

Transcript: EP 339 - Healing Adrenal Dysfunction with Dr. Izabella Wentz

Dr. Wentz: People will say, "Once you have antibodies, you don't need to worry about them." And I know that some functional medicine practitioners will say that, and I'm like, you looked at the studies because thyroid antibodies are independently associated with miscarriage, and they can cause an environment that's not hospitable for fertilization.

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're all determined to bring you back to your superpowered self. And I have, on the show today, someone you're going to love. This is a treat, so I hope you guys are paying attention. So many of you ask me questions about your thyroid, right? We think, is it our thyroid? Is something wrong with our thyroid? Many of you have been dismissed and told your thyroid was normal, when in fact it wasn't. I'm actually one of those, and it's a big part of my health story. So you're going to be super excited because today on the show, we have Dr. Izabella Wentz. She is an internationally-acclaimed thyroid specialist, a licensed pharmacist who has dedicated her career to addressing the root causes of autoimmune thyroid disease after being diagnosed with Hashimoto's in 2009.

She's the author of three books on Hashimoto's. She's definitely the expert here. Hashimoto's Thyroiditis: Lifestyle Interventions for Finding and Treating the Root Cause, Hashimoto's Food Pharmacology, and the Hashimoto's Protocol, which became a number one New York Times bestseller. Welcome to the show, Izabella. Like I was telling you before we jumped in, I remember seeing you at one conference that we had both attended probably five or six years ago. I know that you are such an expert in this field. What even got you into it to begin with, all things thyroid?

Dr. Wentz: So personally, I was never interested in the thyroid during pharmacy school, right? A thyroid condition, how boring. There's just one medication for it if you're hypothyroid. And it wasn't until I was diagnosed myself with Hashimoto's thyroiditis in my twenties after already practicing pharmacist. And I realized that there was a lot more to hypothyroidism than just taking Synthroid. And I personally struggled with symptoms for a decade before I was diagnosed.

So I was struggling with anxiety, panic attacks, fatigue, carpal tunnel in both arms, hair loss and brain fog, and just a whole host of allergies, irritable bowel syndrome, acid reflux, all of these things in my twenties where it felt like my body was breaking itself down. I was excited to be diagnosed. Part of me was of course, devastated, but a part of me was grateful to have answers, decided that I could take thyroid hormone and thyroid medications. And I was like, all of these things will go away. And unfortunately, that wasn't the case. So thyroid hormone helped me go from sleeping 12 hours a night to 11 hours a night. That was an improvement for sure. It helped me go from wearing two sweaters in Southern California in the summer to just... No, no. But that was certainly an improvement. But I was still left with all of these symptoms like the hair loss, the brain fog, the anxiety attacks, the IBS, the GERD, the carpal tunnel.

And just that debilitating fatigue was just really challenging for me as being an ambitious young woman. That's how I became a Hashimoto's expert/human guinea pig, was really trying to figure out what else I could do to feel human again. Because having Hashimoto's and that autoimmune inflammatory process in my body that led to me to have Hashimoto's was causing a ton of symptoms in me. And once I was able to figure out what some of my triggers and root causes were and how to adjust my lifestyle and felt human again, I really wanted to shout it out from the rooftops. I was like, "Why don't more people know that there are things you can do to feel better when you have these symptoms?" And yes, being a pharmacist, I love using the right medication at the right time for the right person. But there's more to healing than medications. Maybe this was a shock for me at first being such a new grad, but that's what I've been doing now for the last decade, is spreading that awareness.

Dr. Taz: So many of us have had our own stories of getting sick or ill and then desperate for answers. And so many people today still walk that journey for sure, often getting dismissed in the exam room or being told that there's only one way to take care of the thyroid and it is with Synthroid. It's fascinating because my story with thyroid also is in my twenties, and I think that's a very critical age for women. I think all the ages are important, but I feel like there is a big shift in your twenties. And the more we can educate women about maybe staying on top of these hormone shifts and really understanding what their bodies are doing, it's so much more important. And it also continues to just baffle me that we don't test thyroid antibodies routinely. Most people get a TSA, to T4, a free T3, and that's your hormone workup. Very rarely will someone look at thyroid antibodies to really even lend itself to the diagnosis of Hashimoto's. So is the Hashimoto's in your family by any chance, or not necessarily?

Dr. Wentz: That's a good question. So it's a bit of a complicated question, but yes, I have a grandmother and an aunt with Hashimoto's and some cousins. I will say that a few of them discovered they had Hashimoto's after I did. Maybe I had something to do with it.

Dr. Taz: Maybe just a little bit. I love it.

Dr. Wentz: So yeah, it wasn't necessarily something that my mom had or my grandmother had or anybody had that would lead me to suspect that I would have it or that would lead my mom, who's a pediatrician, to suspect that I would have it. Although when I was a teenager, I had an enlarged thyroid gland, and my mom being a pediatrician took me to an endocrinologist who tested my TSH and said that it was normal and-

Dr. Taz: Point made. Right back to what we were just talking about. So what do we have wrong when it comes to thyroid in the conventional medicine world? What is getting missed? What is the general basic misconception that you keep hearing as you've kind of dove deep into this world?

Dr. Wentz: Oh, man, antibodies. People say that thyroid antibodies don't matter. So let's back up into this. So doctors will test the TSH first, like you said, rather than testing thyroid antibodies. And TSH is an amazing test when you've been hypothyroid and have had Hashimoto's for a very, very long time, right? Not a great test for the first five, 10, sometimes, 15 years. So people can have elevated Hashimoto's antibodies for sometimes a decade plus before there's going to be a change in TSH. So it's oftentimes backwards because antibodies will be tested if there's an alteration in TSH, if the TSH is-

Dr. Taz: It's not the other way around. Right, yeah.

Dr. Wentz: But it really should be testing antibodies first.

Dr. Taz: I agree. I agree. It's crazy. And in practice, we're good about doing it, but I continue to be shocked at how often, even by the endocrinologist, it's not done. In your opinion, how do you treat an autoimmune thyroid disease? What do you need to be thinking about? What do you need to be looking at? What have you seen now after a decade in the field that really is making a difference in changing the course of Hashimoto's?

Dr. Wentz: Ah, good question. So for me personally, I really love to focus on some low-hanging fruit with people to start with, and generally that's going to be a gluten-free and dairy-free diet. Most people feel better when they get off of gluten and dairy. Anywhere from 80 to 88% of people will have more energy. They'll have just less pain in their body. They'll be able to normalize their weight, just

with those dietary interventions. Getting blood sugar balanced eating, really focusing on that blood sugar piece. Generally eating more protein and fat, lowering our carbohydrate intake, that's going to help a lot of people feel better. That's going to reduce the autoimmune process against the thyroid gland. These are really great places to start for most people. Oftentimes, I see a lot of benefit with utilizing nutrients. Myo-inositol and selenium, specifically myo-inositol, about 600 milligrams, selenium, 83 micrograms. When you can use them together, they work in synergy to normalize some of that autoimmune response. I recently came across, and I don't know how I didn't know this as a pharmacist, but how lithium, which is a known thyroid toxin, actually depletes us of myo-inositol.

Dr. Taz: Interesting.

Dr. Wentz: And some people who developed psoriasis from lithium, which is an autoimmune skin issue, myo-inositol is something that can reverse that, right? And people with psoriasis, interestingly, myo-inositol has never been studied for lithium-induced thyroid issues, but it works for other types of thyroid issues. So for Hashimoto's, in some cases, myo-inositol can normalize thyroid function in the early stages, it can normalize the TSH. So the point where if I have anybody taking myo-inositol, I'm like, "Make sure you test your thyroid function if you're taking on thyroid meds because your dosage of medication can lower and it can also lower the autoimmune attack on the thyroid gland, lowering thyroid antibodies synergistically with selenium." People will say, "Once you have antibodies, you don't need to worry about them." And I know there are some functional medicine practitioners will say that, and I'm like, "Hmm, have you looked at the studies? Because thyroid antibodies are independently associated with miscarriage, they can actually alter... They can cross into the fluid and then they can cause an environment that's not hospitable for fertilization."

And so yes, they do not directly attack the thyroid gland, but they can be implicated in things like obsessive compulsive disorder, which interestingly, myo-inositol also helps. They can be implicated in fertility issues. So I'm a big proponent of, yes, let's test the antibodies and let's see how we can address them. Generally, I want to get them into a lower amount, and we have very straightforward ways of doing that. Oftentimes, nutrients, diet are a great place to start. Sometimes it might be a bit more deeper work like doing some gut testing, toxins testing to see what might be triggering the inflammation in the body.

Dr. Taz: That's such helpful information. It's interesting, myo-inositol, because I love myo-inositol for PCOS, right? Because it manages insulin and blood sugar in general as well. So kind of getting back to that thyroid insulin, blood sugar connection for sure. So that's fascinating. Hashimoto's, one question I get asked, I

could talk about so many different things, let me ask this question just from a selfish standpoint. What do you think of LDN or low dose naltrexone for managing the thyroid antibodies? We use that a lot in practice and find that it holds the antibody load kind of stable and so prevents a lot of this flip-flop that Hashimoto's in particular is known for. Just curious about what your thoughts are there.

Dr. Wentz: Oh, I love LDN. I think it's such an unappreciated, inexpensive therapeutic modality for Hashimoto's, for various kinds of autoimmune conditions, for prevention, for getting into remission, staying into remission. So I will say not every single person will benefit from it. Some people maybe they take it and it doesn't benefit them. I think it's worth a try for Hashimoto's to see how they do on a prescription of low dose naltrexone, especially if they have elevated Hashimoto's antibodies. Because it can be a really, really big game changer.

Dr. Taz: Yeah, it's one of my favorites, but I agree with you. It's really about managing the gut and managing the inflammatory load and trying to get that to where it needs to be for sure. Are you walking around with bottles of supplements? Not sure when to take what? Getting really confused by your regimen. I know this because I get to talk to patients every day in practice who are struggling with the same, and most importantly, they want something simple, easy to follow and doesn't require a lot of steps. That's why I love Athletic Greens. When I have a patient that's getting overwhelmed or someone who comes to me and says they want just one thing to do, one simple thing to do, I love recommending Athletic Greens. Athletic Greens is a great way to get your health back on track, especially in the new year when we're all kind of thinking about our goals and thinking about what we want to accomplish with our health in the months ahead. For myself and for my patients who are looking to build a better foundation of health, Athletic Greens is my go-to.

You take one scoop of Athletic Greens one and you're absorbing 75 high quality vitamins, minerals, whole food source super foods, probiotics, and adaptogens to help you start your day right. Not only that, we know that Athletic Greens helps and promotes good gut health. Again, this blend of ingredients supports your gut health, your nervous system, your immune system, your energy, recovery, focus, and even anti-aging. I've got patients on this who tell me that their brain fog has never been better after taking Athletic Greens. They feel like new people and it's so exciting to watch and to listen to.

Right now, it's time to reclaim your health and arm your immune system with convenient daily nutrition. It's just one scoop and a cup of water every day. That's it. No need for a million different pills and supplements to look out for your

health. To make it easy, Athletic Greens is going to give you a free one-year supply of immune supporting vitamin D and five free travel packs with your purchase. All you have to do is visit athleticgreens.com/DRTAZ, that's D-R-T-A-Z. Again, that is athleticgreens.com/DRTAZ, capital D-R-T-A-Z, to take ownership over your health and pick up the ultimate daily nutritional insurance.

Let's talk for a second, and I know you have some new work around cortisol and adrenal function, so I definitely want to hit that, but talk to us for just a second about the medications. I get so much energy and angst from patients and folks about different thyroid medications. Is Synthroid the only option? What about Tirosint? What about NP Thyroid Armour Thyroid? Where are you in the medication world of managing Hashimoto's?

Dr. Wentz: I think every person is unique and every person will benefit from different medications. When I was going through pharmacy school, I was taught that Synthroid was the way to go and everybody should be on Synthroid and Armour and some of the desiccated drugs weren't reliable, that there was really no reason to prescribe that to a new patient, that anybody taking Armour was probably a really old person that had been maintained on it. That was kind of the story that I heard.

And then when I got diagnosed myself with Hashimoto's and I started working with people, I realized Synthroid T4 is a pro drug, which means that it needs to get turned into the more physiologically active thyroid hormone T3 in the body. On paper, this happens very well perfectly every time. In the body, this doesn't always happen. So if a person has some toxic exposure, they may not convert their T4 medication into the active T3. What this means is they can take thyroid medications, still struggle with thyroid symptoms, so they can have brain fog, fatigue, excess weight, depression when they're on levothyroxine. Sometimes this is because their iron and ferritin is low so that iron can't carry the thyroid hormone into the cell. Sometimes it's a zinc issue, sometimes it's a selenium issue. There's a long list of issues why this could happen, and we can spend time figuring out all these issues, which is never a bad idea, but there's also a quicker, faster way to do it.

And if we give person a T3 medication directly, that can be really, really helpful for so many people. They'll say, "I was so depressed and I started on Armour and I feel so much better." And there have been stories of people who have lifelong depression taking levothyroxine and just that a little bit of T3 makes such a big difference for them. It's actually studied to be used as an antidepressant and psychiatry, just T3 straight up for treat-

Dr. Taz: Oh wow. I didn't know that.

Dr. Wentz: Yeah, it's so interesting where some psychiatrists will add that to a person's med regimen for treatment-resistant depression. So it's kind of an obvious to me if somebody is having those symptoms to perhaps consider a medication like that. And then I have people that maybe have malabsorption issues or they like to drink their coffee with their thyroid meds.

Dr. Taz: Yes.

Dr. Wentz: And in that case, I would prefer something like a Tirosint because that can be absorbed much better. So it's fascinating and interesting how many people don't know that you're not supposed to drink your coffee with your thyroid meds, or maybe I should have said the reverse way, but the coffee, calcium supplements, other medications, foods, all of these things can impact thyroid hormone absorption. There's one study showing that it's up to four hours after taking a thyroid med that you should abstain from drinking coffee. All these other things can impair this absorption. And so researchers in Italy found that espresso lovers could actually take Tirosint with their espresso and still have good thyroid hormone absorption. So something interesting.

Dr. Taz: Leave it to Italy to make sure the espresso didn't take a hit. Right? I love that. That's awesome. Where are you in the world of, and I think that's so interesting about depression. That's fascinating to me. I didn't realize it was a recommended treatment for depression, but where are you in the world of numbers? Do you subscribe to this whole TSH standard that has been set? How much do we need to follow the numbers? I will tell you both personally and with patients, the numbers have sometimes led me wrong. I'm sitting there cold intolerant, like a heater in July on me. Numbers are perfect. They're not even subclinical. But the minute I started some thyroid, all of that went away. My hair thickened back up. All this stuff started to shift and change. So what's your perspective on the lab work?

Dr. Wentz: So generally, for most women of childbearing age, I like to see a TSH between 0.5 and two. I know personally when I was diagnosed, I had a TSH of 4.5 or before I was diagnosed, I should say. And at the time, the reference range was up to five. And I was told that my thyroid function was normal and I was like a sloth, right? I was so tired. I was freezing all the time. I was losing my hair. I was brain fog and forgetful. So I know personally, some doctors won't treat individuals until their TSH... They'll even say if it's up to 10 and you have subclinical thyroidism, they won't treat them. And I mean, I'm all for making the person feel good. So if they have elevated thyroid antibodies, and especially if they're trying to have a baby or they're depressed or any kind of symptomatic, a tiny dose of thyroid hormone can be a really big game changer.

So small doses of thyroid hormone utilized in antibody-positive women have been shown to reduce incidents of miscarriage. So I'm all for it, depending on the circumstances, like you said, if somebody presents with those symptoms, and definitely check a ferritin because sometimes it just might be you're not carrying the iron to the... You're not carrying your iron correctly to the right place. But that can be such an easy way to get a person to feel better or have a pregnancy after having a lot of miscarriages.

Dr. Taz: So helpful. And then do you also subscribe to take your thyroid medication on an empty stomach?

Dr. Wentz: Generally, unless you take Tirosint, then yes. With Tirosint, you can do... I took it when I was a brand new mom and I was drinking a lot of coffee. I was like, oh my gosh, this is great. But for most medications, you do want to take them on an empty stomach, and you can wait anywhere from 30 minutes to an hour before you do anything else.

Dr. Taz: Perfect. Okay. I do want to talk about your new book. You've got a new book out, the Adrenal Transformation Protocol. Talk to us about how you segued from Hashimoto's to the adrenals. I know they're related, but tell us what's going on with your newest book and your newest work.

Dr. Wentz: Sure. I'd be delighted to. So I have been talking about adrenals as long as I've been talking about Hashimoto's because in my experience, most women with Hashimoto's will have some degree of adrenal dysfunction. I've tested so many women, myself included, over the years, I would say symptomatic women. And I couldn't really find a normal test. It's interesting because the media typically talks about high cortisol, "It's so bad to have high cortisol. Here's what you do to lower cortisol." Where about 60% of the individuals that I have tested with Hashimoto's had low levels of cortisol and this tends to be more common in Hashimoto's and hypothyroidism and fibromyalgia, also in chronic fatigue syndrome.

And so initially, this was always a part of my work, and I had some protocols that I shared, such as pregnenolone and DHEA, which are of course hormones as you know, but they're not... They're helpful, but not necessarily appropriate for everybody. And then I would also talk about things like getting 10 to 12 hours of sleep, quitting caffeine. Again, helpful but not necessarily appropriate for everybody. I've helped a lot of people with their health with these methods, but there was always people that were like, "I am not going to quit coffee, so I'm not going to do your program," or, "I can't take these hormones," or, "There's just no way I could commit to sleeping that much." And at first, I was kind of like, "Okay, well, I can't help you there." And then I got to a point where I was a new

mom and eight months postpartum and sleep-deprived, and that's the fastest way to get into adrenal dysfunction.

Dr. Taz: Oh, yeah.

Dr. Wentz: I was like, "Oh man, I'm feeling like I have adrenal dysfunction." And sure enough, I did a Dutch test and my cortisol was flatlined. Okay, but I can't take DHEA. I don't know. Is that going to make my baby grow chest hair? I was nursing, so I didn't want to take anything that could impact my baby. And then I was like, and I also can't sleep 12 hours a night. Sure, you can get a night nanny, but after a while, you'll go bankrupt because as lovely as they are and helpful as they are, they're super expensive. And then there's also the caffeine. I was like, man, I can't give up caffeine. I had just started drinking coffee for the first time in my life because it was my lifeline to taking care of a child at night. And so I came up with a unique protocol to really send those safety signals to my body through lifestyle. That was doable, to get myself to get out of that survival adrenal dysfunction state into a thriving state with a good cortisol pattern with a healthy cor-

Dr. Taz: Yeah, I mean, I have this premise, and even in my new book that's coming out in October, I write it with the premise that I don't think I've met a woman who is not in some state of adrenal fatigue. And so I've just made a blanket assumption that we are all in the state of adrenal fatigue, whether it's mild, moderate, or severe. So we all do really need to be thinking about it. What are three things everyone can do to help their... Let's just assume that everyone's got it. They've got either high or low cortisol. What are three things, especially women, that women can do to really support their adrenals, balance cortisol? Because again, when that cortisol gets off track, it impacts the thyroid, it impacts blood sugar, impacts your estrogen to progesterone ratio, your HPA axis, all these things that we talk so much about. What are your top three?

Dr. Wentz: Definitely replenishing the nutrients that get lost when we're in a stress response. So these would be B vitamins, vitamin C, magnesium, electrolytes, to highlight magnesium. Women who have been stressed will say, "I have PMS, I have menstrual cramps, I have migraines. I have headaches. I can't sleep at night. I'm anxious. My hormones are getting kind of wacky." And then they'll start on a magnesium supplement or start doing daily Epsom salt baths, which is another way to get magnesium. They'll say, "Wow, I feel so much better. I'm more calm. I'm less anxious. I'm sleeping better throughout the night. My menstrual cramps have almost vanished. My body cramps have vanished." So it is one of those things that people don't realize how important role it plays in the body, and it's

very, very simple to build into your routine. It can be a big game changer for so many symptoms.

Dr. Taz: I love that. The nutrients is kind of, I always talk about... I do a lot with Chinese medicine. So they talk a lot about building chi or building energy, and the key way to build energy is really to begin with food and nutrition and supplementing some of these micronutrients that are so important for all the hormones, and definitely important for the adrenals as well. What else are you trying to walk people through in the adrenal transformation? What is your hope that people will learn as they work through the book?

Dr. Wentz: Definitely how to listen to their body and how to properly nourish their body so we're focusing a lot on blood sugar balance. So for a lot of people, it looks like eating more protein, more fat and less carbs. I also utilize myo-inositol throughout that process. And so we really focus on getting the person blood sugar stable. And again, this is such a huge game changer for anxiety, for irritability, for going about your day with energy and being able to sleep well throughout the night. A lot of people don't realize, but the 3:00 AM wakings, this could be a blood sugar issue.

When your body's becoming hypoglycemic, your stress response kicks in to produce cortisol to help make more glucose. This could be caused by a high carb diet, and when we don't have enough protein throughout our day as well. And so this is an important thing to consider is blood sugar balance. People have said to me, "I thought I had a mental health disorder, turns out I just needed to balance my blood sugar," or, "I thought I had an anxiety disorder." And so straightforward doesn't really require you to spend thousands of dollars on testing.

Dr. Taz: I love that. I mean, so much is right there. It's just, again, knowing, having the knowledge, knowing what to do. I think everyone thinks that testing your hormones or understanding your hormones is going to be expensive. It's going to be this big ordeal. Any wellness protocol is going to be 50,000 things to do. But over and over again, these tiny, tiny things like getting protein, stabilizing your blood sugar, adding in the fat, getting in the B vitamins, magnesium, none of that is super expensive. And it makes such a profound difference in women's health. So I love that you're bringing up some of these key things. Is your book already out? Has it hit the shelves?

Dr. Wentz: Yes. It came out in April, so it's only been available for a few months. It is called the Adrenal Transformation Protocol, and the acronym is ATP.

Dr. Taz: Oh, I love that, energy.

Dr. Wentz: It does focus on some of the traditional functional medicine adrenal protocols. So I do talk about the blood sugar balance, the nutrients utilizing adaptogens. I've also found that this works really, really well and much better and quicker with more sustainable effects if we also utilize mitochondrial support. Carnitine, I love for brain fog. We have about a 92% success rate with brain fog throughout the program where people will have less brain fog in a few weeks of using that. I think carnitine is one of the key twists and benefits with that. And then I also utilize things like d-ribose and light therapy to really support the mitochondria because they can be drivers of our energy.

And then the other thing it focuses on is personal transformation techniques such as pleasurable activities throughout the day, and figuring out how to get rid of some of the things that trigger you and get you into that fight or flight survival mode that can be really damaging for our health and how to shift your body back into a thriving state where your body is focusing on staying calm and fixing itself. So there's nutrition, there's supplements, there's a lot of lifestyle, but also a lot of personal transformation techniques too.

Dr. Taz: I love it. I love it. And I'm assuming it's available everywhere books are sold. All of this is gold. I think I have not met a woman, as I said, who's not in adrenal fatigue. I talk a lot about superwoman syndrome would be incredible. It's actually a part of the motivation for the show too, just the incredible stress that women experience today with being in charge of the home and then being outside of the home and then bearing multiple responsibilities. And we just don't have the structure to support all of that. So women today are, I think, one of the most stressed generations of women in history. So this is probably a book that everyone can use. So thank you so much for sharing your expertise and your knowledge with us. For folks watching and listening today, if they wanted to reach out to you, what's the best way for them to do so?

Dr. Wentz: They could follow me on Instagram. I'm @IzabellaWentzPharmD. I'm on Facebook as Thyroid Pharmacist, Dr. Izabella Wentz, and my website is thyroidpharmacist.com.

Dr. Taz: Wonderful. Thank you again for taking time out to join us and for everyone else, thank you for watching and listening to this episode of Super Woman Wellness. We will see you next time.