



Episode 194: Longevity, Autoimmunity and Plant Based Diets With Nora Gedgudas

Child: Welcome to my Mommy's podcast.

This episode is brought to you by Furo Health, where I recently bought a cold therapy tub plunge and I'm absolutely loving it. We saved up and prioritized this for our home because of the many benefits of cold therapy and now we can sit in 42-58 degree water anytime we want to get the benefits. Athletes have been using cold therapy for faster recovery for years, but it has many other benefits as well, including increased circulation and lymphatic flow, immune system boost and increased focus. A 2007 study even found that cold water exposure can help alleviate depression symptoms, and if used on a regular basis, it may be as beneficial than prescription medications in lifting moods. The reason is due to the stimulation of the dopaminergic transmission in the mesocorticolimbic and nigrostriatal pathway. In layman's terms, cold water triggers an increase in mood boosting neurotransmitters and make you feel happy. Ever jumped into cold water and immediately laughed outloud? That's part of the reason why. You can check out the tub we bought and use daily at [furohealth.com](http://furohealth.com)

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Katie: Hello and welcome to "The Healthy Moms Podcast." I'm Katie from [wellnessmama.com](http://wellnessmama.com), and I could not be more excited about today's conversation and today's guest because I am here with Nora Gedgaudas who is all, by and large, one of the early leaders in the ancestral health and healthy living movement, and one of the best researchers I know. Her work is brilliant. She has so many amazing, amazing resources that will be linked in the show notes, but she is a board-certified nutritional consultant, a board-certified clinical neurofeedback specialist.

She has over 20 years of successful clinical experience, including those last case scenarios, those of us who could never find answers anywhere else. She's a world-recognized authority on ketogenic diets, ancestrally based nutrition, and is a popular speaker and educator around the world. She has best selling books including, "Primal Body, Primal Mind," as well as "Rethinking Fatigue" and her newest book, "Primal Fat Burner: Live Longer, Slow Aging," and "Super-Power Your Brain and Save Your Life With a High Fat, Low-Carb Paleo Diet" has been lauded by best selling author and journalist Nina Teicholz, I hope I'm not butchering her name, as a unique and profound contribution to the field.

She has a Primalgenic health certification program, which is one of the best out there. It's called Primal Restoration. And it's a unique and invaluable source of unique cutting-edge information. I really respect her research and I cannot wait to jump in. So Nora, welcome and thanks for being here.

Nora: Oh, Katie. It's so awesome being here. And especially, you know, being here with you, it's really an

honor.

Katie: I'm so glad to have you here. I know, we met at Paleo f(x) and I think we talked for hours and it just flew by. And I know that's gonna happen today. I'd love to, if you could start with a little bit of your background and story and how you came into this health world to begin with?

Nora: Well, you know, I came into this whole health world thing, you know, the same way, a lot of people that end up being practitioners do, you know, we have our own story, we have our own kind of health challenges, I guess. And for me, it was, you know, gosh, I mean, it was, it basically amounted to 35 years of intractable depression, that really wasn't, a pretty severe and intractable depression that really wasn't responsive to anything. And so over the years, from about age, you know, 13 on, I was seeking answers any way I could find them. And every step along the way, I learned a ton, came into some amazing resources, ways of thinking about things that, you know, gave me some new dimension to myself, and some little bit of help here and there.

But ultimately, you know, it took up until a little over 20 years ago, when I stumbled across, you know, this way of eating, and something called neurofeedback kind of close to about the same time that really flipped the switch that have left me depression-free, literally. And also, I had anxiety and panic attacks that weren't responsive to anything else also, that's all completely gone. I mean, those things are non-issues for me now and have been for just over 20 years. But it certainly made me a very passionate proponent of what I've learned. And it's also allowed me to connect a lot of dots from a lot of different disciplines and areas of thinking that many people might not think to connect. And one thing that it also left me with was a profound sense of responsibility to other people that are suffering and that suffering expands well beyond issues that impact the brain and nervous system and, you know, mental-emotional health, but also into pretty much all the other arenas. I've been able to become fairly well versed in a whole variety of issues, things like autoimmune conditions.

I mean, you know, if you look at my Primal Restoration course, you can see, you know, the categories that I've been able to create really in-depth educational modules on that just span from just the whole gamut of things. And so, and all of that's been driven really by just the amount of suffering that I've witnessed going into private practice and being determined to do it, whatever it is that, you know, that I know how to do to help people overcome those, to overcome whatever it is they come in for. And I've been able to be, you know, incredibly successful doing that.

Katie: I know, you told me stories of some of the people that you had worked with, and helped. And it was amazing, because I've been that person in that situation, trying to find health answers and not being able to, and I know just how painful that can be. And I'd love to know, kind of, before we move forward, how you would define your approach to health? I know there's been all these kind of waves of different like paleo and ketogenic and ancestral health, different ways to call it, but how would you define it?

Nora: So, you know, the whole, these genres of sort of paleo and keto, whatever, have come to mean something different nowadays, to virtually everybody claiming to practice them. And way back in 2011 at, you know, in the very first AHS at UCLA, I was heartened by seeing this groundswell of a movement of ancestral health, people interested in ancestral health coming together. But I also saw the writing on the wall, and I predicted back then, I just said, you know, "Industry is gonna get their dirty fingers all over this and gonna take

advantage of it, it's going to be co-opted," and it has been, to a large extent that, you know, that there's a lot of hype, there are a lot of people selling all kinds of potions, and, you know, powders and pills, and, you know, whatever. And, you know, lots of people trying to capitalize on the movement, just coming in as newcomers, and cutting and pasting from other people's work and, and just spewing opinions and picking out one or two cherry-picked studies to support those opinions.

And there's a lot of confusion, it's created a lot of misinformation and disinformation. And I've grown very weary of trying to fit myself like a square peg into a round hole, into either the so-called paleo thing or the so-called ketogenic thing, there's a lot going on that I have a really hard time with. So what I've done is I've kind of decided to sort of set up my own terminology, something that divests itself a little bit of the stigmas and baggage associated with these other highly commercialized terms now, and I referred to it as "Primalgenic." It's my own little trademark. And the whole idea is that when I use that term, it's going to mean one thing and one thing only, it's gonna mean whatever meaning I've given it, and it's never gonna mean anything else, so that people can't just snag it and say that's what they're doing, too. And so effectively what I refer to is Primalgenic is it's about a diet that's focused on foods of absolutely uncompromising dietary quality that are in alignment with our basic human physiologic design. And, you know, our human evolutionary and genetic heritage.

We're talking 100% organic, grass-fed and finished, free of GMOs, pesticides, herbicides, all that stuff. And it includes eating nose to tail, right. Also, you know, it's a minimizing of all the foods that contain significant amounts of sugars and starches for reasons I can go on about for hours, but I'll spare you right now. But, you know, including things like fruits, juices, natural sugars, like honey, coconut sugar, maple syrup, agave especially, you know, the starchy vegetables and stuff as well as all the refined forms of carbs, obviously, which is hopefully a no-brainer for anybody listening to this. And then I promote the consumption of only moderate amounts of protein, you know, that are sufficient to meet but not exceed the basic daily physiological requirements for, you know, maintenance and rebuilding and regeneration of our bodily tissues. In other words, you know, unlike a lot of people in the Paleo-sphere, I call it, you know, this is not a high meat diet that I'm promoting, I do think that there is a solid argument for getting our primary complete protein from animal source foods, and we can go into that in a little bit.

But we don't need to exceed our basic requirements. In fact, there's good reason not to. And the exceptions to that restriction would include like women who are pregnant or lactating or babies, children, teens, you know, that are growing or maybe, and maybe elite athletes. And then ultimately, what I'm promoting is a diet that is very high in, well, that is high, percentage-wise, in dietary fats. In other words, in terms of overall caloric intake where nutrient dense animal fats in including things like essential fatty acids, and other beneficial fat-soluble nutrients like CLA, and the fat-soluble vitamins like true vitamin A, and retinol, K2, D3, all that sort of thing dominate. And then, you know, certain plant-based fats are fine, too, or, and organic olive, avocado, coconut oil, maybe a little macadamia nut, sesame oil, stuff like that.

But, fundamentally, what my approach acknowledges is, is that fat is naturally meant to be our primary source of fuel as a species in the form of free fatty acids and ketones. And that glucose instead is meant to serve strictly an auxiliary or secondary role. And then, you know, I also recommend the consumption of a large variety of fibrous, you know, non-glycemic, you know, vegetables and green sprouts prepared raw, lightly cooked, cultured, whatever is as a person might want for added bulk, you know, antioxidants and phytonutrients, and the detox support and healthy gut microbiome fodder, you know. So, you know, I think plant-based foods in that respect are more important to us than they ever used to be during our long kind of

evolutionary trajectory. And then it's also aligned with foundational principles that are supplied by human longevity research, which is an angle that most people in the genre don't necessarily look at. Most people within the Paleo movement are saying, "Well, if it was good enough for our ancestors, it's good enough for me." And there are reasons why I have a problem with that. So I use human longevity research just to tease out based on the foundational ancestral principles that I think are the only rational starting place, which of them actually serve to optimize our health and which of them, you know, might be less optimizing.

And then I also take into account the uniquely challenging world that we live in today and also our already compromised genome, you know, ever since we adopted agriculture and modern industrialization. And then I also rationally assume that we are much more alike than unlike in foundational physiological design. And that's something I, you know, probably want to get into a little more. But it's a dietary approach that reaches back to our earliest hominid beginnings, and it acknowledges that we were forged by conditions that are quite different than the current time period, the current Holocene, geologic time period. And it automatically also takes food sensitivities and the prevalence of autoimmunity into account. That's an area of considerable expertise for me in part because I'm, for one thing, the only member of my family that doesn't have an autoimmune disease. So I've had to learn a lot, not only to help prevent my own descent into that, into all the problems associated with that, and dangers, but also to help alleviate the suffering of people that I care very, very deeply about. And, you know, finally, you know, the approach, that sort of Primalgenic approach is automatically committed to principles of environmental and even economic sustainability. So it covers a lot, but it's kind of a no-compromise approach. It's one that is highly principled and a little purist, but you know, they also, there's an old saying that if you want to hit the mark, you've got to aim for over the mark, if you want to hope to hit it. So that's my approach to things.

Katie: Oh, my gosh, exactly. And I've made so many notes on points of that that we're definitely going to follow up. One small point I want to make sure we touch on because you explain it really well. You mentioned not too much protein. And I'd love to hear you explain why. Because I think that is a very common misconception in this world and in the health world, and kind of give us some guidelines on how much do we actually need, and how much is too much. And I love that you made the distinction, obviously, growing children need more, pregnant women need more, but give us guidelines there.

Nora: Right. So there's a whole popularity now, there's a whole new genre popping up, the whole carnivore diet, and it's like, "Oh, wow, really? Okay." I mean, we've sort of been there, you know, I think Atkins was in that category. It's, you know, the early, earliest incarnations of the Paleo Diet were all about, "Nope, you can't eat too much protein, protein, protein, protein. Protein power," whatever. Look, we all have a fundamental dietary requirement for protein. But what we need to understand is that, I could probably spend an hour talking about this, so I'm going to try to pull back on the reins, that, you know. We share our genetics with the earliest primordial life that ever existed on earth. And that earliest life on Earth lived in an anaerobic environment, right, in, you know, in very, you know, kind of in acidic seas, and no oxygen really available for respiration or anything else. And the first two nutrients that were available to those earliest life forms, you know, these bacterial like organisms, these archea and things like that were glucose and protein. I mean, those were the two things that were available for energy and reproduction. And so, all of those mechanisms around reproduction of life kind of got established at that time. And is still kind of true to some degree, you know, today. And so, when, and then once an oxygen-based atmosphere evolved, then a whole new kind of cell came into being, and that was the, you know, the first cells were prokaryotic cells, they lacked a nucleus, they, you know, just sort of divided, you know, by mitosis. And, you know, the cells were pretty much the same. Once the planet developed eukaryotic life, then something called cellular differentiation suddenly came

into play, and was able to occur and that allowed for much more sophisticated organisms to evolve that had distinct, different kinds of tissues in their bodies, and then we're able to develop a much greater diversity of life and all of that. And for the first time, something called oxygen became available for respiration. And something called fat became available as an energy source, because fat is an oxidative fuel.

Well, our fundamental reproductive mechanisms in terms of the things that stimulate cellular proliferation were already established by, you know, sugars and proteins, but fat basically came in as something that was a little bit separate from those conditions. And so, you know, so fast forward to where we are now, if we consume nutrients in excess of what we need to maintain our own, you know, our own physiological makeup, our maintenance and repair... And the thing to understand that when we consume proteins, fats, or carbohydrates, and, or, it's not a calorie is a calorie is a calorie. Basically, the first thing that happens where, you know, it's not that they all go to energy, right, we're not a heat engine, we're a complex chemical factory. So these things initially go to replenishing structure, right, to replenishing our cells and all our tissues and making sure we have what we need raw material-wise to make hormones and our, you know, and our receptors and neurotransmitters and all kinds of things. And so there is a very, we have a profound, fundamental dietary requirement for proteins, right? For amino acids. And those are really important to go to replenish structure. We also have, you know, fatty acid requirements that absolutely have to be met to some degree by the dietary intake of fats. However, less than, you know, maybe 2% or so of our actual physical structure is actually comprised of carbohydrates at all. And most of that, the form of connective tissue and maybe some glycoproteins and things like that, that we'd actually don't ever have to consume carbohydrates for it all, those can all be synthesized from a combination of protein and fat in the diet. I'm digressing a little from your question, but I'm getting there.

So with respect to protein, we become pretty efficient at recycling protein that we consume day to day, and in order to replenish our bodily processes and things. But we all require somewhere in the ballpark of maybe, you know, six or seven ounces of actual, like, meat, or fish, or eggs, or whatever in the course of a day in order to make up for whatever we can't recycle. So a human protein dietary requirement is actually not that high. I mean, it's something like 44 to 52 grams a day RDA, which is one of the few RDAs that's probably close to in the ballpark of being accurate. We want to meet but not significantly exceed that requirement and the reasons being, number one, when we consume protein in excess of what we need in order to meet our own maintenance and repair needs, a lot of that will get anywhere from 36 to 58%, depending on whose data you're looking at, will get converted to sugar and used the same way, not very fast, but it will happen. And then the second part of that and, you know, all that implies, but the second piece to that is that when we consume protein in excess of what we need, it triggers a metabolic pathway that was recently discovered in the last couple of decades called mTOR, mammalian target of rapamycin. And I swear I won't get too geeky on you. But what that is, is basically a protein-sensing pathway. And it's constantly looking for, you know, what is the nutrient pool that we have to draw from for reproduction, right. So when you supply protein in excess of what you need for your own maintenance and repair, it triggers that metabolic pathway, which, in turn, triggers cellular proliferation. Now, again, if you're a baby, child, or teen or you're pregnant, looking to become pregnant or lactating or whatever, then it makes sense to want to make new cells. But if you're not any of those things, and, you know, you've been living for, you know, a few decades now in an unbelievably challenging and toxic environment that is our modern day world where we're being exposed to mutagens everywhere we turn. I mean, I could be a total buzzkill at parties if I start listing them all, I'll spare you. But you trigger a mutagenic process, and then you trigger the impetus for cellular proliferation. What are you triggering, you're triggering the potential for cancer and cancer growth.

And so this is one of the principles in human longevity research that also seems to bear out, that the better you can be at moderating your protein intake... And by the way, part of what that does, when you keep it below that mTOR threshold, is it sends the message that, and I'll put it in modern day economic terms that a lot of people can relate to. It sends the message that, "You know, too expensive to build a new house right now. So let's fix the one we've got." And so what your body sets about fixing up and repairing on a cellular level is you and it's an impetus, it's like a loophole in Mother Nature's design that allows you to live long enough and healthy enough, right, nature's like, "Oh-oh, there may not be enough food around. So we want to keep this organism healthy and functional as possible, so that they're able to live long enough and healthy enough and be sharp enough mentally, or whatever, to be able to maybe reproduce another day." And there's the loophole in Mother Nature's design, and it's literally anti-aging in its effects. And so it's, in addition, it also helps to facilitate a more healthy and well-adapted state of ketosis, which is, again, that whole other subject, but something that I make the case for being probably the most natural metabolic state of human mind and certainly the most advantageous. So anyway, that's my in a, believe it or not, a nutshell homily on on protein, but I write about that more in both "Primal Body, Primal Mind," and my newest book, "Primal Fat Burner."

Katie: Yeah, that's why I brought it up, because I think "Primal Fat Burner..." Well, all of your writing is so well done. And I love your explanation, you go so deep, but so concisely, I wanted to make sure that we started with that. And you've mentioned autoimmunity a couple separate times. And I know from hearing my audience that that is, unfortunately, a big, growing problem for a large segment of the population, including a lot of people listening. So I'd love if you could tackle next, I'm just going to keep throwing these big topics at you, just tackle your approach to autoimmunity, because that's really profound that you don't struggle with it. And you obviously have a pretty strong genetic propensity to struggle with it. So I'd love to hear your explanation.

Nora: Right. Well, so and just, you know, so I have this, and trust me, I'm not a marketer, but I just wanted to illustrate that in, you know, in my, in my online educational program, what I have to say about autoimmunity takes up like five or six weeks. So, you know, I'm going to try to be a little bit concise here, but obviously. But the thing that a lot of people don't recognize is that the biggest, you know, cause of morbidity and mortality in the entire industrialized world right behind cancer and heart disease if you look at autoimmunity as a collective whole. I mean, nowadays, it's a much more, I mean, you're acknowledging that it's a big issue, and a lot of people are becoming kind of aware that it's a big issue, people have no freaking idea what a big issue it is. I think it's the single greatest health burden in the world that is the least well recognized, and certainly, the least well addressed. There are more than 100, now, autoimmune conditions that have been clearly identified and another 40 to 50 conditions that are thought to have an autoimmune component of some sort. The vast majority of people that have autoimmunity may never know it, because the standard of diagnosis is so abysmal in mainstream medicine. And the availability of accurate and comprehensive testing is so limited that most people never know. And what they end up with is a lot of mysterious symptoms, and they go like a bee from flower to flower, you know, to, from naturopathic chiropractor to practitioners of all different kinds in their quest for answers to all kinds of mysterious ailments that seem to be plaguing them.

They spend tens of thousands of dollars, they got shopping bags full of supplements. They're walking around with Tupperware, you know, because, members of the Tupperware club because they seem to not be able to eat anything without having a reaction. And they're, they're spiritually broken. They're suffering because they have no answers. Again, part of the reason for this is because the standard of diagnosis is so abysmal, you know, just as a for instance, you know, as somebody who's been working with, you know, Cyrex Labs, by the way, the only lab in the world, I have no financial ties to these people at all. But they are the only lab in the

world that is actually doing accurate and comprehensive testing in this regard. Anything related to immunologic issues, like food sensitivities, environmental sensitivities, heavy metals, microbial autoimmune, you know, issues, and, and on and on and on. In addition to identifying the earliest stages of autoimmunity, this is the only lab in the world doing that with any accuracy at all. And so I recommend them exclusively. There's just nobody else, they're 10 to 20 years ahead of everybody else. And again, they, you know, Aristo Vojdani, who's the mastermind behind a lot of their testing procedures, is the most meticulous scientist I've ever met who I and, you know, he's like family to me, I love that man. And I love him because I see his passion in trying to do the right things in the right way for exactly the right reasons. He's just, he's uncompromising in his approach and that's so rare. And so, if you want answers, that's where you go. But at any rate, I've been looking at Cyrex results for a long time now, and, you know, over a decade or so that they've been around. And I can tell you, it's not that unusual, just as a for instance, to see a person showing up with what are called 21-Hydroxylase antibodies, I'm just throwing this out as an example, which is antibodies against your own adrenal tissue.

And yet, you're not diagnosable with what is called Addison's disease until, and this is the medical standard of diagnosis now, until there has been at least 90% tissue destruction, right. So say you, you're only halfway there, you're only "at 45%." Well, you know, you're going to notice that in every part of the way you feel and function, you're going to assume that your adrenals are all burned out, which, by the way, I don't consider this being more than maybe 10% of what constitutes the totality of what people think of as adrenal fatigue or adrenal burnout. And I go into that my book "Rethinking Fatigue," but, you know, you will certainly notice this, but you will have no answers. You're going to think that, "Oh, my adrenals must just be burned out," and there couldn't be anything further from the truth. I'll just give you a hint, there is no such thing as adrenal burnout. And this is the way people are struggling, close to 90% of people with so-called low thyroid function are actually dealing with thyroid autoimmunity and don't know it. I mean, that's how prevalent it is. And you're unlikely to have that diagnosed by your endocrinologist or your GP or whoever diagnoses it because, you know, if you are if you are having a thyroid autoimmunity, which is true, more often than not, they're going to have absolutely nothing to offer you. They're going to handle it the same way they handle, you know, primary or secondary hypothyroidism related to other things. You know, if your TSH is elevated, they'll throw some thyroxine or some thyroid glandular at you and call it good and your blood chems may look pretty following that. But you may still have absolutely every symptom associated with the condition because those cytokines generated by autoimmunity also can block thyroid hormone receptors and prevent you from using the thyroid hormone that you're taking, you know, supplementally. And so you end up with every symptom. And you're, you know, and these are some of the most spiritually broken people around.

I'm the only woman in my family that doesn't have Hashimoto's. And, you know, it angers me to be aware now of knowing all the things I know now, and all of the unnecessary suffering that was suffered by and continues to be suffered, actually, by all the women around me and my family. It's nuts. The thing is, is that if you have an autoimmune thyroid condition, your primary problem isn't thyroid, it's immune, and it needs to be addressed on that level if you want to have any hope, any semblance of hope of successfully managing the condition. And the really good news in all of this is that there is a ton you can do. And this is all the realm in terms of, you know, solutions or management tools are really in the arena of natural health of things you can do yourself at home, naturally, in order to modulate your immune system and mitigate the effects of all of the things that are, you know, that are triggering the condition. And, you know, I talk about this, you know, at considerable length, but it's like, we'd almost have to devote an entire show or a couple shows to really going into what it takes to successfully manage all this stuff. But I can tell you that it's about fundamentally identifying, number one, what the problem is because so many people just don't know. But once you have the



problem identified, recognize that the phenomenon of what's called polyautoimmunity, in other words, generating autoantibodies against more than one tissue in the body is more the rule than the exception nowadays, it seems that... You know, I look at the production of antibodies against one's own tissues as being a little bit like finding a cockroach, you know, where there's one, there are often bound to be more, at least it's increasingly common. So I urge people to really get to the bottom of that, do the testing so that you know and you're not just guessing.

And then also, you need to be able to identify the triggers. Identify the things that are triggering this autoimmune condition. And now, food sensitivities are an obvious culprit. I would say if you know you're autoimmune, lose gluten yesterday. I think everybody should anyway. And I can make a great case for that. But particularly, if you have autoimmunity, you have to understand that out of the 150 or so either autoimmune or autoimmune related processes that are out there, all of them have been linked to one degree or another with gluten as either an initiatory or an exacerbating factor. Lose the gluten. There's nothing about it that is going to deprive you of anything in life, in terms of, you know, your health needs. It's much more likely to compromise than it is to support your health. No human being can actually digest it anyway. It always compromises your gut and your brain even if you don't have an immune reactivity to it. And so, just lose it. And, and I make the case in my newest book of, unless you've tested with Cyrex and you know differently based on those lab results, I tend to recommend erring on the side of losing dairy, as well, just because half of everyone that has gluten-immune reactivity has dairy as a cross-reactivity. It's not very well digested. It's not very easy to come into extremely high-quality dairy. But once you've been sensitized to dairy as an antigen, in other words, your immune system is reacting to it, it doesn't really matter whether you the milk you're consuming, or the milk products are organic, or whether they're totally from grass-fed animals, whether they're raw or pasteurized, whether they're from A1 or A2 allele cows or, for that matter, whether it's coming from goats, or sheep, or camels, or whatever else.

So once you're sensitized to that protein, you need to understand that that's it. I mean, that's it, the gluten and dairy are two that need to be looked upon as permanent problems in people that have autoimmune conditions. You just have to look at it that way. And I know that there are popular writers and programs that say, "No, no, just heal the gut, and you can go back to this." I can make arguments against that all day long if you want. I'm happy to go into it. But it's not true. And I'm not in the habit of telling people what I think they want to hear. And that's something you should all know about me. I'm not a nutritional politician. I'm never going to tell you what I think you want to hear necessarily. I'm going to tell you what I have painstakingly, you know, determined through incredible amounts of research and also more than 20 years of seeing what works and what doesn't in suffering people. I'm going to, you know, tell you what is true based upon that, what I've come to believe is true. And, you know, and if I come to modify that belief through something or other, then I'll come clean on that, too. But I'm very, very careful about what I give out as advice nowadays or what I make as statements about things. So there's that. But, you know, there are a lot of other things that can also contribute to autoimmunity. I mean, pregnancy can trigger autoimmunity. Stress can trigger autoimmunity. You know, exposure to all kinds of adverse influences and environmental compounds and heavy metals can trigger autoimmunity. But it's the ongoing triggers that we need to become mindful of, and again, testing is the best way of doing this. And, you know, and I realize I'm talking a million miles a second because there's so much I want to cover.

I have a bit of a problem with a lot of the AIP programs out there. I just want to go on record as saying they're a dime a dozen, everybody's got their little AIP program, their solution to autoimmunity, their blanket solution for everybody and I have a problem with this for a couple of reasons. Number one, what they tend to do is

carpet bomb you with restrictions. What they do is they hone in on what some of the more common antigens, some of the more common sources of immune reactivity are, and just eliminate those right at the get-go. whether or not those things are necessarily problematic for you. When things become too restrictive, I have a little bit of a problem with that for a couple of reasons. Number one, it's not very sustainable necessarily. But, number two, and more importantly, it interferes with another very important key factor when it comes to recovering from autoimmunity or better managing your autoimmunity, which is something called improving your oral tolerance. And the fewer foods you consume, you know, think of your average autistic kid, right. And I actually look at autism as a form of brain autoimmunity. That's a whole other subject, too, but in effect, what you have are these kids that are usually incredibly fussy eaters, to the point where all they want to eat is Goldfish crackers, and drink chocolate milk. Right. Just the two food groups, stuff like that. Very, very limited, they're fussy about that. And when you restrict your diet to just one or two kinds of things, or just a small handful of things, you're also decreasing the diversity of your microbiome. And when you decrease the diversity of your microbiome, you're decreasing the capacity of your microbiome to strengthen your immune function and the robustness of your immune response and the modulation of your immune response. And you actually start digging yourself into a deeper hole.

Now, I do think that there are some good reasons to have certain restrictions that I make the case for, you know, the utilizable sugars and starches, you know, in terms of carbohydrates. But I also advocate for an enormous variety of vegetables and greens and sprouts, and prepared a lot of different ways. And also, an enormous variety of animal source foods because animal source foods absolutely contribute to the health of our gut biome. That's not something that's appreciated much. People think it's all about plants. It's not, you know. There are fermentable fibers in animal source foods, as well. And some of those are actually more effective than a lot of prebiotic supplements like FOS and inulin that people take to feed their guts. So it's a nose-to-tail proposition. Consuming a diet that's in alignment with our human evolutionary and genetic heritage, and, you know, minimizing those foods that are most likely to cause us problems. It is true that the majority of the foods that are likeliest to cause us immune reactivity problems are those foods that are associated with, are basically post-agricultural foods. Grains and legumes and starchy, you know, roots and tubers and things like that, that actually have a lot of complex alkaloids and things that a lot of anti-nutrients you have, then you have nightshades and things. I mean, not everybody reacts to nightshades. But they're also, you know, there's good evidence that we did not consume these a lot of these kinds of foods in any consistent or meaningful way until so recently in a revolutionary heritage that our immune systems have not had an opportunity to adapt. And part of what's going on with the whole agricultural, and particularly monoculture, agricultural landscape is that every time we hybridize grains, or legumes, or whatever it is, we're actually creating 5% new proteins that our immune systems don't know what the heck to do with.

And so we're literally creating a moving target for our immune systems and our evolutionary capacity to deal with these things. And it's quite literally become impossible. And we know from research that was actually out, oh, gosh, it was at quite a number of years now, close to 10 years ago, now, that research was published showing that the incidence of full-blown celiac disease, which by the way, is only about 12% of what comprises the totality of what can be called gluten immune reactivity. But everybody talks about celiac disease as if it's like the thing. That's increased over 400% in the last 50 or 60 years alone. And so we're not becoming more adapted to these foods as time goes on, we're becoming less adapted. And we need to understand that we're not living in the world of our prehistoric ancestors anymore, much less the world of our great-grandparents, our grandparents, or even our parents. So we need to understand this, and we need to also understand that we have precious little wiggle room with respect to what it takes to have any semblance of health, much less, you know, to be shooting for optimal health.

One really important point I'd like to make, too, and I think this relates to autoimmune, it relates to a lot of other things. We are wired as a species that evolved in the wild and as any wild thing is, we are wired to know how to respond to tangible threats in our environment. So say, a saber-toothed tiger jumps out from behind a bush or something like that, you know, that's tangible, you know. We know to recognize that as a threat and to take action in order to avoid that threat, right. We get charged by a cantankerous woolly mammoth, that's tangible, we know that that's happening. We know we need to do something about it, or a warring tribe or something marches into our camp, okay, that's problematic, we know it. Or maybe there is a big storm, or maybe there's a volcanic eruption, or there's seismic activity, or there's a famine for that matter, those things are tangible. We recognize them as very clear threats that we need to respond to, and we're wired to respond accordingly to those things. But, you know, nowadays, what we're doing is we are living in very artificial kind of climate-controlled environments where it's always 72 degrees, even if you're living in Minnesota in February where it's 40 below outside, winter ain't coming for us anymore. So we're sitting there, you know, in these nice, comfortable environments, no matter what the temperature is outside, hot or cold, and nobody has to take more than two steps in any direction, you know, to grab a handful of something they want to call food and shove it in their face, you know. And, you know, they're sitting on their couches at home watching "Dancing with the Stars" and the Kardashians or whatever, and eating Cheesy-Doodles and thinking that they're sitting in a hot tub in Vegas when, in fact, they're like a boiling frog with the flesh boiling off their bones. Because the thing is today that most of what threatens us today, and I believe we're living in a more hostile environment that anything our prehistoric ancestors could wrap themselves around. But what's most threatening to us today are those things that are actually invisible to us, and we're not wired for that.

We're not wired to be responsive to contaminants in our air, water, and food supply. We're not wired for knowing how to deal with things like EMF, you know, to respond to things like EMF or radiation contamination, or GMOs, or, you know, glyphosate in the rainwater, whatever the heck it is. We're not wired for that. And so we tend to be excessively complacent today and we feel like we can just sort of get away with, you know, everything in moderation. To which I say "Really?" You know, this whole idea of, you know, of everything in moderation I consider that nutritional politics, to be frank. You know, the whole idea that, you know, that we can just sort of, you know, eat what we want or do, an 80/20 rule, whatever, is a mythology. I mean, really, how much inflammatory immune-disregulating, you know, autoimmune-triggering, you know, metabolically destroying whatever it is, indulgences do you want to enjoy in moderation, right? I will tell you that if you have an autoimmune condition, even trace gluten exposure can be sufficient to trigger an inflammatory response in your body, and particularly in your brain, actually. The inflammatory in your brain can actually rage on for days, weeks, months, years, even decades. And a single exposure to something that to which you may be immune-reactive can be sufficient to trigger a whole new autoimmune process. So we, again, we're, I don't mean to be a buzzkill. But we...there are things that we need to be aware of and it doesn't actually have to be that complicated or difficult.

There are certain predictable steps, the good news is there are certain predictable steps that anyone can take to modulate their immune function. And in fact, a lot, there are some common threads, common principles in all autoimmune conditions that anybody can apply to far more successfully manage almost any autoimmune condition. But it also pays to know what tissues are involved so that you can offer those tissues additional support in the process of doing the other stuff. So number one, you identify the triggers, you know. Number two, you basically identify what is causing, you know, the inflammation, other words, by identifying the triggers. And then you have to heal the damage or you have to basically, while you heal, you address the leaky gut, but you also simultaneously have to address oral tolerance. Oral tolerance and leaky gut are actually kind

of a chicken and egg thing and a lot of people just address the leaky gut, it's more than that. And then you basically go about healing the damage and, you know, in the process, you're modulating your immune function. And, you know, you don't want to stimulate your immune function, you want to modulate your immune function from there on out. And I offer a lot of very practical steps of how to do all that. But, you know, I'm very, I'm into getting people to understand why they need to do what they need to do, and not just saying, well... I don't respond really well to people saying, "Well, just tell me what to do and I'll do it, and I don't need to know why." I think it's important to know why. So that, you know, so that you don't lose track of why you're doing what you're doing in the first place.

Katie: I totally agree with that. And you made so many good points. Again, I have so many more topics to follow up on. But I think the point you made about, like, longevity and our ancestors was so well made that, and I've said this before, as well, like they didn't have to face nearly the number of inputs that our immune system has to deal with. This is never before seen in history. So we don't get the luxury of just moderation and everything living as normal and getting to be healthy. We have to be proactive in today's world because we have so much more that our bodies have to deal with than ever before.

Nora: Yes, yeah, I agree.

Katie: So I'm going to leave a teaser because I know we're not going to get to every topic today, we have a little bit more time, but I think we're gonna have to do, if you're up for it, a couple more episodes, one on adrenal fatigue, or fatigue specifically. And one on veganism and vegetarianism. We'll leave those as cliffhangers.

Nora: Oh, yeah, that's the whole... Boy, I could go... Yeah, for sure. I can take that on, and I do it with a lot of respect because I'm not interested in creating polarization at all. In fact, quite the opposite. I'm sick of it, of polarization.

Katie: I agree.

This episode is brought to you by Furo Health, where I recently bought a cold therapy tub plunge and I'm absolutely loving it. We saved up and prioritized this for our home because of the many benefits of cold therapy and now we can sit in 42-58 degree water anytime we want to get the benefits. Athletes have been using cold therapy for faster recovery for years, but it has many other benefits as well, including increased circulation and lymphatic flow, immune system boost and increased focus. A 2007 study even found that cold water exposure can help alleviate depression symptoms, and if used on a regular basis, it may be as beneficial than prescription medications in lifting moods. The reason is due to the stimulation of the dopaminergic transmission in the mesocorticolimbic and nigrostriatal pathway. In layman's terms, cold water triggers an increase in mood boosting neurotransmitters and make you feel happy. Ever jumped into cold water and immediately laughed outloud? That's part of the reason why. You can check out the tub we bought and use daily at [furohealth.com](http://furohealth.com)

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friends to join you and you check in each day via video to prove that you did it. If you miss a day of the challenge you get charged a penalty and the winner takes the whole pot so you can actually win some serious cash while getting better at a habit you want to get better at anyway. People are using this from anything from flossing their teeth to reading each day or exercising or going to bed by 10pm. If you want to check it out, just download the Spar app from the App store and jump in.

Katie: I want to make sure we touch on, too, because it kind of related to some of the topics you've talked about. I've said this, as well, like we should be eating, if you want to call it that, essentially a plant based diet by volume, and that we should be consuming lots of different plants, that doesn't mean the majority of our calories come from. And I know you and I talked about this a little bit, but I'd love to hear you weigh in on the keto diet. Are there special considerations for women with eating lower carb? Because I know a lot of experts say women weren't made to eat low-carb, and we need more for our hormones. So I'd love to get your take on that. And if we do need to cycle in healthy carbs more often than men or how you approach that?

Nora: Right. So here's something, one little factoid that people who are making those recommendations habitually overlook, conveniently overlook is the fact that of the three major macronutrients, proteins, fats, and carbohydrates, the only one for which there is literally no scientifically established human dietary requirement, not in any medical textbook, not in any textbook of human physiology for man or woman is carbohydrates. We can literally manufacture all the glucose we need from a combination of protein and fat in the diet, you know, so, you know, and if we had a fundamental dietary requirement for carbohydrates, it's pretty unlikely that we would have survived as long as we have as a species. But the fact of the matter is, is that, you know, we don't, we are not fundamentally designed to have a carbohydrate-based metabolism, and I make the case for this rather exhaustively in "Primal Fat Burner," we really are fundamentally designed, extraordinarily well designed to operate with a fat-based metabolism. Now, if a woman happens to be struggling with her hormonal balance, if, you know, if she's on a ketogenic diet or something like that, then it's absolutely time for her to dig deeper to understand what it is that might be underlying that problem. And it could be any number of things, right. And there are lots of different things we could point to as potential causes, but a carbohydrate deficiency is absolutely not one of them. And again, if the consumption of carbohydrates helps a person feel better, that doesn't mean the carbohydrates are in any way essential to them any more than like a, you know, you have chronic headaches every day. And you found that, hey, taking an aspirin every day really helps those headaches. Well, that doesn't mean that you had an aspirin deficiency, right. You know, and in fact, if you keep relying on that daily aspirin to deal with a headache, what are you overlooking in the process? You're overlooking something a lot more foundational to what is underlying the problem that could lead you to digging yourself into a deeper hole down the line.

And so carbohydrates may be a palliative for some women, but there is no scientifically-established requirement at all. And I've got so many citations supporting that, it's ridiculous. There just is no such thing. And I know that there are a lot of politicians, nutritional politicians out there that want you to believe that, "No, carbs are essential for something," they're not. They're absolutely not. Look, I'm a postmenopausal woman, and, you know, I... Of course, I'm, you know, admittedly, but I mean, I'm, you know, dealing way, way better with menopause than other women in my family are. And, you know, these things are not an issue for me. So, but, you know, you have to... The thing about ketosis, nutritional ketosis, for instance, is that, and I pointed this out at the beginning of the show, there's many different versions of this as there are people claiming to practice it. I'm highly specific. I'm very uncompromising and I'm very meticulous when I talk about

how it is that you're, you know, most likely to be able to optimize this approach for yourself. And, you know, and I offer, you know, how to do that in a fair amount of detail, you know, certainly in my books, but and in my coursework, and that sort of thing. But yeah, it's a myth. It's one of the myths and there are lots of them. So that's my take on that.

Katie: Yeah, I think that's a good point. And like I said, that's been my advice over and over to when I get asked about it, and when I eat low-carb in a way that would make me be in nutritional ketosis, it's still largely vegetables and with, like, you mentioned moderate protein, healthy sources of fat, but like a wide variety of vegetables, I know you're big on that, as well. Like you mentioned the sprouts, the fermented foods, the wide variety of different prebiotic foods, that we're actually feeding our gut bacteria correctly.

Nora: Right. Well, and by variety of animal source foods, too, that nose to tail thing, and we so easily forget that because in our culture in particular, you know, less than Europe, but here in, you know, in the Western, you know, kind of United States and probably Australia, people are a little bit, they're not into organ meats and stuff, you know, they don't think about the nose to tail thing, they think about chicken and steak. And so we need to incorporate those varieties of foods, because those also add to the diversity of our gut biome. So, but yeah, anybody looking at my dinner plate would just say, "Oh, look, she must be vegetarian or vegan or something because look at all those vegetables," and then they look a little more closely, and they're like, "Oh, no, look, they're bits of meat in there." And, "Oh, hey, it's all glistening," you know. So in other words, the primary calories are coming from fat. By the way, all large mammals are actually designed to derive the majority of their calories from fat, including cows, including the animals, the herbivores, that are actually designed unlike us to eat a carbohydrate-based diet and but, you know, even among the animals that are designed to eat a carbohydrate-based diet, what are they doing all day? Their faces are in the grass, they're in the bushes, they're in the trees or whatever because they have to eat constantly in order to be able to meet those fundamental nutritional requirements they have. But where does a cow actually get its calories? Well, you'd be interested, many of you, to hear that at least 70% of the calories that a cow uses for energy are not derived from carbohydrates at all, but instead from short-chain saturated fats from the bacterial fermentation of all that fiber. And herbivores have a fermentative-based digestive system that allow them to do that. But we're designed to get these fats, and in a much greater variety of much more sophisticated fats, from animals that have already synthesized all these fats for us, which has allowed us to evolve leaps and bounds over other animals and other primates, even because, by far, as human primates, we are designed to consume the most fat of all.

Katie: Yeah, I think that's a brilliant explanation. And I can't believe that our time is wrapping up already. Like I said, we're gonna have to do follow-up episodes because I could talk to you forever.

Nora: I'm just getting warmed up, Katie.

Katie: Exactly. So you'll have to come back. It's on the record, you have to come back.

Nora: All right. Awesome.

Katie: But as we wrap up, a couple quick, rapid questions I'd love to ask are, other than your own, which will be linked in the show notes, of course, is there a book or books that have really made a profound impact on your life?

Nora: Yeah, I mean, there have been a few along the way. I would say, you know, and of course, this is outside the genre that we're talking about. But the now sadly late Swiss psychologist Alice Miller wrote a book called "Prisoners of Childhood," that was the original title. It was also at one point re-titled "Drama of the Gifted Child," and that was a massive revelation to me. I'd also basically, I would also include, I think, her follow-up book that was called "For Your Own Good," and also most anything and everything else that Alice Miller has ever written. I believe her work more than almost anyone else's helps to illuminate the scaffolding upon which individual and mass suffering is basically forged in our society. And those misanthropic sociopaths that are largely responsible for controlling costs and engineering all the suffering in the world, I am here to tell you they were not born, they were made. And having worked with the brain full-time for more than 20 years now, along with having worked with more than my fair share of sociopathic disorders, in fact, that became a specialty of mine, I actually work with reactive attachment disorder a lot in my practice, I was very, very good at it. I can tell you that the brains of persons like this operates surprisingly different than ours do. And the only place in the world that these persons feel at all safe is in a position of power and control at literally any cost. And empathy is completely unknown to them as is a basic sense of human conscience or a capacity to connect in any meaningful way to other human beings.

Genuine empathy and altruism are, in fact, quite literally not possible for them. Though they prey on our instincts by manipulating these ideas with social, political, and healthcare policies. So genuine human emotions other than rage and fear, which are the only authentic emotions for people like this, elude them completely, other than as some sort of manipulation, you know, say the script calls for tears so they may cry solely as a means of manipulating others. This is our Achilles' heel as a society, because the average good and genuinely well-meaning person simply cannot fathom this degree of blatant deception without conscience or of total disregard for human life or for planetary survival. Anyone watching the news every day is basically being gaslighted into believing that they are helpless, hopeless, and completely powerless to the forces that surround and control them. And people need to realize that the media is a precision tool for social engineering, and they basically need to turn CNN off like yesterday. But Alice Miller's work really helps to illuminate how, you know, we even have people like this in our society in the first place. And where we are likely to find them and what we need to understand about that, and...

So she was profoundly influential to me early on, because I had a trauma history and this gave me the first understanding, I think, and gave me the first inkling of compassion for my own suffering, which is the only way you can develop compassion for anyone else is if you have learned to develop a genuine compassion for yourself. And I think a lot of us, you know, really failed to develop that, you know. We laugh off the ways in which we got picked on as a kid or maybe got, you know, bullied or smacked around or whatever it is in life. belittled. We tend to minimize that. We tend to want to rationalize the things that our caregivers did and try to tell ourselves they meant well, or they did the best they could. And, you know, until you come to a reckoning of that, you really end up being a little bit blind to the rest of what constitutes suffering around you, and you're less well equipped to do anything about it. And so I think Alice's work is really important. But, you know, there have been other books along the way, certainly, that have had, you know, profound influence on me, you know, Weston Price's, you know, "Nutrition, Physical Degeneration," and, you know, books like, well, this was as a kid, I read Farley Mowat, you know, "Never Cry Wolf." And I knew at that age, you know, when I was, like, five years old, that if I could do anything in this world, it would be to go to the Arctic and live with a family of wild wolves, which I ultimately did. That's a whole other show. And, you know, I developed a tremendous interest in consciousness and shamanism and, you know, in my teens, I read Castaneda and some of his stuff influenced me, you know, for a while and, you know. I could go on and on, but, you know. Alice, I...my great regret is that I can't get on bended knee to her face and thank her for some little semblance of

sanity that I might have because her work. I feel, in many ways saved my life, and so I'm deeply indebted to her.

Katie: Wow. Well, I'll make sure those are linked in the show notes as well as, of course, your website and all of your books and your work. So for anyone who is driving or working out, don't worry about writing them down, they're there at [wellnessmama.fm](http://wellnessmama.fm). but like we're gonna have to do more episodes, it's going to happen, but for now, where can people find you online if they want to learn more because I feel like you just gave us a gigantic springboard into a ton of information and you are one of the most detailed and prolific researchers I know. So where can people find you?

Nora: My main website is [primalbody-primalmind.com](http://primalbody-primalmind.com) and also I have my educational program which is called "Primal Restoration," it's all about restoring foundational health, restoring our primal birthright as I like to call it, and you just go to [primalrestoration.com](http://primalrestoration.com) for that. So those are the two primary, you know, points of connection. I have [primalfatburner.com](http://primalfatburner.com), too, which is about that book, but it links my, "Primal Body, Primal Mind" links to that if you want to go there.

Katie: Awesome. I'll make sure those are linked again in the show notes. And Nora, literally, I could talk to you all day. But thank you so much for your time. I know that you are very busy and you are often around the world educating people and I am so honored that you would take the time to be here.

Nora: Oh, my gosh, I'm so honored that you'd ask me, Katie, and I'm so, you know, happy to have connected with you because you really are, you know, one of the few thought leaders in this genre that I really do see as doing the right things in the right way for the right reasons. It was so heartening to connect with you and to realize just how much we share in common and, you know, I cherish those kinds of connections in this world because they're few and far between. So, you know, good on you for doing all of what you do.

Katie: Thank you so much. That means a tremendous amount and, of course, thanks to all of you for your most valuable resource, your time, and listening and I hope to see you again on the Wellness Mama podcast.

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