

A sunburst graphic with numerous thin, light gray lines radiating from a central point behind the text.

Healthy Moms Podcast

BY **Wellness Mama**[®]
simple answers for healthier families

Episode 17: Reversing Infertility & PCOS Naturally

Katie: Hi, and welcome back to the Wellness Mama podcast where I provide simple answers for healthier families. I'm so excited to talk to today's guest, who I got to meet recently, and who is just one of the most uplifting, positive, amazing people I've ever met. Alisa Vitti is an integrative nutritionist and her specialty is in reproductive endocrinology. So she teaches women how to use their hormonal and neurochemical patterns to create extraordinary lives for themselves. And she's a best-selling author, she wrote a book called the "Woman Code," and she founded froliving.com, that's froliving.com, which is a virtual health center that helps support women with their hormonal, and reproductive health, and different struggles they have.

She graduated from John Hopkins University, in the Institute of Integrative Nutrition, and she's the creator of the "WomanCode System." And she's also just such a go-getter and so amazing. And she's been featured on "The Dr. Oz Show" and a lot of different online forms of media as "CBS," "FOX," "SHAPE," and "Huffington Post," and she has a popular TED Talk that's been viewed over half a million times. So, welcome. Thank you so much for being here.

Alisa: Oh, it's totally my pleasure. I am such a fan of the Wellness Mama community, so it's a pleasure to be here.

Katie: Awesome. Well, you have such a wealth of information that I wanna jump right in, and I know that you have an amazing story. Can you start with telling us your background and how you got into hormone health?

Alisa: Sure. So I was at Hopkins on my way to becoming an OBGYN when I got sidelined with what I'd like to call a complete hormonal breakdown, not a nervous breakdown, a hormonal breakdown. And what that looked like for me was that I had put on about 60 pounds kind of out of the blue, my periods had stopped. My skin was broken out, you know, covered face, chest, and back, and painful cystic acne. Couldn't wake up in the morning, couldn't go to sleep at night, my eating was all over the place. I was a mess, anxious, depressed, tired, and confused, and really scared as to what was going on with me because certainly I had access to the best medical practitioners around and no one knew what was wrong with me, and that's not a good feeling.

So it was one of those insomniacal nights, I found myself at the library and found a little article in an "Obstetrics Journal" about "Stein-Leventhal disorder" which was the original name given to polycystic ovarian syndrome. And as I was reading this, you know, this is 15, 17 years ago down, as I was reading this, you know, it was just all the bells were ringing. I knew for sure this is what I had, and it was really frustrating that I had been really not diagnosed at all since puberty, right?

So we're talking five to seven years of just no diagnosis and these problems really were creeping up slowly. So, even though, the storm hit kind of all at once, there were signs along the way that this was happening. So I finally found a doctor who gave me the right test because I asked her to do it and then she confirmed that I did, in fact, have PCOS. And then that next moment that happened in her office was really the life-changing moment for me around my health care and how I got into the work that I do.

So I'm sitting with her, we had done the exam, and I said, "Okay, now what?" You know, I'm kind of a very practical person, so I wanted to know what the solution was. And she said, "Well, you know, there's really no cure for what you have. You're going to experience obesity, increase likelihood for diabetes, infertility, heart disease, and cancer but not to worry because we'll just medicate you along the way and help you manage the

symptoms." And she said that all in one breath. And I remember feeling this strong voice inside of myself, my body, my cells, you know, something was telling me that that wasn't my path.

And without realizing exactly how I was gonna accomplish this, I told her, "No, thank you. I'm gonna go figure this out." And that really was the beginning of my research and to functional medicine, and epigenetics, and nutritional genomics, and really looking at, how do we use food to manipulate organ systems in the body to get them to perform optimally. And my research led me to create the five-step protocol that we use at froliving.com, in the "WomanCode System" online and it certainly would help turn my health completely around to the astonishment of the medical professionals I was working with.

You know, and I love...I always have to switch gynecologists, Katie, because at a certain point, they find out what I do and then, all of a sudden, we're talking about business and not my ovaries, right? So it's always fun for me to go to new gynecologist because then they're always doing another ultrasound to see, in fact, that my ovaries are clear and that's always fun because they're like, "This is not possible that this has happened." So that's sort of how I went from someone who had no interest in what was going on with my cycle, with my hormones, to someone who is just so passionate about educating as many women as possible about how the endocrine system works and then what you need to do to make it work for you as opposed to against you.

Katie: That's awesome. What were some of those practical steps, those five steps, can you talk about that a little bit?

Alisa: Yeah, so the protocol, you know, what's unique about the "WomanCode System" is that it works for whatever issue that you're having because the endocrine system functions the same in everyone. You may have a particular breakdown that is different from your friend, your sister, your mother, your coworker, but the way that it's designed is designed in this very predictable fashion, and so that's what's so great about how this works.

So step one is really addressing what the endocrine system needs, as the baseline most important layer of support, which is blood sugar stability, right? So your brain, and your heart, and your muscle tissue need glucose to survive. The endocrine system is designed to actually safeguard the transport of glucose to the brain, the heart, and the muscle tissue. If you do anything to disturb that process during your meals, during the day, skipping a meal, being late with a meal, starting the day with caffeine on an empty stomach, there are lots of little things that women do unwittingly to undermine endocrine function.

Then everything else at the endocrine system wants to do on your behalf to make your hormones balance becomes compromised and becomes secondary because now with the brain, the heart, and the muscle tissue are concerned it won't have the glucose that it needs to perform what they need to do. So step one is really getting that organized.

Step two of the protocol has to do with getting the adrenals and thyroid to work in harmony, the way that they're meant to because so much...you know, and I hope we get a chance to talk about PMS. So much of PMS has to do with this decrease in progesterone, elevated levels of estrogen, and there is a huge thyroid adrenal connection here to so many of the symptoms that women have around their cycle, around infertility, around their libido, so we addressed that in the second step.

The third step, and it's really important that it's step three and not step one, which a lot of women do first and

that actually makes problems worse is liver support. Otherwise known as some...sometimes called detoxification but really, we're talking about supporting the part B phases of liver detoxification versus, you know, what I see so many women do is start with like a heavy detox, and they actually feel sicker, and actually makes their endocrine system more compromised. So important that that's the third step.

The fourth step of the protocol has to do with something unique that I created as well, which is what we call the prohormonal diet. So there are 4 phases, 4 distinct hormonal ratios that you have in a 30-day cycle and we have a particular diet plan that you eat according to those 4 phases so that you are optimizing those hormonal ratios, that you're not dealing with excess estrogen, for example, or you're supporting production of progesterone at the right times during the cycle.

And the fifth step is something that surprised me as well because, again, I'm such a practical person. I certainly wasn't looking at energy medicine, in the beginning, but over the years of being in practice with women all over the world, for 15 years, I've come to really appreciate that there is an emotional component around the way you relate to your body and your feminine energy that's really helpful, and just being very specific in looking at, such that you can just expedite the process. Because when you really look at the endocrine system, it's the mind-body conversation made physical, right?

The brain houses the pituitary and the hypothalamus, and that manages and connects with the glands, and organs, and the rest of the endocrine system that are sort of from the neck down. So that's the body part. So this mind-body conversation that's happening, when we think about it from the point of view of the endocrine system, isn't so whoo-who. It's really a physical functional thing and I like women to address some of the areas that they might feel stuck in as well.

Katie: I love that, and I've never heard that idea of eating in accordance with your hormonal cycles. I had only heard of that from you and I think it's a really brilliant idea to do. And I know, at least from my readership, that hormone problems really seem to be on the rise and I have a post on balancing hormones naturally, and it is consistently one of my top five post. I think people are really searching for answers. So can you talk about what maybe are some of the reasons that we're seeing all these increases in hormone problems?

Alisa: Yeah, and I love that post of yours. You know, for me, I look at it...there are three things that are kind of coming together in this perfect storm to make what I see is a growing epidemic of hormonal problems, not just problems around your cycle or perimenopausal transition, but also, you know, infertility is on the rise, low libido, and younger and younger women is on the rise. All of these things to me are part of the same problem.

And the three factors that come into play here are the following: first and foremost, and this I just see over and over again, every day, when we work with women. Every woman is being misled by the diet industry to be eating diets that are not prohormonal. They're missing key micronutrients that provide the actual glands and organs in your endocrine system with the right building blocks such that they can manufacture adequate hormones for you. If you're eating a diet that's kind of agnostic to your female system and you're suffering with symptoms around your cycle, your sex drive, or your fertility, you've got to completely change the diet and that diet, you know, if it's just about weight loss it's probably really exacerbating your condition.

Second factor involved in this sort of growing epidemic, Katie, is the increase in chemical exposure that we are sort of besieged by. In fact, a statistic I had heard that just blew me away that I now share at every opportunity is that in a 30-day period, you, and I, and everyone listening to this podcast is being exposed to

more chemicals that contain what are called xenoestrogens, so not endogenous to the body, that more than in your grandparents' generation, more than they were exposed to for their entire lifetime, 30 days.

So this is coming from, you know, pesticides in your food, chemicals in your home cleaning products, dry cleaning chemicals, I mean, it's everywhere. PCBs, dioxins, you know, the plastics, it's pretty gnarly out there for your endocrine system and your ovaries, and we need to do what we can on an individual basis to try to safeguard ourselves against exposure to that.

And then the third thing, you know, and I love bringing this one up because if it were me, I'd roll my eyes too. So I'm just practicing it with this but I'll explain, you know, more of what I mean. Stress, stress is happening in a way that we haven't experienced before in a low-grade continuous fashion. You know, couple generations ago, you'd have stressful moments, stressful things that would come and pass. Now, because of the sort of lifestyle that we're all living, it's chronic low-grade stress that we're experiencing which our adrenals are not adapting to.

The adrenals don't adapt to it, the brain does and then, of course, we're having digestive stress as well because we're mismanaging blood sugar, we're having gut bacteria imbalances, we're having food allergies we're not addressing. All of these things create an inflamed internal ecosystem that leaves the body in a stress state constantly, and that sends a whole other cascade of chemicals conversing with the endocrine system that leave us very vulnerable to hormonal imbalance and that's the bad news. But the good news is that there's so much that we can personally do that's not that complicated to address it.

Katie: Yeah, exactly. I think that's something I always have to remind everyone is that there is still so much hope in this. And I'd love to go into maybe more specifics on different topics now, and we'd already mentioned PMS in passing but let's talk more about that. So what exactly is PMS? We obviously know the name, but what is it and is there any help for that naturally?

Alisa: Absolutely, lots of help. PMS is an imbalance during the luteal phase, which is the 10 to 12 days following ovulation, leading up to your actual menstruation. It's an imbalance between the concentration of estrogen and progesterone. And most, typically, women will have more estrogen than they need and not enough progesterone, and this will leave you with all the sort of classic symptoms like breast tenderness, and moodiness, irritability, fatigue, bloating, headaches, all of that.

You know, there's a thyroid adrenal component as well. So if thyroid issues are a problem, if you...and you need to be vigilant about your lab work. If you have "Within the normal range," but you're on the elevated TSH side of that, you know, I would want you to take action more proactively than wait until you've kind of blown the TSH lid off the pot and then have to take some sort of medication. Because once the thyroid is underperforming, the adrenals start overcompensating and you have elevated levels of cortisol which then causes a decrease in the production of DHEA. And DHEA is one of the places from which we get an added boost of progesterone as well.

So, you know, we have to really look at all of these things when we're looking at PMS but the things that I love doing for PMS are all food-based. So, certainly, helping the liver, getting the micronutrients that the liver needs to help metabolize estrogen is really, really important. So if you're not on a good B vitamin, I would get on one. And then, of course, eating things like dark leafy greens, and sunflower seeds and making sure that you're having a nice variety of fresh fruits and vegetables. Even doing a little bit of juicing, can really provide

you with a wide variety of micronutrients, and glutathione, and vitamin C, all which will help the liver break down estrogen.

And then to boost progesterone, you know, I really love recommending egg yolks from farm-raised, pasture-fed chickens, that are...you know, where you're eating the egg yolk as, you know, not raw but let's say, like, you're poaching the egg and you're leaving the yolk as runny as you can. The more undenatured, the better because the yolk contains a lot of precursors for progesterone production. But, you know, overall, and you'll hear me say this over and over again, you can't spot treat a condition, right? You that spot treat PMS because it involves every aspect of the endocrine system.

So, while I love to recommend some of these suggestions, keep in mind that without balancing your blood sugar, and addressing this cortisol, and balancing the adrenals, and working on the liver, and eating in this prohormonal way, you know, you're only gonna get so far. So it's important to really step back from the symptom and go to the root causes which have everything to do with the optimizing glandular function in the endocrine system.

Katie: Yeah, that's great advice and especially the advice on lab work, I think that can be a source of frustration for women sometimes because they feel like they get lab work, and everything is supposedly normal, and they're not getting answers. But when it comes to, especially, even the B vitamins one thing I found out recently is that I have the MTHFR gene mutation. So to bring the science down to a normal level, basically, I wasn't processing folic acid at all to synthetic form, but I was even having trouble with folate which is what I had been taking. So, for me, just to switch to methylated forms of B vitamins helps a lot.

So things like that, the micronutrient level and understanding your body, that's a very personalized thing but you're right, it's extremely important with hormones. And when I asked my audience, you know, "What are hormone related questions and hormone problems that you struggle with?" PMS was a big one and the second big one was endometriosis. So can you talk about that? Is it the same type of thing? Do the same type of things work or are there special considerations there?

Alisa: Yeah, you know, I love talking to women with endometriosis because they feel so hopeless when they read sort of traditional literature about it. And the good news is, you know, it's really an issue in three parts that need to be addressed. It's gut bacterial imbalance, you know, these are all things that have been researched to have created the condition in the first place. Liver is massively compromised in its ability to break down the toxic forms of estrogen in the body, and then, of course, there's the autoimmune portion of it as well, which is unique among some of the other conditions that women will typically deal with, in this category of health issues.

So, you know, when you're approaching a healing protocol, most women assume that surgery is the only option. But, you know, of course, those of you who have endometriosis and you've had some of the laparoscopic surgery or other types of surgery, you know that it does, in fact, provide only temporary solution and these lesions and tumors do grow back. So what's great is, it's not an either/or, you know, surgery can be helpful especially if you're trying to clear a path for embryo implantation around conception but regardless of what you're doing surgically, you must address that internal ecosystem.

First, really looking at healing any gut dysbiosis with fermented foods, and good probiotic, and some nice anti-inflammatories like N-acetylcysteine and L-glutamine and then really addressing estrogen metabolism in every

way possible, not just eating kale, and taking the right B vitamins, and doing some of the things that we talk about, but also really removing any exposure that you are humanly capable of doing to these pesticides and chemicals. These all have an estrogenic effect on the body that you are more sensitive to than a woman who doesn't have endometriosis.

And then as far as the autoimmune issue, you know, there have been some wonderful studies on women with endometriosis taking high doses of vitamin C and gamma linoleic acid, something like evening primrose oil. The vitamin C actually reduces the propagation of the lesions and the gamma linoleic acid, similar in a different pathway, interrupts the pregnant alone, sort of chain reaction, that can stimulate the uterine lining to grow in a rapid form. So, you know, it's really manageable but you have to get involved with your body and with your diet, and not just sort of assume that surgery is the only option.

Katie: Yeah, that's awesome. And I know one other hormone-related condition that seems to be really rising and that you've struggled with this PCOS, and I've got a lot of questions from people about, "What about PCOS but also infertility with PCOS because those too often go hand in hand? And is there natural help for that without turning to the more drastic measures?"

Alisa: Yeah, you know, and PCOS, endometriosis, PMS, ovarian cysts, you know, fibroids, all of these things compromise fertility. So, you know, that's an important thing to consider which is regardless of what you're dealing with, with your cycle if you want to preserve, protect, expand, amplify your fertility, taking care of your cycle issues today will allow you a much easier pathway to motherhood tomorrow. So I can't stress that enough, you know, don't put your period problems off to the side for years, take the pill, mask the symptoms, try not to do that.

Try to get involved immediately because the sooner you start, the easier the problems are to correct. They have less time to become deeply entrenched patterns in the endocrine system and of course, you're not running up against the stress of time and time constraints around, "Oh, I wanna have a baby now," but now you're dealing with all these other hormonal issues. So with PCOS in particular around fertility, and this is obviously a subject I know a lot about, as I am currently pregnant, is that...and I was told, 17 years ago, that would never happen naturally.

You know, and I was able to conceive by myself with my husband at home, on the third try at 37, right? So this is good news to be sharing but that's because for the past 15 years I've been living in a very pro-hormonal way with my diet in my lifestyle. So, you know, the deal with PCOS is the hypothalamic pituitary ovarian axis, that conversation between the brain and the ovary, is extremely sensitive and responsive to fluctuations in glucose and insulin, so that's what's happening, right?

But the good news is that it's extremely easy to address because it's really the first step of the protocol, takes care of that immediately, right? If you get your blood sugar stabilized and you're taking that seriously like it's your job, then the symptoms start to correct themselves and that's what's so rewarding about working with PCOS. In fact, we partner with several IVF centers across the country because more and more reproductive endocrinologists, who do assist with reproductive technology, recognize that for PCOS patients, simply stimulating them with synthetic hormones doesn't actually correct the problem or yield any different result statistically than them trying on their own because of this hypersensitivity that the ovary has around glucose.

So taking the estrogen, and the progesterone, and all the other things that you're gonna be injected with are

not gonna actually solve that problem. So, again, it comes back to, "How can I take personal responsibility for my condition and really be proactive with my food such that I can clear a path, for not only my cycles to regulate but also to conceive?"

Katie: Yeah, that's awesome and congratulations again on your daughter. That's so amazing and so exciting for you.

Alisa: Thank you.

Katie: And I know something that's often, probably, an early warning sign of these problems but that is not really talked about, and it's usually ignored is women who have low libido, and, like, natural ways to boost that because, you know, you always hear, "What is a normal sex drive?" And I hate using the word normal. But I think a lot of women maybe struggle from that and sometimes don't even know about it. So can you talk about that a little bit? Are there things that women can do that will naturally help boost their hormone levels and their sex drive?

Alisa: Yeah. I love the idea of, like, finding what is normal. So hormonally speaking, you have two big surges of testosterone that intersect your estrogen in a really unique way during your cycle. This happens during ovulation and this happens during the first half of the luteal phase. Now, some women also report feeling more libidinous during their actual menses but that has to do more with the build-up of fluid in the tissue in the surrounding areas than the testosterone factor, but you do have to peak concentration of testosterone exposure to that hormone during your cycle and that's where our sex drive really comes from.

Now, the other place where we, as women, generate all of this testosterone is actually from the adrenal glands. Ninety percent of your testosterone is being manufactured from the DHEA that your adrenal gland is producing for you, versus men, you know, 90% of their testosterone is being produced in the testes, 10% from the adrenals. So what is happening with your endocrine system really affects your sex drive. And younger and younger women, because of the stressful lifestyle, eating diets that are micronutrient poor, find themselves very easily leaving the adrenal vulnerable to stage one and stage two adrenal fatigue.

And as soon as you're in that position, the sex drive is really gonna start to diminish, not only desire for sex but also sexual response is going to feel less exciting and explosive when you do have an encounter. So it's not just desire, it's also response, and all of this is something that's hormonally driven. So, what I like to recommend, you know, of course is really working on the underlying causes because, you know, I always love reading these articles in "Cosmo" magazine, like, you know, about sex and how to have better sex. And I'm always laughing because, you know, it's really all about what you should be doing for somebody else in bed.

And I think, you know, for someone who's struggling with a hormonal issue and is exhausted from adrenal fatigue, and thyroid issues, and doesn't realize it, the last thing she wants to do is worry about who they're dealing with in bed, right? So it's really more about you getting to the root causes of your hormonal imbalance and all the things that we talked about so far around the different steps of the protocol, and really eating in the right way will help with that.

Katie: Yeah, that's awesome, and I agree with you 100%. And I'm gonna kind of cross into probably a little bit of controversial territory here, but I would love to talk to you about hormonal contraceptives a little bit. I know that they're very commonly prescribed for a lot of different reasons, everything from acne on. And for

me personally, I've made a choice never to use hormonal contraceptives just because it seemed a little disingenuous to spend \$6, a pound, or more on grass-fed meat to avoid hormones and antibiotics, and then purposely take hormones and antibiotics the next day. So, I mean, that's just my personal choice, but can you talk about hormonal contraceptives and what role they might play in this hormone balance or disbalance?

Alisa: Yeah, you know, so we're talking about the pill, we're talking about a hormonal based, like IUD, like Mirena, really here, and any other synthetic forms of hormones you can get your hands on. But essentially most women are dealing either with the pill or the IUD as their main ways of being exposed to hormonal contraception. Now, given that there are so many other ways to prevent pregnancy, if you are someone who is hormonally sensitive and dealing with the hormonal issue, being on hormonal contraceptive has been studied to make your symptoms worse.

Now, what does that mean because some of you may be on these medications and feel slightly better? So, yes, it is true that they will mask your symptoms temporarily but in the background, while you can't notice it because you're having the influx of these synthetic hormones, these medications are disturbing your gut flora balance. They're depleting key micronutrients at a more rapid pace that are needed by your liver to break down estrogen. They are exposing you to synthetic forms of hormones that you may be even more sensitive to than the average woman because you have pre-existing hormonal issues.

So when you do decide to go off of it, you will have a relapse and oftentimes your symptoms will be worse. And what I have seen is that that is the case nearly 100% of the time. It also increases challenges around trying to conceive when you finally do get off the pill and of course making...you know, all the things that are wrong with your cycle will come to haunt you doubly, so during perimenopause, if you don't address them immediately in a natural fashion. So, yeah, I'm not a fan, if you can guess. You know, from using synthetic hormones, I think it's not the right approach for women with hormonal sensitivity.

Now, if you have no symptoms and you're one of the lucky few women who have easy cycles, and you can go on and off the pill without any symptoms, then by all means, if that's your preferred form of contraception, that's fine. My concern is really for those women who are struggling with PMS, endometriosis, fibroids, PCOS and we know that these medications do not correct the condition at all. It just masks them and delays your ability to have access to your body in its natural state such that you can actually do the type of, let's say, fixing of your hormones that I would want you to do, and that's really about treating the underlying breakdown in the endocrine system with food.

Katie: Yeah, that's awesome and one thing all echo is that there are very many natural waste of space pregnancies that don't involve hormones. And for us, that's me, I've been using a lot of different fertility monitors kind of partially to test them side by side and see how they work. But by doing that, I have found out things about my cycle that I would not have known if I hadn't been doing that and figured out some cortisol issues I was having with elevated at the wrong time of day and a shorter luteal phase. And even I had an anovulatory cycle and tried to figure out what was up with that and I never would have known those things if I hadn't been paying attention to my body and if I had just masked that.

Alisa: Exactly.

Katie: So, I think, women especially, we have so many more hormonal fluctuations than men do, but in a sense, that's a gift because we can learn so much more about our body through those fluctuations, and each

month it gives us a window into kind of what's going on internally that men don't have as easily. So it can be a frustration but it can also be really a great way to figure out what's going on with your body.

Alisa: Oh, yeah, and the practice that we help women evolve is, you know, once you understand what to listen for in your body's cues too around hormonal health, and endocrine system health, then it becomes a fun relationship that you have with your body, as opposed to a frustrating one where you can say, "Oh, well, right now, this month, this is what's happening, and based on that I'm gonna do XYZ with my diet and my lifestyle for the following month because I know that's going to immediately correct how I might have gone off course." And then you feel empowered, you know what's happening. It's not complicated. It's a really pleasurable lifestyle to be living, one that is in relationship to your body in a prohormonal way.

Katie: Exactly, and I cannot believe how fast our time is flown by but there's three questions I always try to end with. And the first one is, what is one piece of advice you wish someone had given you earlier in life?

Alisa: Very straightforward, and I'm looking forward to giving this advice to my nieces and anyone I can. That my body's ever-changing nature physical, chemical, brain chemistry, all that is an asset, a powerful asset that it is my privilege to learn how to leverage in every aspect of my life.

Katie: Mm-mm, I love that. And secondly what's one book or resource, besides your own which I will definitely link to in the show notes, but what's one book or resource you would recommend to others may be struggling with these problems?

Alisa: You know, I really love "The Female Brain" by Louann Brizendine. She's an amazing doctor who really breaks down in this very slim novel...this book, you know, how your neurochemistry is affected by your hormones and how it's not this scary bad thing, you're not crazy, you're not moody. She really debunks the stereotypes around our "personality" and our hormones, and I think that's a necessary thing for all of us to get clear on.

Katie: Awesome. We'll link to that too for sure. And lastly, what is one action step people can take right now if they are trying to fix all these problems? What would be the first step?

Alisa: First step and I'm gonna say this, and I know it's a little unpopular, ladies, but first step would certainly be to make sure you're not drinking caffeine on an empty stomach at any point in the day but definitely not first thing in the morning. Now, I'm not asking you to give up your coffee yet, but if you can just have it after breakfast as a place to start, you won't...you know, that first thing in the morning, on the empty stomach cup of coffee, throws off your blood sugar metabolism for the entire day. And no matter what else you do, what other supplements you take, how good your diet is, you won't be able to reap any of the benefits until you sleep and reset metabolically the next day. So if you can do that, you'll start setting yourself up for success and much more quickly.

Katie: Awesome. Thank you so, so much for your time and for being here. And where can everybody find you, if they want to learn more about you?

Alisa: Everyone can come to our website, flliving.com, FLO. You can find us on Facebook at [facebook/FloLiving](https://www.facebook.com/FloLiving), Twitter is the same. And we have a great weekly newsletter that has a lot of very targeted information around, you know, the specific conditions. So I encourage those of you who wanna learn more to

sign up for that newsletter, it's free, of course.

Katie: Awesome. Thank you so much for your time, and for sharing your wealth of information with us.

Alisa: My pleasure. Thanks for having me, Katie.

Katie: Thank you so much for listening to this episode of the "Wellness Mama" podcast where I provide simple answers for healthier families. If you would like to get my "7 Simple Steps for Healthier Families" guide for free, head on over to wellnessmama.com, and enter your email, and I'll send it over to right away. You can also stay in touch on social media [facebook.com/endlesswellness](https://www.facebook.com/endlesswellness) or on Twitter and Instagram @WellnessMama.

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