

## Episode 89 Transcript

Dr. Jaclyn Smeaton (00:01:05:23 - 00:02:57:00)

Hi, everybody. Welcome back. I'm so glad that you've joined us today. And I'm about to kick off our final interview of today. So thanks for joining us for at A4M Longevity Fest here at The Venetian in Las Vegas. And it's been a really packed day full of information about health care and longevity and hormones and the microbiome.

And we've had the chance to cover a lot. Now, I'm really excited for my last interview today with Doctor Julie Greenberg. Doctor Greenberg is really an innovator in her field. And she utilizes the doctors and a lot of other innovative methods to evaluate something that you might not think first about when you think about hormones, which is skin health.

You know, Julie, a specialist in integrative dermatology and really, in my opinion, has been a game changer in the patterns that she's noticed and the way she's innovated and the visuals. I mean, we should include some before and after photos in the show notes, because you'd be completely blown away when you see the types of results that she's getting.

So Doctor Greenberg is a licensed naturopathic doctor, and she's a registered herbalist, and she has been specializing in functional dermatology for years. She's the founder of the center for Integrative and Naturopathic Dermatology, where she helps patients address real root causes of skin and hair issues. Doctor Greenberg also runs Root Cause dermatology.com, which is a site that trains practitioners and her unique approach to dermatological care.

I'll make sure we include those links, because if you're a provider and listening today, you're going to want to follow up on this. She's got degrees from Northwestern, Stanford and Vascular University, and she's currently Coauthoring a book on psoriasis that to be released next year, 2025. Congratulations. And Doctor Greenberg also teaches dermatology at naturopathic medical schools and is a sought after speaker all over the world. So, Doctor Greenberg, thank you so much for making time to talk with me today.

Dr. Julie Greenberg (00:02:57:00 - 00:02:57:12)

Thanks so much for having me. I always love chatting with you.

Dr. Jaclyn Smeaton (00:02:57:12 - 00:03:38:05)

Same here. So I want to start by giving people an overview of your perspective on the skin. And you know, it's really interesting because in natural ethics, well, when I was there, I won't say how many years ago, but it's now decades with an ass on the end. You know, you learn about the skin being the window to internal health. And it's the same thing we learned about this like leaky gut. There were all these philosophy is that came down from our teachers from even decades before we were students. But now we have the science to kind of back up what was observed from these providers a long time ago. So share a little

bit about that perspective of like, the skin being a window to health and how that applies to what you're doing with patients today.

Dr. Julie Greenberg (00:03:38:05 - 00:05:17:07)

Yeah, it really is. And yet I think, you know that even functional medicine practitioners make the mistake of when they think of the skin. It's like, okay, they either think of putting something on topically or with certain diseases like eczema or acne or psoriasis.

Okay, let's focus on the food. They're eating something and that's what's causing the skin breakout. And we can just find that food and eliminate it. Then we can fix that, you know, skin problems and really we've forgotten about that very deep connection between the skin and the gut. And if you think about it, or tube, right where the outside of the tube is our skin, the inside of the tube is our digestive tract.

And it meets in two places, our mouth and anus. And it's really it's similar to but again, with the stool at the naturopathic schools. And still I think everywhere we have, we're really not teaching and fully connecting what's happening inside the gut with what's being represented on the skin. And that's really my focus. And, you know, even when I started running the labs and using the treatments, as I was talking to different people in the functional medicine community, they kept thinking, well, you know, the skin, you're just doing things on top of the skin. And I had to keep explaining, no, I'm doing gut microbiome testing. I'm doing hormone testing. I'm looking at the inside of what's happening to get to the root cause of what's happening on the outside of the skin. And it's everything. You can't really clean up the root causes of dermatologic disease or even skin aging just by going from the outside in. You need a dual pronged approach inside out, outside it.

Dr. Jaclyn Smeaton (00:05:17:07 - 00:06:26:13)

I love that you're bringing that up, and I love that you raise the topic of food allergy. So I want to really start there because it's it's a very commonly taught perspective that food is at the root cause of skin conditions like eczema. That's probably the classic one. And I've actually, you know, seen when I was in practice, like kids with really terrible eczema.

Now we know that probiotics can help babies with diaper rash, eczema, etc. but I took a food first approach. I sometimes got sick fast and I sometimes didn't get success. And also the food first approach probably changed the microbiome for a lot of these kids as well, who were eating like overly processed foods. But tell us what you see.

Because I was so fascinated, I heard you speak at any and New Hampshire Association of Natural Product Doctors last month. Yeah. And you shared some of the data of what is out there around the relationship of food allergies and some common skin conditions. And I think it would surprise a lot of our listeners to hear the results. And I'm I know I'm putting you on the spot. You might not know the exact numbers, but share with us the trends that they've seen.

Dr. Julie Greenberg (00:06:26:13 -00:10:08:22)

Yeah. So I mean, the first thing is, yes, you said, you know, you get results sometimes going food first. And that is what I tell practitioners. Does food impact things like eczema and acne and psoriasis of course. Right. There's going to be a relationship with food.

And for some of your patients, a very small amount. Maybe just dealing with food elimination or sensitivities will clean it up. But it's a small amount. So that's what I tell patients, practitioners don't get stuck in the food bucket if it's not clearing your patient. You're going to have to move on from there. And I teach all about, you know, with different foods and different diseases in which ones to kind of look out for and maybe eliminate first, that are the more likely suspects that are, you know, plaguing your acne patient versus your eczema or psoriasis, but specifically to speak to that eczema data that you're talking about.

I think a lot of us assume that the food allergy or sensitivity is driving the eczema. And what we've learned is that it's the inverse relationship. It's that the eczema is driving the food allergies and asthma, which is just an environmental allergy. And that's really mind-blowing to a lot of people when we first think about it. Like, how in the world could eczema be causing food allergies?

How could it be that inverse relationship? But it goes back even to the concept of a leaky gut. I think, you know, most people now know this concept of a leaky gut that, with the gut we want to have, we need to have some permeability. We need to digest nutrients and stuff. But we don't want hyperpermeability.

We don't want things leaking into the bloodstream from the gut. We want a good barrier going on in the gut. And it's the same thing for the skin. The skin, obviously, is the barrier to the outside world. And some things get into the skin that we put on. We'll absorb some things and some things get out like sweat and toxins.

But we want to have a good skin barrier. And what we want that skin barrier to keep out is things like allergies. So pollen from the environment, dust mites from your home, dog dander from your pet and cat dander, food proteins. And this is the crux of how eczema causes food allergies. Because when we look at infants, and neonatal skin, if there's barrier disruption at birth, it's going to predict food allergies by the age of two.

Because what's happening is that little newborn has not seen pollen or dog dander or food proteins before. Their system has never seen it. And if the first introduction to the body is through leaky skin, the same concept of as leaky gut, where protein of these environments or pollens or foods are getting through and getting presented to the immune system in that way, first, the body will freak out over it because we're not supposed to have dog dander getting through the skin and getting down into the epidermal layer, getting presented to the dendritic cells, which are the ones that are the information passing cells that tells our immune system if something bad got through, and that little neonatal like infant body doesn't know that dog dander is not really that big a deal, or that pollen or a food protein isn't that big a deal. But once that's the first introduction, it will trigger and set off allergies

and asthma. And those can be, deadly. And about a third of kids with early onset eczema are going to progress through what we call the Aids topic march, the allergic march.

They're going to go on to get food allergies and asthma. And again, as we talked about it is life-threatening to develop those diseases. So taking care of the skin, taking care of eczema, especially in these infants and kids at an early age, is really critical and potentially life-saving.

Dr. Jaclyn Smeaton (00:10:08:22 - 00:10:46:04)

Thank you for covering that so thoroughly. I mean, I think it's a really important piece because it opens up the next question, which is if it's not a food allergy causing the skin problem, what is it?

You know, and I think that's an area where, again, I think you've really pushed the needle with tying together of what you've observed in your practice. There's no one's really looked at it that way until you came along. And and I know now you see a lot of patients and you're doing this gut microbiome testing. So talk us through a little bit about how you manage patients with skin conditions. What types of tests are you looking at. You mentioned gut microbiome. You mentioned hormonal. And then I would love to dive into some of the common patterns that you see.

Dr. Julie Greenberg (00:10:46:04 - 00:12:39:19)

Yeah. So I only I'm exclusively Durham, I only see patients with dermatologic complaints and everybody has to go and, do, the GI map stool tests and then an oat organic acid test for the first visit. So I'm looking at the gut microbiome at 100% of my patients. Because fundamentally, we know that, you know, the gut is responsible for our immune system, a large portion of it. And when there is gut make room that biome dysfunction. And that can either be there's not enough of the good guys to keep things nice and calm, and then the mucosal layer intact to prevent leaky gut or, and or too many overgrowth of pathogenic or unwanted organisms.

We're going to ramp up the immune system. And that increased immune system is going to drive all of these chronic dermatologic diseases. I think somehow we think of skin diseases as not being chronic inflammatory diseases, but they really are. And again, I think we we know, okay, the gut is the source of the immune system. But we forgot to make that connection when it came to skin diseases.

And that's where I focus and do those tests on everybody. And then as we've talked about, I do the DUTCH on a lot of patients, obviously for things like acne, it can be really helpful. But there's something called TSW topical Steroid Withdrawal syndrome, which can happen to particularly eczema patients or anybody who's using a lot of, even topical steroids.

Their adrenal glands can really be off. So I find the DUTCH particularly helpful, to look at their adrenal stuff. I also deal with a lot of mold and mycotoxins, and I may go do, like,

microtoxin testing. So it's a very naturopathic approach. I think it's it's a holistic approach to the person to, to treat those derm conditions.

I have to look at everything that's inflaming their immune system and and setting things off. And that can be gut hormone or environmental toxins.

Dr. Jaclyn Smeaton (00:12:39:19 - 00:12:57:00)

And tell us some of the associations that you've seen, like we have we have so many kind of common skin finishes. But I know you see a lot of eczema, a lot of psoriasis. And I know you've noticed patterns, even infectious organisms that tend to align with different skin manifestations. So what are the things you see most commonly?

Dr. Julie Greenberg (00:12:57:00 - 00:14:01:00)

Yeah. So having done, you know, thousands of these gut microbiome tests, some patients there's definitely like a pattern I tend to see for eczema patients. So there's the not enough and too much pattern. The not enough. My eczema patients have a leaky gut. And for me, how I determine that in the soil test is there's either no or low acromion.

See, I'm using AFL. And I know you talked to Colleen Cutler earlier on a podcast all about acromion. Yes. So the listeners are interested in really deep diving into acromion. So I go listen to that podcast. But the gist is that, you know, acromion means center. Fola is a commensal organism that helps maintain that gut mucosal barrier and prevent leaky gut.

So lower no akkramensia means NFL, lower no fecal bacterium pregnancy with and roseberry which are butyrate producers and butyrate. Colleen probably talks about as well. Maybe we didn't talk about you dive into that for sure. So butyrate is a short-chain fatty acid. And it's part of the reason why, you know, if we stop and think about it like we have 3 to 5 pounds of microbes, you know, really bacteria in our gut. I mean, that's mind blowing to me. That's like a hand weight we're carrying around and feeding everywhere we go.

Dr. Jaclyn Smeaton (00:14:01:00 - 00:14:13:06)

Yeah. I never really thought about just how much that a lot. You know, when you step on the scale, they okay. 3 to 5 pounds of that is natural microbes.

Dr. Julie Greenberg (00:14:13:06 - 00:15:56:00)

Yeah. But why we do this is that we have this commensal relationship. So with the butyrate producers like fecal bacteria because that's why we eat fiber. They digest the fiber and they make butyrate for us. And butyrate does many things for our gut. It feeds the inteiro sites, the cells of our small intestine, it lowers inflammation and enhances tight junctions to prevent leaky gut. So no. Or low romance?

Yeah. No. Or low, fecal bacteria. And this guy to me is an indicator that there is a leaky gut. And then I also see on this test low secretory IGA often secretory IGA is the

immunoglobulin A the immune system of the gut. And when there's a deficiency of mucosal barrier we can't produce enough secretory IGA. And we get a lot of inflammation.

So those three lower no akkramensia, faecalibacterium and secretory IGA are kind of my leaky gut picture. And I see that very commonly on eczema, everybody from my pediatric to my adult patients will show up with that. And then the overgrowth. But for my eczema patients tends to be Candida, staph aureus and streptococcus. So that those are kind of the two things.

I also sometimes see a kind of subset of eczema that's got some H. Pylori and maybe some protozoa. But that's the predominant one. My my acne gut is pretty different. Well, different in a way. I don't tend to see the leaky gut so much in acne, but I see H. Pylori, I see protozoa and I see candida.

So it's a really different picture. And I'm to the point where a lot of times, if I'm like looking at labs, I can guess at what is going on with the person I was going to ask about.

Dr. Jaclyn Smeaton (00:15:56:00 - 00:16:02:00)

You probably like see the results. And you know what the patient's chief complaint will be before they even come in your door.

Dr. Julie Greenberg (00:16:02:00 - 00:16:15:00)

Yeah, we do that game. And I teach the root cause dermatology course he mentioned. And I as students bring case studies and sometimes I'll say don't don't tell me what it is. Let me look at the labs and guess what? Your patient has. And and usually I can get it.

Dr. Jaclyn Smeaton (00:16:15:00 - 00:16:57:00)

So that's it's really amazing. And and I think like I said I think this is like an innovation that really can change the game in dermatology. Tell me a little bit about the receptivity of dermatologists. I know you're training a lot now. And and when you think about that topical outside-in approach versus this inside-out approach, it's curative. When you fix this, it's not a lifetime of management, of increasing intensity of steroid creams or oral steroids or or immune suppressive magic medications is really hard-hitting medications that are used in conditions like psoriasis, for example. It's a game-changer. How receptive has the dermatological community then?

Dr. Julie Greenberg (00:16:57:00 - 00:18:37:23)

So learning this kind of new approach, I mean, I think overall, generally the dermatologic community within our, you know, conventional medicine system is pretty conservative. So, you know, generally we're not seeing dermatologists overrunning functional medicine conferences like a for us, they were. Yes. But there definitely is a subset and many, many, many dermatologists.

Board-certified dermatologist. I've taken my root cause dermatology course because there's a subset of dermatologists who are so frustrated with the system and they're basically I mean, the same as, you know, I think all practitioners who are conventionally trained and have come over to functional medicine, they are tired of prescribing these very harsh, suppressive medications, but not really fixing anything.

And then that medication, as we talked about, like with TSW, can cause more, bigger problems than the initial problem that the medicine was treating. So that there is a subset who are exploring turning to functional medicine. Part of it is driven by patients. Patients are really tired, like in eczema. They are tired of being handed topical steroids.

And it's really common when a new patient comes to me to say, I've been seven dermatologists and they all keep handing me tubes of steroids to put on me or my child, and there's nothing else that they're offering. And so I think that it's also patients pushing dermatology forward because they realize that patients are demanding this and that at some point they're gonna need to figure this out and get on board with that. But I think it's going to take some time before dermatology in general gets there, because it is a fairly conservative brand.

Dr. Jaclyn Smeaton (00:18:37:23 - 00:18:42:00)

Yeah. And of course it would be a complete change. I was just standard of care.

Dr. Julie Greenberg (00:18:42:00 - 00:20:23:18)

It's I mean right now, you know, it's algorithmic based. And so at standard, dermatologists taking insurance can see anywhere from 20 to 40 patients a day. We know in that model and you don't have time to sit down, ask questions, get to know an individual. You don't have time to get to the root cause. You have time to very quickly write a prescription and an algorithmic, you know, basis, like up to date and then move on. And so the whole model has to change, in order for it to support this kind of root cause medicine.

But a lot of them are opting out of that, you know, insurance, seeing 40 patients a day model because it's not working for them. It's not working for patients, and it's not fixing anything. And we keep developing new, stronger drugs to suppress the immune system. It's all immune-based, whether it's a steroid, or Dupixent, now, in eczema is approved down to six-month-old babies.

We are injecting with a to suppress it. And, you know, same with, psoriasis. They're all biologic drugs. And now the Jak inhibitors, the Jak set pathway worries me with with suppression because it is such a wide, mechanism. Right. It's entry into the cell and DNA transcription. And I think as we get, you know, 15 years down the line, we're going to see a lot of problems, a lot of side effects with the Jak stat inhibitors.

So partially I think it's it's patients who are moving forward dermatology into the, you know, this, you know, advanced model where we do we can we can fix these problems. But it does take time. It's not a five-minute visit and a quick prescription.

Dr. Jaclyn Smeaton (00:20:23:18 - 00:20:49:22)

You know, I know that you are working primarily with people with skin disease. They're coming into you. But what about when we look at people who are really looking at skin optimization? And I'm thinking about A4M, this a forum, in our in the expo hall. We're full of opportunities to put things on your skin, whether it's red light therapy or whether it's creams or serums. What about microbiome? Are we looking at that from? An optimization and kind of anti-aging perspective as well? Is there a place for this approach there?

Dr. Julie Greenberg (00:20:49:22 - 00:22:18:04)

Yeah, 100%. I think whether you're looking at curing a chronic dermatologic disease or optimizing skin health, it's the same thing that we talked about. There is an outside in approach where red light therapy, you know, things like that can be helpful. But that inside out and and establishing, you know, gut microbiome health that absolutely is going to keep the skin you looking younger.

You're going to have less wrinkles. And so we are a culture that is looking for procedures and topicals. But I always try to remind my patients all this work that you're doing, it's going to enhance your skin as well. Taking sugar or reducing sugar out of the diet is one of the main things that we can do. It attaches to the collagen proteins in our skin, and instead of having nice, supple, flexible collagen, which we want because that, you know, we talk about wrinkles. What is a wrinkle? It's it's it's collapsed collagen and elastin. The the sugars attached to the collagen proteins and make like crunchy collagen. And that is going to lead to wrinkles. We want nice supple collagen, collagen supplementation can also be beneficial for, and lowering that inflammation, correcting the gut microbiome despite dysbiosis is 100% going to help with natural anti-aging and healthy youthful looking skin. It is a reflection of what's happening inside 100%.

Dr. Jaclyn Smeaton (00:22:18:04 - 00:22:26:00)

Yeah, even think about like redness and and the ability of the skin to heal itself from like discoloration or, you know, sun exposure and...

Dr. Julie Greenberg (00:22:26:00 - 00:23:05:09)

Yeah, even UV protection. Right. The things that we're eating. So green tea and foods rich in lycopene, you know, that enhances UV protection and UV, damage causes aging. So the healthier the foods you eat high in these polyphenols, that is skin protective against sun damage. I mean, it just all goes together. All of the the concepts of health and functional medicine, everything we're talking about in-depth here at A4M that we're doing internally for health, it's naturally anti-aging without having to spend for procedures or, you know, inject or do anything like that.



Dr. Jaclyn Smeaton (00:23:05:09 - 00:23:23:17)

Yeah. And it would be great if we had that philosophy come first. And then if you want to apply other, you know, different processes, procedures, etc., go for it. Yeah. But like I think covering these foundational basics is critical and, and something that we often miss. It's not a big part of the conversation to work on the gut. Even in esthetics practices. Yeah. Where it seems as though that's a really big opportunity for esthetics practices to really impact patients positively.

Dr. Julie Greenberg (00:23:23:17 - 00:24:13:16)

Yeah. And I think part of it is financial. When you go into a dermatology or an esthetician, they're going to make a lot more money off of you doing procedures and counseling you to, you know, reduce sugar and alcohol and get polyphenols into your diet.

So there's an incentive to sell people things. But with all those procedures and all of those topicals, you know, I think there's a limit as to like how much you can do. And then there's a certain point where I think, you know, it's obvious that someone has done a lot of procedures to their skin, and instead of looking better, it starts looking kind of artificial.

Everything we're talking about, it's natural, it's beautiful, it's the internal health shining through. And you're going to always look better with these things. Always.

Dr. Jaclyn Smeaton (00:24:13:16 - 00:24:40:06)

Yeah. Fabulous. So I want to shift gears a little bit and talk a little bit about the intersection between the gut microbiome and hormonal health. Because at DUTCH, we love to talk about hormones.

And there is so much information coming out around the role that hormones play in modulating the microbiome. Yeah. And then the role the microbiome plays in modulating hormones. So tell us a little bit about these concepts and like how you see this play out in your practice.

Dr. Julie Greenberg (00:24:40:06 - 00:25:44:10)

Yeah 100% I mean you know we know that the body is connected. And so I see it, you know, in doing the hormone labs and, and I don't use, I don't do like HRT. So I'm not like prescribing, you know, estrogen or testosterone or anything off of the labs. But I am fixing the gut. And then a lot of times by fixing the gut, we do see the hormones right themselves.

Or I can use supplements, like if somebody is high in testosterone and, that five alpha DHT pathway is high on the DUTCH. You know, there's great herbs like the South five alpha-reductase inhibitors, things like saw palmetto by GM nettle. I can use it, you know, temporarily to kind of try to inhibit that pathway, reduce the acne while we're fixing the gut.

And then, as you said, like that gut hormone connection, fixing the gut, the hormones are going to right themselves. They always all do want to understand, like why are the

hormones off? Or why is the cortisol high? And there's 100% a connection between the hormones and what's happening in the gut for sure.

Dr. Jaclyn Smeaton (00:25:44:10 - 00:26:19:16)

Yeah, there's been I actually said pull the study because I can't remember the strain off the top of my head, but we think about estrogen metabolism a lot when we think about the gut because, yeah, there's strains that increase beta glucan which increases resorption of estrogen metabolites. And we do see in our lab when indicate is high in urine, which is a general marker for dysbiosis. It's not specific, but it's general marker. We see higher estrogen levels in those patients.

And we look at them as a broad group. Yeah. So we do see that play out. But there's also strains that have been identified that modulate androgen metabolism. And I don't have that on top of my head. But I'll pull that study and share it with you.

Dr. Julie Greenberg (00:26:19:16 - 00:26:20:22)

Yeah I would love to see that.

Dr. Jaclyn Smeaton (00:26:20:22 - 00:26:27:18)

Yeah. Because I think it's probably very relevant when you're looking at acne patients as well. When testosterone or androgens are a picture of these in that picture.

Dr. Julie Greenberg (00:26:27:18 - 00:27:15:12)

And that's a good point about using the tests' interconnectivity. So yes, when I see that the beta-glucan is, you know, it's really high on like the GI map. And then I can go do the DUTCH and see how it's impacting the estrogen. But a lot of times, like you said, that high beta blocker on it is, is due to the kind of despotic bacterial strains. And when I can low I can use something like a calcium crate again temporarily to kind of, you know, manage that process. But, if we clean that up, then, you know, then that when is going to go back to normal and then with the, oh, you know, there's blue iron markers and, you know, looking at the 4-OH pathway, for estrogen metabolism, right. It's including science off. We might see that that 4-OH pathway is high. And so again, I mean, it's all connected. What's happening in the gut and what's happening with the hormones.

Dr. Jaclyn Smeaton (00:27:15:12 - 00:27:39:08)

Fabulous. So my kind of final area I really want to talk to you about is we have so much in our skincare world going on right now, and there's all these special ingredients and special nutrients. But when you're thinking about it from a natural point of view, what are the core foundational elements of like a good holistic skincare regime? So I'm sure you talk about this there patients too, because it is what you put on and what's going on inside.

Dr. Julie Greenber (00:27:39:08 - 00:29:10:20)

Yes, I do. So there's some simple principles. One is read the labels. I think most people who are interested in anti-aging and health, we're already really like on top of our foods, right?

Do we read the labels? If we pick something up in the market, or we're eating at the restaurants we know are healthier, not like the fast-food places, and we know that there's a big difference between a hamburger that's 100% grass-fed, grass finished meat that's not like charred and blackened, right? That that meat can be very helpful for us with avocado.

And it can be like a wonderful meal that's healthy versus a fast-food burger that's actually, you know, contributing to aging and death. And so we understand our food source. We read the labels and we're trying to put things in our body that, have few ingredients in the list that aren't full of chemicals. So our body understands that that whole food idea with food, and it's the same principle, applies to skincare.

I tell my patients, read the labels of your skincare products and look at them with an eye like you're, consuming, you know, foods. If it's got a long list of multi syllabic, chemical sounding things, it's the same as eating something like that. Our skin doesn't know what it is. And as we talked about, we absorb things from our skin.

We absorb it into our bloodstream. And so there are so many chemicals in products, personal care products, make up. The average woman now can put up to 500 chemicals on her skin today. It's astounding.

Dr. Jaclyn Smeaton (00:29:10:20 - 00:29:15:15)

That's unbelievable. And I know like with African American women, that number is even higher.

Dr. Julie Greenberg (00:29:15:15 - 00:30:50:12)

It can be. Yes. And our children, we're putting all these chemicals on to. And so reading the labels is the first thing. If you see a long list of these chemicals, you don't know what the chemical names are. And there's a lot of them. It is probably not something you should be putting on your skin, because you don't want to absorb those. And whether it's a soap or a moisturizer or whatever, the product is, just like food.

You can have, you know, a pizza that's flour, water, egg, tomato, and cheese, or you can get a pizza out of the frozen section that's got like a list of 20 chemicals, the same thing with your personal care products. And it doesn't matter what the personal care products is. So that's the first thing is reading the labels. There is a database from the Environmental Working Group of the Skin Deep database that can help people if they're just getting started.

You can key in a manufacturer and a product, and it kind of rates the product overall on a safety scale. And then you can also look up individual ingredients and sometimes when people are starting out, that's helpful for them. Just because we don't know what these

chemicals are there. Then there's certain kind of principles. So this skin is supposed to be acidic and most people don't realize that.

So there's the pH scale. And, keeping the skin acidic is anti-aging because we've found that skin that is acidic ages slower. So if you are putting products on, that are going to raise the pH of the skin, make it neutral or alkaline, you're going to get more wrinkles and you're going to age. Yeah.

Dr. Jaclyn Smeaton (00:30:50:12 - 00:30:56:07)

So what are some of the things that push that to be more alkaline or, or ultimately what keeps it acidic.

Dr. Julie Greenberg (00:30:56:07 - 00:34:32:17)

Yeah. So some some good cheap acidic things that you can do this great for skin apple cider vinegar. You don't want to put it on a knee. So you're not going to just put it on direct because that'll be pretty stinky. But you can dilute it with water like 50/50. If people don't like the smell of apple cider vinegar. Hydro Sol are a fantastic option. So hydro cells are made as a byproduct of the essential oil-making process. So if we take something like lavender essential oil, which I think we've all heard of, the way that it's made is they take like hundreds of pounds of lavender plant with water in a copper distiller, and they heat it up and then they what evaporates is, collected in a cooling, still. And that's top, top layer or the volatile oils. That's the essential oil. Those we don't want to put directly on the skin because they're very powerful. And there can be all sorts of problems with putting essential oils directly on the skin. Neat. But the water that's left underneath it is the Hydro Sol, and it's almost like a tea. It's very gentle. You can use it on infants and pets and it's totally safe. And those smell great. So using a Hydra Sol after a soap, is a great way to acidify skin with a nice smell. If people don't like apple cider vinegar and aloe vera gel is also acidic and in how enhances collagen.

So let's look at a nice, simple three-step routine that somebody might use for anti-aging. First is finding a natural soap. Again, read the ingredients. Soap is a chemical reaction between lye and a fat. So you're going to see something like sodium hydroxide, which is the lye. And then some sort of natural fat. It can be like a beef tallow. It can be coconut oil or, you know, any sort of plants oil.

That's what you would want to see. And then just a couple of things. We don't need a lot of chemicals in the soap. So simple ingredients soap. Then use that baby powder salt. And then we want a moisturizer. And one of the easiest things to get a healthy plan in place for a moisturizer is to use foil serums.

So we've somehow become really dependent on these creamy lotion moisturizers. But the problem is, what is a lotion? It is a oil and water emulsion. And I think we all learned in fifth grade science class what happens when you pour oil and water together? They separate.

Yeah, they don't mix. So are we getting this creamy thing? Chemicals. We can import emulsifiers at the molecular level to smash them together.

And now that we have water in our products we need preservatives. So if you look at something like the Environmental Working Group and you look up like a moisturizer, a lot of the products that are going to list says not being healthy are going to be the emulsifiers and the preservatives. Well, if we separate our water-based products from our oil-based products, we don't need emulsifiers and we don't need chemicals.

So right there, you've alleviated so much of the chemical burden of those 500 chemicals, right? We've taken out a lot of them. So I like oil serums for the face. There's certain oils we want to use on the face that won't break you out. Things like Hoba oil or grapeseed oil, don't use coconut oil on the face that will cause acne and, as long as you have somebody who's blending properly, essential oils within the carrier oils.

So within those like argan oil or hoba or grapeseed oil are wonderful anti-aging hours. And that's so that's a great three-step plan, you know, a nice natural. So something to acidify the skin like a hydrous oil. And then oil-based face serum with some essential oils.

Dr. Jaclyn Smeaton (00:34:32:17 - 00:34:35:06)

You make it seem so simple is it's that simple. And it's amazing to think about, you know, all the additives and some of the preservatives can be antioxidants, like rosemary oil, as an example that you might see. I love that you add,

Dr. Julie Greenberg (00:34:35:06 - 00:34:47:03)

but, essential oils are helpful too.

Dr. Jaclyn Smeaton (00:34:47:03 - 00:34:54:19)

Yeah. All right. How about you? I just I'm really appreciative for the simplified question of it from someone who sees skin all the time.

Dr. Julie Greenberg (00:34:54:19 - 00:34:56:19)

The simpler, the better. It's just like food.

Dr. Jaclyn Smeaton (00:34:56:19 - 00:34:58:06)

It's like whole foods nutrition for the food.

Dr. Julie Greenberg (00:34:58:06 - 00:35:00:00)

That's exactly what it is. Yeah. Wonderful.

Dr. Jaclyn Smeaton (00:35:01:09 - 00:35:37:08)

Well, I've really enjoyed having you on. I really appreciate you coming on to share your expertise. And like I said, if you are interested in learning a different approach to skincare and dermatology, like I would absolutely recommend talking to Dr. Greenberg. I really

believe that you are the innovator in this space, and I do hope to see that decades later. All dermatology and family medicine docs are able to do what you're doing because it's really getting at the root cause and preventing people from so much strain and pain and emotional distress that skin conditions can cause. So thanks for the work that you do, and thanks for joining us here today.

Dr. Julie Greenberg (00:35:37:08 – 00:35:38:20)

Thank you guys very much.

Dr. Jaclyn Smeaton (00:35:38:20 - 00:35:45:04)

This ends our broadcast live from A4M longevity fest.