

Transcript: EP 335 - Why is Changing Our Behavior So Hard?

Jenn: We have this idea that if it's not enough, if it's not hard enough, it doesn't make us sweat enough, it doesn't count. And we're leading ourselves astray. And the same thing happens with our food choices. If it's not textbook, it doesn't count and I have to start over. Oh, I went on vacation, I have to start over. Stop starting over. Just keep going.

Dr. Taz: Hi everyone, and welcome to Super Woman Wellness. I'm Dr. Taz. I've made it my mission throughout my career in integrative medicine to support women in restoring their health using a blend of eastern medical wisdom with modern science. In this show, I will guide you through different practices to find your power type and fully embody the healthiest and most passionate version of you. I'm here for you and I can't wait to get started. This is a Soulfire production.

Welcome back everyone. Welcome back to another episode of Super Woman Wellness, where we are all determined to bring you back to your superpowered self. I know we've all had journeys. Journeys of getting healthy, whether that's mentally healthy, physically healthy, energetically healthy, but everyone's journey is unique and there truly is a lesson in each and every one of them. I am excited to have a very special guest today who's going to share her own personal journey and how it led to this amazing podcast, which is now recognized as one of the top podcasts in the nation. So please welcome Jenn Trepeck. I hope I'm saying that correctly, Jenn. She's been described as a force of nature in the wellness space. She's been recognized as one of Podcast Magazine's, 40 under 40, and was nominated for the 2022 International Women's Podcast Award for Visionary Leadership, amazing. She's an optimal health coach, podcaster and a business consultant.

She grew up the skinny one in a family of dieters until it went away and so began her weight management saga that I know so many of you listening can relate to. Ultimately though, she learned through nutrition education we're all supposed to know, but no one ever taught us, I'm right there with you, that completely ultimately changed her life and she kicked her food issues. From then on, she set out on a mission to pay it forward and help people help themselves. She started The Salad With the Fries podcast based on science, but lighthearted. She talks about living life while still making our health a priority. Welcome to the show.

Jenn: Dr. Taz. I'm so excited to be here.

Dr. Taz: Yes, and I can feel your force of nature, infectious energy through the camera and sound here, so I hope everybody else listening can feel that as well. So Salad With a Side of Fries sounds like how I live my life to be 100% honest.

Jenn: Exactly.

Dr. Taz: So I am so curious about your journey, what happened there and guide us through because I can tell you, I've been in practice probably almost 15 years as an integrated physician and every day, how do I lose weight? What's happening? And I have lots of theories about it and a lot about the environment and food and blood sugar and all that other business, but totally want your perspective.

Jenn: Yeah, well, I am right there with you. Everything I teach is really about blood sugar management, and this is a separate conversation, but whether we are burning fat or storing fat is a function of blood sugar.

Dr. Taz: Totally.

Jenn: But so for me, like you said in the intro, I was a dancer growing up. I was the skinny one in a family of dieters. And it was interesting because I ate healthful foods and frankly, I ate healthful foods even when I started to gain weight too. I think also because I was a dancer, I was so much more aware of my body and where my body is in space. So when it changed and I started to gain weight, my discomfort, I think, was magnified. And I know what that's like when somebody looks in the mirror and they're like, "Who is that?" And it can happen to many of us at many different times in life. And the thing for me was when it happened, I just said, "Okay, well I know what to do because I watched everybody else do this around me my whole life."

So I did every diet under the sun. Gained and lost, lived on that rollercoaster. And I always had the intention of, this is going to be the last time. And it just never was. And ultimately, I found this curriculum that I have based my practice on, and it was really, like I said, it's the nutrition education we're all supposed to know, but nobody ever taught us. Even what we did learn when I was growing up, it was the food pyramid.

Dr. Taz: Yep.

Jenn: Well, that was based on economics, not biology or nutrition, but we were told that it was. And so no wonder we had a problem. And so by learning this information of really, how do foods impact our body? How does our body process food? What happens when we do certain things? It explained why I had cravings in a certain moment, why all these things I had done before didn't work. And it felt like before, I had been climbing Mount Everest naked and barefoot, and now, all of a

sudden, it was like, I have equipment and I have the proper clothing and there's maybe a chair lift that's going to help get us to the top. All of a sudden there were tools and information and it shifted every food decision from being emotional. Why is the croissant talking to me? Why do I suck? Why can't I just not eat it? That was the old conversation to becoming, wait, I get why that's appealing to me right now. What I really need is this, and then let me see how I feel about the croissant after. And it changed everything. And everybody deserves this information.

Dr. Taz: So how'd you get there? I think that even as a physician, I'm looking at research, I'm looking at data, there's the fasting info, there's the keto info, there's the vegan info, there's the vegetarian info. Not to steal the show here, but now I'm like, you know what? It's about fricking blood sugar, but it's taken so much time to get here. So talk to us about how you got there and what your observations have been in the science that you've looked at from your perspective. And I think you're working with clients too, if I'm correct.

Jenn: Yeah, yeah, I do.

Dr. Taz: So you have probably have a whole library of stories too. So give us a little bit of what are you discovering? What what are you finding? And what do we have wrong, honestly?

Jenn: So it's a lot of pieces. I mean, I think fundamentally at first, I became an insatiable student. I read everything I could get my hands on. I went to every lecture and workshop. If I were a health professional, all of these things I went to would get me continuing medical education credits, but I'm not. But those were the rooms I was sitting in to learn from what they're saying. And then I also spoke to and learned from a lot of people on the functional side and tried to take a lot of what they were saying in conjunction with this curriculum that was already set out that had transformed my own life and put all the pieces together. And then as things would come up with my clients or with myself, I dig into that. So I ended up going down rabbit holes of behavior change and willpower and all of these other things to figure out what is going on.

And I think it's really interesting because you bring up the point of all the different philosophies out there. And while everybody is different, there are some things about the human body that frankly, are the same. And especially if we go back to say, this is proper function rather than, this is what's normal because most people experience it. Common isn't normal. So if we evaluate all of the things coming at us, whether it's from social media or the latest headline or the celebrity fad diet, if we evaluate all the things coming at us from this foundation of, this is

how the human body is supposed to work, then we can say, here's how that makes sense to me, here's how that doesn't make sense to me.

And I think the other piece that most people miss is knowing what works for you because you are your best health coach. We all follow all of these rules instead of following the direction of our body. We've taught ourselves out of paying attention to our own bodies. And so if we add that back into the mix, I mean, it requires relearning that, but when we can add that back into the mix and say, "I hear that that might work for that person, but what I know about me is I feel best when I do this, so I'm glad that that's working for Hollywood. For me, I'm going to keep going here."

Dr. Taz: I love that because I think so many people just are like, "Well, my friend did this," or "So and so did that and it worked for them. So why can't I do it?" And it really is so much... There's a quote that I love using, it's, "All healing is ultimately self-healing." It's very much about understanding you and I tell patients this, I really want you to get the formula for you in this exam room or through this experience. It's not everybody needs to do this.

Jenn: And I can appreciate everybody wants the answer. Everybody wants the shortcut. I promise you what I'm sharing with you, what Dr. Taz is sharing with you, is the shortcut.

Dr. Taz: Yep, that's so true. Such a good point.

Jenn: And by the way, the shortcut is consistency. The shortcut is not shiny object syndrome of following a new thing every day depending on what's coming at us. It's just little things all the time. I always say small steps in the same direction lead to huge distance over time.

Dr. Taz: I love that. I love that. As you are going down these rabbit holes, what are some of the common things, maybe the universal truth, so to speak, that you're seeing with clients as they're trying to lose weight, whether that is common behaviors that we are engaging in that are not working for us, and then also common things that we could all do to shift things in the right direction?

Jenn: I think one of the most common things is perfectionism, black and white thinking, all or nothing. And that goes with our food, it goes with our activity, it goes with every single thing, our sleep, our stress. We live in this world of thinking we're on or we're off. So I don't know, in my elementary school classroom, above the chalkboard, they used to have the alphabet across the top. I think of it like this, for most people right now, if you have that alphabet laid out, left to right, your

pendulum is swinging A to Z, whether it's the scale, whether it's your food choices, your activity, your pendulum is swinging A to Z.

By the way. A pendulum can never hang straight down either. Our objective is to have that pendulum swinging in the middle, back and forth, all the time from L to O, somewhere in that middle range. All the time, we bob and weave. We do what we can when we can with what we have available, and we keep moving forward with our exercise. It's not like we can be like, "Oh no, I don't have to work out today. I went to recess once in seventh grade." I guess they don't even have recess in seventh grade, second grade, let's try second grade. "I went to recess once. I'm good." That's not how it works. And we know that. Also on the activity front, I'm sure you've heard sitting is the new smoking.

Dr. Taz: Oh, totally.

Jenn: So we say that because sitting all day is not human. Our bodies were not designed to sit all day. You know what else is inhuman? Sitting all day and going berserk for one hour? What is human-

Dr. Taz: I think about that all the time. I know, yes.

Jenn: What is human is a few minutes here and a few minutes there and a couple minutes over there. It is cumulative. We have this idea that if it's not enough, if it's not hard enough, it doesn't make us sweat enough, it doesn't count. And we're leading ourselves astray. And the same thing happens with our food choices. If it's not textbook, it doesn't count and I have to start over. Oh, I went on vacation, I have to start over. Stop starting over. Just keep going. I use the analogy, if you went to the grocery store and you bought some eggs and you're on your way home and one of the eggs breaks, you're like, "Ah." What do you do with the other 11 eggs?

Dr. Taz: You still use them.

Jenn: Yeah, and not only that, you protect them. You make sure that you don't break another one. When we enter the land of eff its, as I fondly call it, it's like taking the other 11 eggs and dumping them on the ground. Rather, we can say, "I have a barbecue tonight. I have a holiday." All right, well what are the other 11 eggs that we can protect? Maybe I have a solid breakfast, I get some activity in, I sleep well, I meditate, I breathe. All of the other 11 eggs that we can do in a day that support our health because we didn't get here from one broken egg.

Dr. Taz: I love that. Perfectionism is real. I feel like people are, like you said, they're on or they're off. And so, if we can change that mindset, how do you proactively think though and how do you change, because some people will do that, but they still

have a huge problem with nighttime eating. My husband complains about this all the time. He goes, "I don't know what happens to me at night. When I'm on vacation, this doesn't happen." Or first he was blaming the family. He's like, "Maybe it's you guys." I'm like, "No, no, no, it's your stress." So anyhow, he was joking, but again, there's the night eater, there is the big dinner eater. There's the, I'm not going to eat in the morning, but I pay for it later eater. What are some things that are really red flags for you're doing this wrong if you're trying to lose weight?

Jenn: Yes. Okay, so first of all, this could be a whole thing onto itself. I'm barely going to be able to scratch the surface. The biggest thing is that people look at everything in isolation. Nothing in the body exists in isolation and nothing in your life exists in isolation. So the challenge with nighttime eating actually is not about nighttime eating. Oftentimes, our challenge with nighttime eating is a function of what is happening first thing in the morning.

Dr. Taz: Thank you. I know.

Jenn: Are we getting quality fuel within an hour to 90 minutes of waking up? Are we moving our body during the day? Are we eating nutrition throughout the day? A lot of times, because we've all been told eat less, move more, we spend all this time all day with that restraint. We're using all that willpower to not eat. And willpower is a whole other can of worms, but it's a finite resource if we don't replenish it. And what happens to most people is that it is chemical in the body that on our way home, it feels like the 7-Eleven and the Dunkin Donuts and the ice cream place are magnets. It is chemical in the body, so it's not you. You don't suck. You're not failing. It's that you have a chemical biological thing that's happening that is drawing you to those things. So we don't have to rely on willpower. If we focus on switching something up earlier, that moment becomes infinitely easier.

Dr. Taz: Hi there. It's Dr. Taz and I am thrilled to bring to you my product and supplement line, the East West Way. I never meant to start a line of products, but what I found in my own personal health journey and those of many patients just like you, is that there weren't products that merged together the best of eastern medicine and the best of western medicine. I couldn't find things that really tapped into the wisdom of both philosophies in a single product and had answers that worked. I first developed Boost, my methylated B vitamin because I couldn't find the right B formula for so many patients, including myself. And now it's a hero product that thousands of people can't live without. Each product developed out of that same need to answer a problem that a patient or that someone like myself needed help with and couldn't find the answers.

Today, there are about eight different products and a beauty line as well. And I couldn't be prouder of the results that I get to see in myself and even in the patients that I work with every day. I want you to have that same experience as well. And just for my Super Woman Wellness podcast listeners, I am offering 30% off. That's right. That's 30% off any product on theeastwestway.com. All you have to do is type in the code SWW30, you get 30% off and begin your journey the East West Way.

And it's all about the hormones. That's what people don't understand. When you have suppressed your food intake all day long, and then you're coming home for dinner and you have, first of all, a cortisol let down because whatever you've dealt with all throughout the day, so there's the hormone cortisol. There's leptin, which you've tried to suppress all day long, but that's your satiety hormones, so that's flaring. There's ghrelin, that's another hormone that's involved. All these biological molecules are involved in driving that behavior.

Jenn: Exactly.

Dr. Taz: So I don't know what your advice is, but mine is often, eat consistently, eat every three to four hours, have breakfast, have lunch. I think that 3:00 something is really important because it prevents overeating at 7:00, 8:00, 9:00. So have those benchmarks as times where you do allow yourself to eat. I don't know what you think of that.

Jenn: Absolutely. Yeah, no, totally. And I think the other thing is what you eat is as critical as eating at all.

Dr. Taz: Correct.

Jenn: And I often say, it's not what to eat, it's how to eat, but this is a piece of it. It's how we're putting that plate together that's going to make that 6:00, 7:00 situation easier or more challenging. And the thing that I always remind people too is, you were talking about leptin and ghrelin, the same way that somebody can become insulin resistant. We all know that to be diabetes. We can become resistant to leptin and ghrelin. So it's chemical that you don't feel hungry, and then it's chemical that once you start eating, you can't stop. The good news is that's not permanent. We can do a lot. We just have to recognize that the missing piece is not a moral failing. The missing piece is biochemical.

So I agree with you. We want first food within an hour to 90 minutes of waking up. From there, food, and it depends how much we have. So a meal is probably going to last us around four to five, five and a half hours, depending on how much we have. A snack is going to last us two hours? One to two hours depending on

how much we have. So if what you eat, let's say you wake up at 7:00, 8:00, 8 30, you're having two eggs. That's more of a snack, which means that it is chemical that you are hungry again around 10:00 ish, 10:30.

We need to fuel again because that is appropriate based on the amount of food that we have. Most of the time people go, "Nope, I shouldn't eat again. It's not lunchtime. I'm just going to have more coffee or I'm going to have something else." And we try to push it. So if we look at how much we're having and then saying, here's about when I'm probably going to need to fuel again and keeping an eye on that, maybe like 10:00, 10:30, you have another snack sized thing, that puts us to lunch midday. If that's going to last us four to five hours, we certainly need that snack at about 4:00 or 5:00 before we head home for dinner at 7:00. And that makes total sense. The thing that I say to everybody about how you build your plate, protein and fiber at every meal makes your moving fat no big deal.

Dr. Taz: Oh, I love that. Okay, got it.

Jenn: Protein and fiber at every meal makes your moving fat no big deal. Protein is clean, lean protein. I don't care what it is. Animal, plant, something we've never discovered, clean, lean protein. Fiber is vegetables and sometimes fruit. If we build our plate starting from there, you're going to be fine. We want to think of starches and grains and some of the other things more like a condiment than a food group or even a side dish. Something to add some flavor and texture and a little interest. And we're still able to have all those things.

The other thing that one day I'll figure out how to get into that sentence that we do want to have a few times throughout the day is some quality fat. So a serving of avocado is actually half the avocado. Everybody says to me, oh, I had a sliver of an eighth of a quarter of an avocado. And I'm like, "Eat the avocado." It's going to help us feel satisfied. It's going to give us what we need. So as long as we're eating protein, fiber, quality fat, everything else is going to fall into place. Fueling regularly based on how much we have at a time.

Dr. Taz: So I mean, I'm in complete alignment with this, and I was even on the fasting bandwagon for a little bit until my own metabolism tanked because of it. But talk to me about what you think about fasting, whether it's a 12, 14, 16, 24 hour fast, what your thoughts are around that.

Jenn: So I want to say fundamentally, the average human living on this planet does not get all of the nutrition that their body needs given 24 hours to eat. How we think we're going to do that in eight, I don't know. Because at 24, we can't do it. So that aside, I like fasting better for men. A lot of the research is on young men.

Dr. Taz: It works much better for them.

Jenn: Women's hormones are on a completely different cycle that is actually daily, not like it is for men, which can be a couple phases of life. Our hormones are different every single day.

Dr. Taz: Agree.

Jenn: So given that, we need to be supporting that in a very different way. Most research, by the way, is on men in general across the board. So even dosing of pharmaceuticals is based on male bodies, so grain of salt on all of that. Having said that, the kind of fasting that I really like is after dinner to breakfast.

Dr. Taz: Yes, thank you.

Jenn: Your fasting time needs to be while you sleep. It's a couple hours before bed to about an hour, 90 minutes after waking up. If you expect your body to function and thrive without fuel, you are setting yourself up to store fat, to deteriorate metabolically. It is not the way to health. It might make the number on the scale go down. I see a lot of people who use it as a tool to essentially just cut calories. But the reality is the body doesn't work by calories in calories out, and you don't need a degree to know that because you know that 100 calories of cucumber is going to be different to your body than 100 calories of Skittles.

Dr. Taz: And also, as you do the calories in calories out game, you end up lowering your metabolic rate. So you'll see short term results, but long-term failure, which is exactly... Even I even noticed four or five years ago when fasting was a big thing. So I'm curious, you mentioned blood sugar and you mentioned blood sugar stability and all those other things. So protein, fiber and fat, having those at every meal, ideally, every snack as well. Are there other things that really impact whether you're going to, you started the podcast with this, which I thought was so great, whether you're going to store fat or burn fat. What are things that lead to fat storage behaviors, foods, and what are things that lead to burning fat?

Jenn: Excellent. So storing fat first when our blood sugar is too high and when our blood sugar is too low. So let's think about it in this way. Think of a grocery store checkout. The food's coming down the conveyor belt, the cashier rings it up, passes it to the bagger, the bagger puts things in a bag. When the conveyor belt is coming at a nice even pace, all the things that go in the freezer are together. All the things that go in the refrigerator are together. The eggs are protected. We don't have canned goods on top of your green peppers. Things are organized. The body works the same way. When food and fuel is coming at a nice even pace, we produce insulin. Insulin carries all that fuel to our muscles and our cells to be used

as energy. When that conveyor belt speeds up, all of a sudden it's coming so fast, the cashier is just ringing things up, the bagger's throwing things in a bag. Your body does the same thing.

When we speed up that conveyor belt because we've eaten high glycemic foods or we've eaten too much, it's like flipping a switch, speeding up the conveyor belt. Our body overproduces insulin, our muscles and our cells can only use so much fuel at a time and then they close, but our fat cells go, "I'll take it." Our fat cells never close because our fat cells are about survival. And so fat is fuel stored to be used later. So all of the extra fuel and the extra insulin gets stored as fat. So in real life, what that looks like is we sit down at the table, we start with the bread, we ordered this textbook, if textbook was a thing. Steamed fish and vegetables we're like, "Ugh, I'm queen." So we order steamed fish and vegetables, but we start with the bread. Our steamed fish and vegetables is going to be stored as fat because the bread flipped the switch on that conveyor belt.

So it's why we want to start with protein and vegetables and then have a little bit of the bread or the starches or the grains or the higher glycemic choices. They don't impact us the same way because we blunt the impact. So that's the piece of when our blood sugar is too high. When our blood sugar is too low, our body in its infinite caveman wisdom does not know that you have a refrigerator full of food that you are choosing not to eat. Your body thinks it is a time of famine and it says, "Uh-uh, you're not going to kill me. I survive." And so every time it gets fuel, it stores it as fat to use it later because it thinks it's going to die.

Dr. Taz: Wow because I have been putting glucose monitors on a lot of my patients and many of them are they're not technically diabetic high, which is what I'm trying to explain that that numbers still okay, we don't want to get to the diabetic high number. Your numbers are still too high, but they're dropping down to the 40's and 50's after alcohol towards the evening. So they are in this hypometabolic state essentially. So that's happening with them.

Jenn: And the next thing you eat, you're going to store as fat because your body thinks it's a time of famine and it just wants to survive.

Dr. Taz: Right.

Jenn: We don't want to live in this world of crazy highs and crazy lows. Even Steven, in the middle, in that range. Now, within that range, we're going up and down, but in this middle range, when we are consistent with that, we're never putting our body into a phase of storing fat.

Dr. Taz: Right.

Jenn: The other thing, and I always say this isn't magic, it's science, but I do think the piece that's a little bit magical is that when we're consistent in that, two things can happen. One, our body can say, "Wait a minute, I don't need all this fat I've been holding onto," and it will release its fat stores. And two, it can better handle the occasional spike. So right now you think, "Oh, I can't do ice cream. It goes right to my hips." I promise you, if we are consistent, we can have the occasional ice cream and it doesn't impact us the same way as it does right now because our body has the resilience to handle the occasional spike. Our body cannot handle a constant rollercoaster.

Dr. Taz: So interesting. So the order of eating should be protein, vegetables and then the carbs or the higher glycemic carbs and dessert after, correct?

Jenn: Yeah, and some people will say the vegetables before the protein. I'm a big fan of realistic, I don't care, one of the two, both, whatever. And it doesn't even necessarily have to be all of this thing on your plate and then all of that thing on your plate. If we keep the portions in better proportions, if we think about those grains and starches, the higher glycemic foods as a condiment, we're going to be fine. So think of building the plate. If the higher glycemic foods are the color red and the lower glycemic foods are the color white, we put them together, what do we get? Pink. Not as red as red, not as white as white. Well what if we have more of the protein and vegetables, the white color, and less of the red color? Oh, well, we get a lighter pink closer to white than it is to red now. Oh, well now we're getting somewhere. And we can enjoy those things.

So also life hack, have your dessert right after dinner, don't wait and then sugar bomb your body later. Have that dessert with the meal. Not only will you probably eat less because you've had that food, but it's going to go into our system with these other things that are offering nutrition and slowing down the release of fuel into our body than if we had it by itself.

Dr. Taz: I love it. So many great hacks. All right, we are running on time, believe it or not. We could talk about this probably all day.

Jenn: I know.

Dr. Taz: I know. So for everybody listening, I mean, I want to ask more questions. I've got to ask this question. What do you think of Ozempic semiglutide, Moderna, Wegovy? Take it away.

Jenn: Fundamentally, the mechanisms of action in the body, we can do with better, more sustainable options. Full stop. Right now, the research shows that the number on the scale goes down. The number and the research does not show improved

health. It does not show that what we are removing from the body is fat. Because odds are, when we do things like this, what we're losing is water, muscle, and bone. Losing those things does not equate to health. So please, please divorce the scale. Understand that the number on the scale is not our best indicator of health outcomes.

There's so many things I want to say. My other big pet peeve about it is not only can you not come off of it, I know somebody who is taking it, he said, just as an experiment. He went off of it, cravings were back and worse within six days. We don't know what's going to happen long term with any of these people. What we do know is that you can't come off of it. And my biggest pet peeve of all is that the people who are taking it are lying about it. I think it is such a tragic disservice to all humans to be taking something like this, not tell people about it, and have the public think that this celebrity weight loss is what they're supposed to be aiming for without a medical intervention.

Dr. Taz: You can't use something... I mean, as a physician, I feel like I write that prescription when I've got someone with a significant amount of weight to lose, over 40, 50 pounds or so.

Jenn: And it can be lifesaving. For some people it is lifesaving and life altering, especially if we are in a place of we can't get off the couch. We need something to get us over a hump.

Dr. Taz: And something to give a little bit of hope too, right?

Jenn: Yes.

Dr. Taz: Because for some of those people, the mountain seems so high to climb that it's a state of desperation. But I do it with a plan to come off of it and to continually assess gut health, hormones, inflammation, body fat, muscle mass. Because those are some of the key indicators of health versus the number on the scale.

Jenn: And the thing too is, for the people where it is life altering and lifesaving, it's playing a critical role. To your point, we have to still learn how to go and live the rest of our lives. It is infinitely more challenging to learn how to handle a craving and what helps us calm cravings and what helps us prevent cravings when they don't exist. So if you think that you're going to do this for a period of time and go off of it, and it's going to be this magic bullet and you're no longer going to have to deal with these things, it's not that. We're most likely not learning a lot of those life skills while we're on it because we aren't experiencing it.

Dr. Taz: I love it. I mean, weight is such an interesting thing. I think we're so caught up with weight being a sign of success, a sign of power, a door opener, and there's

just all this emotional stuff caught up with weight and gaining weight, but ultimately we need to understand it's about our health. And health is not just about the number on the scale. And I think I've been screaming, it's not calories in, calories out. You've been talking about that as well. But we are going to continue to push this conversation forward because we are coming up against powerful drugs and powerful pharmaceuticals that really promise quick results and make the whole journey seem so simple and so easy with, again, everything else, like junk food, like our lifestyles in general, quick and easy does not equal success. Never has and never will. And no matter what is offered, it still won't do that. So we'll have to continue to talk about this and push it forward.

Jenn: We will.

Dr. Taz: I'm sure everyone wants to connect with you. Tell us about your podcast, tell us about where they can find you, all that other good stuff.

Jenn: Absolutely. So podcast is Salad With a Side of Fries. Search for it, you'll find us. All social media. I am [@JennTrepeck](#) J-E-N-N T-R-E-P-E-C-K. And please, please, send a message. I love hearing from you. What was new? What did you agree with or disagree with? I want to talk about it with you. And happy to offer all of your listeners too, a complimentary discovery call. Let's chat. Let's help you.

Dr. Taz: Wonderful. Thank you, Jenn. This has been so much fun. And we'll probably do another episode because I don't think this topic is going away anytime soon. So thank you so much and for everybody else watching and listening to this episode of Superwoman Wellness, don't forget to rate and review it and share it with your friends. I will see you guys next time.