like calculators, macro calculators that you can go do that you can figure out again what works for you.

00:32:38:11 - 00:32:49:15

Andrea Donksy

So you don't have to do the math if you don't want to. So it just we try to make it really simple, but that's where we came to in the research is where it stands now that we what what we require in this phase of life.

00:32:49:17 - 00:33:08:06

Dr. Jaclyn Smeaton

I want to talk about micronutrients too, because there's a couple that you talk about. You mentioned magnesium, fiber, omega threes and vitamin D kind of as these four that you talk about really often. How do you decide like what is worth talking about. And worth recommending? Because it seems like there's so much out there I'm thinking about like creatine right now.

00:33:08:06 - 00:33:16:07

Dr. Jaclyn Smeaton

And of course, a lot of these things do have benefits for a lot of people. But how do women avoid the overwhelm and like, how are you deciding which things we really need to focus on?

00:33:16:09 - 00:33:34:20

Andrea Donksy

I first of all, I love that question. It's fabulous. And it's where I spend a lot of my time because I have a supplement company, I have more office, so we don't have everything in the kitchen sink. We are so specific with what we have, so we have products. So I believe there are certain non-negotiables that women in perimenopause and menopause need.

00:33:34:22 - 00:33:55:04

Andrea Donksy

And it's not like we're following the trends. It's we're really looking at what our body needs. So we know that our nervous system can take a hit in perimenopause and menopause. What can we do to support our nervous system? Well, magnesium helps with over 600 functions in our body. We know according to my published research, we're more stressed now than we were before.

00:33:55:07 - 00:34:12:13

Andrea Donksy

66% of us are more stress and we're less able to cope with it. So what are some ways that we can cope with our nervous are we can help regulate our nervous

system? Of course these the, you know, taking walks in nature and deep breathing and meditation and exercise and all of the lifestyle habits which I 100% endorse.

00:34:12:15 - 00:34:36:06

Andrea Donksy

And I believe that we need to supplement. You can't supplement poor nutrition always. Nutrition is the foundation for us. I'm very vocal about that. But I do believe we need we need a therapeutic dose of magnesium because when we're stressed, we deplete magnesium from our body. When magnesium is depleted, we become more stressed. So it becomes again another vicious cycle.

00:34:36:06 - 00:34:56:14

Andrea Donksy

There's several of them here, but it becomes another vicious cycle that our body needs. So we need enough magnesium to help support our nervous system and help us sleep better. So magnesium glycine or glycine eight is something that I recommend because we need help with sleep. It has glycine. Glycine is an amino acid that helps to relax the body.

00:34:56:16 - 00:35:17:05

Andrea Donksy

So it helps us get that better night's sleep. And it helps with so many other things like PMS. It can help potentially with migraines and headaches. It can help with it helps to activate vitamin D, which is really crucial for our body. And it can help with bone health and muscles and all the other good things. So that's just an example of why I believe magnesium is so crucial for us.

00:35:17:07 - 00:35:27:02

Dr. Jaclyn Smeaton

What's the biggest mistake or like biggest waste of time you think women are doing out there with lifestyle changes or supplements? Things like that, that they're doing that you're like, this is you shouldn't be bothering with this.

00:35:27:02 - 00:35:31:03

Andrea Donksy

The biggest waste of time, like just in terms of anything.

00:35:31:05 - 00:35:41:04

Dr. Jaclyn Smeaton

Well, I think in perimenopause and menopause we're getting so much advice. I guess I have to read off. That is like, what's the worst phase that you're hearing out there that women are picking up on and bringing forward?

00:35:41:06 - 00:36:05:22

Andrea Donksy

I mean, I don't know if it's so much the worst advice. I think what happens is that because we're exposed to so much information, it becomes information overload. And then we become overwhelmed with what what we need to do and like. So how much protein should I be getting? Weight? I'm like, it's like we're driving ourselves crazy. Or how much like, like everything kind of becomes this full time job, if you will.

00:36:05:23 - 00:36:07:12

Dr. Jaclyn Smeaton

Yeah, that's a great way to put it.

00:36:07:14 - 00:36:30:12

Andrea Donksy

And I feel like that to me would be it's so it puts more strain on our nervous system. It makes us more confused. So then eventually we're like, forget it, I'm not doing anything right. So I think the best way to counteract that overload of information is follow people that you trust, follow people that you resonate with, that you're like, oh, this is great.

00:36:30:12 - 00:36:49:22

Andrea Donksy

I drive with her. I love her information. Follow people that you think have and follow more than one person. Like obviously follow a handful of people that you're like, this is my group. These are the my advisors. These are the people that I'm looking for for information. And then take what you will from it. So don't you don't have to implement everything at once.

00:36:49:23 - 00:37:09:12

Andrea Donksy

Do one thing at a time. Because otherwise you may not do anything. And I think that would be probably the worst thing is not changing anything and continuing to do what you've always done. So slowly, slowly. One thing at a time. Baby steps, whatever is manageable for you. Because we're busy, we're raising families that many of us are working.

00:37:09:16 - 00:37:30:20

Andrea Donksy

We're working inside and outside the home. Many of us are. We're that sandwich generation. We've got parents, so there's so much going on. I still have a 15 year old at home and I'm in my mid 50s, so we've got a lot going on that. I always say, be gentle with yourself, don't overdo it. Do what you can, because whatever you're doing is better than doing nothing.

00:37:30:22 - 00:37:51:07

Dr. Jaclyn Smeaton

I really think that's an awesome answer because like you do see women who they start to get into wanting to make changes around this time in their life, and they are 100% all in. And it's like, I'm going to do everything. And then they just can't sustain that. And I think you're right, that slow and steady start with one thing.

00:37:51:07 - 00:38:07:07

Dr. Jaclyn Smeaton

Like every single improvement you make is an improvement over where you were yesterday. So slow and steady things that you can keep up with. You know, I think about that with exercise two, we've not talked about exercise. I'd love to get your perspective on that, because we know exercise can make a big difference for women in perimenopause and menopause, too.

00:38:07:09 - 00:38:16:15

Dr. Jaclyn Smeaton

But a lot of times they're like, okay, Monday to start a plan to be workout five days a week. I'm gonna do yoga on the other two days, and then they're like four days. And and it's overwhelming.

00:38:16:17 - 00:38:35:02

Andrea Donksy

It is overwhelming. And actually I was just going to say like exercise is a great example. I think the the basis for everything for me is always be gentle with yourself because and then I'm going to go into the exercise because like I just said, because we tend to be and especially like I even know myself, I'm very hard on myself, harder on myself than I am on anybody else.

00:38:35:07 - 00:38:50:14

Andrea Donksy

So when we make our make up our mind, we're like, okay, we're going to do it. And then we don't. What happens? We feel like we failed. We feel like we didn't go through with it right then. We're harder on ourselves to be like, well, now I can't do anything right? Right. So to me, it's when you start slowly and you do slower things.

00:38:50:14 - 00:39:06:21

Andrea Donksy

So let's take exercise for example. We know that weightlifting and weight bearing exercises are really important now for so many different things, right? For aging and for our leg health is tied into our brain health, like all of that is really important. But if you can't get to the gym, I don't want you beating yourself up over it.

00:39:06:23 - 00:39:20:15

Andrea Donksy

Make sure that you are doing something if you can, like grocery bags, you're carrying them in what I did on the weekend, I'm lifting the grocery bags up and down. I'm like, okay, I'm getting in some some, you know, some of my weight, my weight training. Now, of course, we want to make getting to the gym have a whole chapter.

00:39:20:15 - 00:39:38:06

Andrea Donksy

Chapter 13 is all about exercise. It's important that we do it. I don't want to dismiss that. But if you can't do it when you can make time for it when you can, because all of that is tied into self-love and self-care. So it's a really important part of it. But if you miss the gym one day, try doing it another way.

00:39:38:07 - 00:39:57:23

Andrea Donksy

Maybe you're doing it at home. Maybe you're doing some push ups, like doing other things that can help, that can help you not feel so bad about yourself. Get in your steps. That's another thing in the summer when the sun is shining, try to get in your steps during the day. And if you were, if you're averaging, let's say, 5 or 6000 a day because you're sitting at a desk all day, try to aim for that 10 to 15,000 like or 12,000, right?

00:39:57:23 - 00:40:15:03

Andrea Donksy

So try to do a little bit more every single day that you can. But yes, absolutely. We want to be doing weight bearing exercises. We want to make sure our flexibility, our mobility, like all of that, is intact because for aging gracefully and aging healthily, healthspan, it's all really important.

00:40:15:05 - 00:40:37:19

Dr. Jaclyn Smeaton

I want to just throw in a nuance that I like is on my mind a lot with that, which is, I think when we talk about self-care like, this is a time in life where women are, reframing or restructuring their priorities often time. And I think you hit that point where you're like, I've given so much of my life to like a partner to children, to a job, and you're like, okay, I'm taking it back.

00:40:37:19 - 00:40:58:20

Dr. Jaclyn Smeaton

It is. That's like reclamation of self in a lot of ways. And I think about that with exercise or with commitment, any kind of commitment you make, whether it's I'm going to read 30 minutes a day or I'm going to spend less time online or I'm going to cook my meals at home, I'm going to work out. I think it is the most important thing to do for self-care is to define what's important to you and then do it every day.

00:40:58:22 - 00:41:22:13

Dr. Jaclyn Smeaton

And that, to me, is the ultimate stress relieving self-care, because it's almost it's reframing. And this sounds so, like trite. I don't know how to say it, but I think it's really hard for women to do. And I think it's really critical is that when you set time to do something that's important to you, whether that's a creative act or physical one or whatever, and then you do it and you say no to other people so you can maintain that space for yourself.

00:41:22:13 - 00:41:31:02

Dr. Jaclyn Smeaton

It's a really powerful practice that I think provides something to you that goes above and beyond the physical benefits of activity. For example.

00:41:31:04 - 00:41:46:15

Andrea Donksy

I love that, and that's one thing I've been so intentional about this summer in particular, because when I was writing my book, it took me two years to write. So

the book is called Nourishing Menopause. I know we didn't mention it, but so when I was writing my book for two years, doctor Jack and I sat at my desk.

00:41:46:17 - 00:42:06:10

Andrea Donksy

I'm not even kidding you. I went to the gym and I did what I needed to do, but I sat for my. I wrote it for two years, so it took so much energy and time out of me. And I wrote the book. Like with Lisa, we wrote the book. So this summer I was like a book came out in May, and this summer I'm like, okay, I'm just going to come back to myself.

00:42:06:10 - 00:42:24:23

Andrea Donksy

I'm going to take the time for self-care and for self-love, and I rejuvenated. So for me, I love that you're saying that. And one of the things I put into practice, again, because I had it. And then I kind of went off because I was on a deadline for with Simon Schuster. I started doing my morning meditations again, and I started listening to my mantra music again.

00:42:25:01 - 00:42:42:06

Andrea Donksy

And that to me, makes me super happy. Like, I love, like kind of look journaling, doing all those things that make me happy. So I love what you're saying because it is really important because now I feel more centered, I feel more grounded. I feel like I'm back to myself. And now I'm going to start my new routine.

00:42:42:06 - 00:42:56:17

Andrea Donksy

Come, you know, come September, my daughter, when she's she's back in school and then we can kind of go back to the old or the routine or the newer routine. What it looks like for us now. But I do believe that that I just love what you said. I think it's such an important point.

00:42:56:18 - 00:43:12:18

Dr. Jaclyn Smeaton

Yeah. It is, I mean, I think it is really important and it takes some practice. Like I still have children, young children, home. My youngest ones or seven and nine. And I remember when I first started consistently working out, they were like toddlers and babies, right? So I would just want 30 minutes to like, close the door and workout.

00:43:12:18 - 00:43:26:23

Dr. Jaclyn Smeaton

And I think I probably like out of all the times I've ever yelled at my kids, it's probably when they were like, interrupting your workout. You're like in the middle of a deadlift, and they come in asking for a glass of water or whatever. Now they know to leave me alone. I mean, it's it's a training process for the whole family if you can't get out of the house.

00:43:26:23 - 00:43:47:00

Dr. Jaclyn Smeaton

But I really treasure that time. And and actually, the reason why I workout consistently is less about my physique or my mental health even, like, directly related to it. My strength. Although those are awesome, it's because I know I'm going to get that time alone to just like, do something that I want to do. And that's another like just motivating factor.

00:43:47:00 - 00:44:02:17

Dr. Jaclyn Smeaton

So anyway, think of that women like, what are the things that are important to you that maybe you've been putting off, but need to put back into routines? I think from a self-care or stress management perspective, especially if an overlap with a lot of the health recommendations you're covering. Andrea, that's such a great thing.

00:44:02:18 - 00:44:17:12

Andrea Donksy

And also when we have that time for self-care, we're able to be better moms, better friends, better wives, better partners, better colleagues, better work, better bosses, better employees like all of that kind of trickles into it because we're able to do something for ourselves.

00:44:17:13 - 00:44:37:16

Dr. Jaclyn Smeaton

Totally. Yeah. You can't pour from an empty cup. Now, one of the things I was thinking about is like, your blueprint really gets women at this kind of baseline starting point. Do you think there's a role for things like hormone testing to help a woman figure out how she should specifically adapt that blueprint for her own unique biology?

00:44:37:18 - 00:45:01:04

Andrea Donksy

So I think from the hormones perspective, like looking at estrogen, progesterone, testosterone, DHEA, it's probably more your lane than it is mine. But I do believe there is a role. Absolutely. So I do come from the from the thought of test. Don't guess. I like to know what's going on in my body. And that's why for me, understanding, like there are certain tests that I believe we actually like absolutely, absolutely need to know.

00:45:01:08 - 00:45:23:16

Andrea Donksy

Like so for example, we're talking hormones. Like I'd love to know what our fasting insulin is like. What's that doing. Right. Insulin. So hormone cortisol melatonin are our thyroid hormones are free T3 are free T4 or TSH are reverse T3. What are our antibodies doing. Right. So to me understanding us like yes, our progesterone estrogen and testosterone, all of that 100% understanding that.

00:45:23:21 - 00:45:45:02

Andrea Donksy

But also like what's our leptin in our ghrelin doing. Because all of these affect so many other parts of our bodies and our symptoms. So they could either trigger them, they can exacerbate them. So understanding what's happening in our body, I come from the from the point of view is, yes, I do believe there is an important role for it because that way we can adapt our nutrition forward as well.

00:45:45:02 - 00:46:09:10

Andrea Donksy

And I mean, we have our blueprint guideline, but maybe you need a little bit more of this and a little bit less of this. Right? So maybe you're eating something that you think is completely healthy, but yet it's affecting your thyroid in a negative way. So I think understanding what our body's doing because we're also individual can actually help us create and even customize in a more detailed way that balanced blueprint for your individual body.

00:46:09:12 - 00:46:26:04

Dr. Jaclyn Smeaton

I love that look. I mean, of course we love hormone testing here because it's our bread and butter. It's like what we do. And I think there's a lot that women can learn about where they're at in that reproductive transition, and especially if they're going

to think about hormone replacement therapy, understanding where your baseline can be really helpful.

00:46:26:06 - 00:46:52:01

Dr. Jaclyn Smeaton

But I also love that you're expanding that conversation, because I do think that at midlife, we are looking at hormonal change as this dramatic pivot that happens for us. But there are so many other things that are happening at that time. And so knowing I completely agree with you, metabolic health, thyroid health, immune health, it's a great time to, even if things are good, to just get a baseline of where they're at in your maybe in your early 40s.

00:46:52:01 - 00:47:16:23

Dr. Jaclyn Smeaton

That way, if things are changing, it's harder to know what's going on if you have just a single time point. If you have a time point or two before you see a trajectory, you can see, is this getting better or is it getting worse? Is it staying the same? So things like cardiovascular markers and stuff like that. It's a great thing to know, I think about and I have no affiliation and DUTCH doesn't either with function health, which is a great tool available to get labs run.

00:47:17:03 - 00:47:34:03

Dr. Jaclyn Smeaton

And it's relatively inexpensive for this super broad panel. And I did that, and I recommend it to a lot of my friends because they also provide some like I supported interpretation, which gives you a little information about what the lab tests are. And so if you can't find a practitioner to order that or get it covered by insurance, it's a great price.

00:47:34:03 - 00:47:48:16

Dr. Jaclyn Smeaton

Like it was less than the copay for like a very small subset of labs that my doctor ordered. He wanted a thyroid panel, and it was like \$1,000 copay. And the function health was like 250 or 300 included everything, plus maybe 100 other markers. It was a really good value.

00:47:48:18 - 00:48:06:05

Andrea Donksy

Amazing. And when we know, then we can kind of look and do things for it right? So and then also the reason why companies like Function Health and Dodge are great because, well, first of all, DUTCH also looks at methylation, which I think is really important how our body's methylation, but also how are we metabolizing our estrogen, our E1 right.

00:48:06:05 - 00:48:25:05

Andrea Donksy

Or estrogen like. So if we're going to go and again, this isn't my area of expertise that I talk about day in day out. But my belief is, is that if you're going on, you're taking hormones and understanding how your bodily how your body metabolizes your estrogen, does it go to the two, the four, the 16? That could be very helpful in terms of nutrition as well.

00:48:25:05 - 00:48:43:07

Andrea Donksy

And even methylation, right. And nutrition for methylation, but also what certain maybe there's certain supplements that your body needs in particular that can help with that. But that's why seeing a practitioner like understanding what your body's doing and then seeing a practitioner who a doctor who understands hormones, is so important for women in this stage of life.

00:48:43:09 - 00:48:53:14

Dr. Jaclyn Smeaton

I couldn't agree more. And if you come in with a list of weird symptoms that are on that list of 103, and your practitioner doesn't recognize that it could be related to hormone change, maybe you need to find someone different.

00:48:53:16 - 00:49:04:10

Andrea Donksy

And there's so many options nowadays for menopause specialists, which are like gets it with online in person and like there's different options. So find the find the right person for you that gets you.

00:49:04:12 - 00:49:27:17

Dr. Jaclyn Smeaton

Definitely. One thing that I really like about your approach in about this whole conversation is we've not really talked about hormone replacement therapy or menopausal hormone therapy, and the reason why I like that is that it seems to be

what we talk about for women in perimenopause and menopause. And I think that is great because there's a lot of benefits of HRT, but they're further up what I would call the therapeutic order or like the pyramid of health.

00:49:27:19 - 00:49:49:16

Dr. Jaclyn Smeaton

If you think about these replacements for hormones, there's a whole base of that pyramid that is lifestyle, nutrition and dietary supplements that I think we oftentimes skip that part of the conversation and jump to HRT. So I just want to express I'm like, really grateful for you diving in and focusing on these other things because it's important for women to know.

00:49:49:16 - 00:50:05:01

Dr. Jaclyn Smeaton

I love your perspective on this. It's like why you focus so much on that, but it's so important for women to know there's a lot of other effective strategies beyond just HRT. And I love to talk about HRT. I think it's a fabulous tool, and there's a lot more to be said about perimenopause and menopause.

00:50:05:04 - 00:50:29:00

Andrea Donksy

Totally agree. Fabulous tool. It's more the reason why. So to answer your question is it's just not. I'm not an expert in it. So for me I never focused on it because I always say I leave that to experts. Doctors like Doctor Tara Scott, doctor location people and doctors who focus particularly on HRT and hormone replacement. My area of expertise, which I've been for over 20 years as a nutritionist, so starting with food for me comes naturally.

00:50:29:00 - 00:50:51:03

Andrea Donksy

Understanding supplements, understanding lifestyle tips and habits. That to me is where I spend my time researching day in, day out. Now I have, like we talked about earlier, I have doctors who I go to like Doctor Tara, like doctor like Keesha, like Doctor James Simon like these are doctors that I go to, or Doctor Faye Weisberg, who are experts on hormone replacement or hormone therapy that I bring into the conversation.

00:50:51:03 - 00:51:11:06

Andrea Donksy

And I look to them to help me. So I'm very much about understanding where my expertise is, and that's why. And I also believe, like I said earlier, as you can't out supplement out hormone out anything for nutrition or for lifestyle, right? So to me that's the foundation of where we should all be starting, regardless of what are the other things that you're doing.

00:51:11:09 - 00:51:30:20

Andrea Donksy

We want to look at nutrition. We want to look at how are you managing your stress? Are you exercising on a regular basis? What's your mindset like? We know the research shows us that women who have a negative mindset towards menopause will have more symptoms. So mindset plays a very big role as well as to how we're looking at it, which is why I cover all of those.

00:51:31:01 - 00:51:37:14

Andrea Donksy

And that to me is where my expertise lies. And I love it. And it's what I know and I've been doing for so many years.

00:51:37:16 - 00:51:48:16

Dr. Jaclyn Smeaton

Well, I think that's an awesome place to wrap for today. I'm really thankful for you for joining me. If women want to know more about you and how to reach you and how to find your book, can you share a little bit of info for us?

00:51:48:18 - 00:52:14:03

Andrea Donksy

Yeah, sure. Thank you. So, so my book, Nourishing Menopause Powerful Nutrition and Lifestyle Strategies to Feel Your Best. You can find it on Amazon. And, so they have copies there. And then in terms of myself and my company, you can go to my website, which is we are more office.com. So we are Morpheus we actually took two words together morph like metamorphosis.

00:52:14:03 - 00:52:32:11

Andrea Donksy

So we took Morpheus as a community. We made it. We made up world. We are Morpheus.com. And then I'm very active on social. You can find me on TikTok. I have a amazing community on TikTok, at Andrea Donsky, and then on Instagram and

everywhere else at Andrea Donsky and at we are Morphus. So I'm pretty much everywhere fabulous.

00:52:32:11 - 00:52:54:12

Dr. Jaclyn Smeaton

And we will link all of those links in the show notes for you guys so they can make it easy to find. So thanks, Andrea, for joining me today and all of your listeners. Thank you so much for joining me. If you like conversations like this about hormones and perimenopause and menopause and all things for, this area of health, I encourage you to subscribe, click subscribe wherever you're listening, because we do release a podcast every single Tuesday.

00:52:54:12 - 00:52:59:22

Dr. Jaclyn Smeaton

And also be sure to follow us on all socials at test. We'll see you next week.

00:53:00:00 - 00:53:12:18

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