



Episode 436: Are Bras Making Us Sick? The Breast Disease Link With Sydney Singer

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Katie: Hello, and welcome to the "Wellness Mama" podcast. I'm Katie from [wellnessmama.com](https://wellnessmama.com). And this episode took a lot of turns that I didn't expect and it was super fascinating. I am here with Sydney Ross Singer, who is a medical anthropologist. He's the director of the Institute for the Study of Culturogenic Disease and a pioneer of applied medical anthropology. I know that's all a mouthful, but he uses his training in medicine, biochemistry, anthropology, along with his co-researcher and wife, and they've made some really groundbreaking discoveries into the cultural causes of disease that link into a lot of the medical causes.

They became breast cancer researchers when his wife Soma discovered a lump in her breast, and they performed the world's first study on the link between bras and breast cancer. It's called Dressed to Kill. And for 30 years, they have been doing additional research in this area. And we start there, but we go so many directions in this podcast, including a fascinating link between the voice and thyroid health. And I mentioned my personal experience with this that I had not connected until listening to him during this episode. He has some really fascinating research on sleep position and it linked to health, an unusual cure for migraines, and a whole lot more. You will find this episode super fascinating. I really enjoyed it and I cannot wait to share it with you. So let's jump in. Sydney, welcome to the podcast.

Sydney: Thank you. Good to be with you, Katie.

Katie: I am excited to chat today. And you are the first medical anthropologist that I have gotten to chat with on this podcast. So for anyone not familiar, can you explain what that is?

Sydney: Sure. Well, I'm sort of a pioneer of applied medical anthropology. And what that means is I try to look at how the culture makes us sick. So I use my background in medicine, biochemistry, and anthropology to understand the body, and then try to figure out how the culture teaches us to do things to our bodies that affect us and fix our health, the cultural patterns, and habits. I mean, it's something as simple as smoking or drinking. Those are all cultural habits that we're taught, and they obviously have physiological impacts. And so we study, like, other ones that people don't think about or that often are difficult to think about because they're so central to the culture that people don't even wanna address them, address these issues.

Katie: Gotcha. Okay. That makes sense. And the reason I wanted to have you on today, I think I first found your work and linked to you years and years ago. And this is something that I have written about, but we've never tackled on this podcast, and that is the link between breast disease and bras and also, I would guess, a lot of other things that we are doing culturally. I know there's a lot of different directions that we can go here. And I know this can also be a somewhat controversial topic. But to start broad, can you just walk us through some of the high-level links there that we see?

Sydney: Well, in the bra issue? Is that what you...? I could address the bra issue.

Katie: Yeah, let's start there.

Sydney: Yeah. Well, what's happening is, you know, there's no physiological need for bras. They're purely for cultural aesthetic purposes. And aesthetics or cultural, I mean, there's no one way breasts should look, except the way nature made them. And the problem with bras is they change breast shape for this cultural fashion design. And when you change the shape of the breasts, you have to apply pressure to do that. So the bras are constantly compressing the breasts. And that's why they're elastic and they pushing in for the breast to change their shape. And what you think of as support is actually lifting and pushing of the breast tissue into a direction that it wouldn't be without the bra. And whenever you do that, you're applying pressure. And pressure interferes with circulation. Our bodies are not meant to be compressed from the outside. Anything that compresses them, you'll see marks in your skin. The bra leaves these indentations and marks around the chest and the up shoulders and around the back. And those are signs of constriction.

And the thing that gets constricted the most and the easiest is the lymphatic system. And the lymphatic system is a mystery to a lot of people. They haven't really heard of it or they don't understand it. Even in medicine, it's under-discussed, under-appreciated, and doctors really don't know a lot about it either. The lymphatic system is really your circulatory pathway for your immune system. And it consists of lymph nodes,

which are factories for white blood cell production or, like, filters. And the fluid that goes to these lymph nodes is delivered through tiny microscopic vessels, very tiny. And they have no pressure in them and they originate in the tissue. So, in the breasts, you have your cells in the breast that all of our cells are basically in a fluid medium.

And this fluid medium allows exchange of nutrients between the cell the bloodstream that these nutrients ooze out of the capillaries under pressure, goes into these spaces between the cells, the cells discharge their metabolic waste products. This fluid is delivered now oxygen and nutrients. And then the fluid that the cells bathe in goes through these tiny vessels back through the lymph nodes to look for any...see if it's picked up any virus particles, bacteria, or cancer cells. And if it does, it mounts an immune response, which happens when lymph nodes get inflamed. Eventually, this fluid, it's one way from the tissues to the lymph nodes and then back into the bloodstream.

Now, if you wear any constrictive garments, the pressure of the garment interferes with these tiny lymphatic capillaries. And it prevents the fluid from properly draining from the breast. And what women will experience is that...And that's called lymph stasis. Stasis means, like, stagnation, you know. And lymph stasis has been known to be associated with cancer. It causes cancer. That's been known since the 1930s. And so you need to circulate. And the immune system can't fight anything if the tissue is constricted and is basically being cut off from the rest of the body. You know, our bodies can take a huge amount of insult because we have mechanisms for healing, but when you interfere with circulation, that it doesn't work. The key for all health, in my opinion, is proper circulation and properly functioning organs.

But your body can't clean up any trauma or cancer cells or infections or any of that if its circulation is impaired and the tissue will ultimately deteriorate. Oh, here we have mild chronic lymphedema of the breast caused by the bra. And women will experience breast pain often before their menstrual period comes because, at that time, their breasts are actually swollen with more fluid because of estrogen, which is a hormone secreted during your cycle. And it peaks before your period and the breasts are swollen, actually larger than they normally would be. The rest of your body is too. And women are wearing the same size bra so it's even more constrictive at that time, and they feel much more discomfort. There's a lot of breast pressure and that causes the pain. The fluid will eventually collect into spaces which creates a cyst. And many women have breast cysts, which they need to get needle aspirated frequently, sometimes several times a year, sticking a needle into the system, sucking out the fluid and they don't know what's causing it. And sometimes doctors say, "Wear a firm a bra if you have this problem," when actually the bra is causing the problem.

And then eventually, you know, the breasts are also not able to flush out all of the metabolic waste properly. So it's sitting in its own waste. And all the pollutants that we take into our body in our food, you know, petrochemical pollutants like pesticides, and herbicides, and plastic residues, and then in our air, all the air pollution and water that we drink, any contaminants, many of which can cause cancer, you know, these course through your body and needs to be flushed out of the tissues by the lymphatics. And if your lymphatics are impaired because of constriction from a bra, these toxins will remain in your breast tissue longer and essentially being targeted there. And they can cause cancer. And we're aware of, many people are increasingly aware of environmental toxins causing cancer. And we live in a pretty toxic world. And any damage including

radiation damage to the breasts from mammograms, or other x-rays to the chest, any other environmental factors that can impact your breast health and cause any tissue damage at all, that damage has to be cleaned up by your immune system and it won't be effectively cleaned up if you're wearing a constrictive garment. It's just as simple as that.

And this applies to even wearing, like, an ACE bandage around a bad ankle or a knee or an elbow or a wrist. When you put a compression bandage or anything tight on your body, you are squeezing the fluid out of that area, but you're not letting any new fluid in because the pressure is too high for the blood capillaries to even, you know, deliver fluid. It depends on how tight it is. But if it's tight enough to decompress and, like, people do with ACE bandages and with bras too, you're looking at impaired circulation and the tissue is never gonna get better. I see people wearing ACE bandages for a year for an injury and it's like it's never getting better. And I say to them, you know, "How is it supposed to get better when there's no circulation? You'd wanna massage the area. You'd wanna improve circulation, get rid of tightness, get rid of tight muscles because they compress blood vessels. You wanna loosen your connective tissue. You don't want it tightened and compressed by clothing."

It's a big oversight that medicine has is it ignores the effect of tight clothing on circulation and therefore its effect on overall health. And even though they know it, they know it, they'll say after they take out your lymph nodes for breast cancer to keep it from spreading, which is, like, a terrible thing that just took out your immune system for that, they take out lymph nodes and women will get lymphedema of the breast and the arm because they both mostly drain through the armpit lymph nodes and, you know, once they're out, you just can't recover that function. You know, we need to be actually massaging the breasts, giving them...every day you shouldn't be wearing anything tight, letting them move because there's a natural movement to the breasts when you walk. That bounce that women try to eliminate with a tight bra is actually an important pumping of the lymphatics.

The lymphatics have one-way valves to keep the fluid moving in the right direction. And any movement of the body helps propel the lymph fluid through these vessels to the lymph nodes. So if you immobilize the breasts, they're not getting the benefit of movement, which is one of the big things of exercise, movement, again circulation. So, that's the bottom line about bras. And we did a study on this. And it's been controversial because even though this has been known, actually, it's been known since the 1930s, there were bra patents in the 1950s I found saying bras cause cancer, our bra is better. It's been known for quite a while, but it's one of those things where the culture is so into it that the information is too stressful for the culture to manage. And it's from an economic and psychological point of view of women, at the beginning of this in the 1990s when we first discovered all this, and we did a big study in the United States, which is in our book "Dressed to Kill," it shocked the world about this because they hadn't thought about the bra.

That's when the Wonderbra came out. The same year our book came out in 1995, the Wonderbra started. So they were pushing pumped up cleavage. And we were explaining that that very thing is the worst thing you could do to your body. And sleeping in a bra, you know, wearing...The longer and tighter you wear your bra, the higher your breast cancer risk is. And men and women have about the same risk of breast cancer if the women are bra-free. But as soon as they wear a bra, the longer and tighter they wear it, the higher their risk

rises to over 100 times higher for a woman who sleeps in her bra 24/7 compared to a bra-free woman. So, that's what we were coming out with that message to warn women and encourage further research.

And we found this from our own study in the United States of 5,000 women, about half of them had breast cancer, and we asked about their bra-wearing habits, and we discovered this link. And then we found it makes so much sense. It explains so much about breast cancer. And it was, you know, a difficult thing for a bra-using culture to deal with, especially since it's now going to have to redefine and is redefining. We've been working on this for 25 years. It's redefining cancer research. They're now starting to ask about bras in breast cancer research, like, you'd ask about family history. Of course, that's not in the United States yet. It's in other countries. This has been around the world. And so that's changed and there are now patents based on our research, saying that their bras are less constrictive. And if you notice, there are a lot of bralettes now. Underwire push-up bras are not the only thing you can get anymore. And their sales have plummeted.

Women are choosing to be bra-free, especially millennial women. It's like a third to half of millennial women are bra-free. They want comfort. Women are asking for comfort now, and not just appearance and conformity with some sort of painful, you know, fashion standard. They want comfort and they're giving up the bras realizing, "Why do we have to wear...? If men don't have to wear a bra, why should I? Why should my breasts be an issue all the time?" I mean, and women are asking these questions and being liberated from this inequality. It's really impressive. So, we sort of started all that and there are now dozens of studies showing bras cause breast cancer, but you won't find them easily because this is being suppressed. And the American Cancer Society and the Susan G. Komen Foundation say that this is nonsense. There's no evidence, even though the studies are there. A study was funded by...the government was saying there is no link soon as we came out with this in 1995. Well, before I get into more of this, I wanna take a pause to see if you have any questions because I'm going on with a whole bunch of information.

Katie: Yeah, I've been over here writing some bullet points for the show notes but I definitely...I've read your work before and I can understand the link. Certainly, I would guess that you still run into a lot of probably pushback because it is still so much part of the culture. And I also realize there are going to be situations that women are gonna have to figure out how to navigate. For instance, I've breastfed six babies and there's some logistics that go along with that, like leakage and things like that, that make it kinda helpful to have some kind of not support but just coverage there. And you mentioned bralettes. So I'm wondering, is it the dose makes the poison? You said that if women don't wear bras at all, their breast cancer risk is the same as men but can greatly reducing how tight it is or how much it's worn really reduce that risk, even if there are still times when we do wear them?

For instance, I've had six babies so when I sprint, sprint, like, all-out sprint, it's painful if I don't. And I know that's maybe just partially because I've been used to that for so long. But is it a dose makes the poison thing? Can reducing our amount of wearing them and the tightness go a long way as well?

Sydney: Oh, I'm sure it can. You know, it's not an all black or white thing. It's a matter of degree. And so, you just have to keep in mind tightness and time worn. If you don't wanna wear...If you wanna exercise...And by

the way, my wife, you know, she had a lump in her breast, which got us into this. If you read "Dressed to Kill," you know our story of how we got into this area. It went away when she stopped wearing her bra. But at first, and she's large-breasted, she had some discomfort running or rebounding without a bra on. But after a few months, the breasts actually lift in tone. And we've been doing an international bra-free study now for a couple of years. Ever since "Dressed to Kill" came, we have a second edition just came out with all the new research and all the results, the reactions we've had, the resistance, you know, incredible story. We have that updated in the new edition of "Dressed to Kill" in 2018.

And at that time, we also started the International Bra-Free Study, which is still ongoing and women can join. And it's a brafreestudy.org. And it's free. And what we do is we have women just get rid of their bras and then we ask them what their experience is. And it's amazing what we found. Not only do cysts and pain go away, including menstrual discomfort, when you get rid of the bra, but the breasts actually do lift in tone. And that's because when you're wearing the bra, not only are they heavy from lymphedema, from the fluid, but also the ligaments that naturally support the breast inside, the Cooper's ligaments, they atrophy and weaken if you have an artificial support. It's like putting your arm in a sling. Your ligaments were weakened if they're not used. So, when women wear a bra from puberty, I mean, they never give these ligaments a chance to develop. So, interestingly, what we consider normal breasts in bra-wearing cultures are actually damaged breasts. It's like what we think of as normal feet are really feet defined by shoes, where your toes are curled and there's all sorts of issues that happen because of shoes, you know, the same thing with breasts, but we don't realize that.

We don't talk about it because of the taboo nature of dealing with breasts. You know, you can talk about feet without being embarrassed but when you start talking about breasts, the culture gets really weird. So, the idea though is to minimize the amount of time you're in a bra and make sure it's not constrictive, no red marks, wear it less as...Our study found over 12 hours a day of wearing really accelerated your risk. So you wanna wear it as little as possible, certainly less than 12 hours, never to sleep. Make sure it leaves no marks on your skin because that's a sign of constriction. And if that's the case, then that's fine. You probably want natural fibers because the fibers in the bra itself are toxic. Some elastic breaks down into...it's a polymer and the monomer units of this polymer are carcinogenic.

And a lot of clothing, you must know...maybe you did a show on this, but there's a lot of toxic chemicals in clothing, and formaldehyde to all sorts of things that they use, not only when they raise the...yeah, like if it's cotton, how they grow it, or if it's synthetic, obviously, there's chemicals involved in all of these things, in pesticides, but also when they store fabrics, they treat them for various things, you know, fire retardants, all sorts of chemicals. You should never wear anything without washing it a couple of times, you know, if it's new. And these chemicals in bras, including the detergents and the fabric softeners that you wash them in, and the perfumes and the sweat will stay in this garment that's gonna be intimately in contact with your skin, and you can absorb these chemicals and toxins right into you. So the bra not only prevents the flushing out of the breast and of other toxins you take in but can provide some of the toxins itself.

So, with that all in mind, you can get used to being bra-free. And like I was gonna say with my wife, she can now rebound without any discomfort and without any bra. And she didn't get used to that. There were studies done on athletic women in their 20s who stopped wearing bras for the study, and they found they performed

better and preferred being bra-free. So the whole idea that you need a bra for exercise is wrong. There is no flaw to human anatomy that requires any garment to correct. That's salesmanship of the garment industry. We were made fine and we keep on interfering with that with these garments. So, you don't need a sports bra like a man doesn't really need a jockstrap unless maybe, you know, he has really pendulous testicles or a woman has really large breasts and she's trying to do something that will be uncomfortable, like, because of this. So she should first of all wonder should I be doing this? You know, is this body-friendly for me?

I mean, if I'm a big person, if I was obese, I shouldn't be jogging. It's gonna ruin my knees and my ankles. I mean, you gotta consider the activities you're doing. If you have large breasts, you might not wanna go jogging or do really very disturbing exercises to your breasts. But if you do, you can wear a, you know, sports bra while you're doing it but take it off right afterwards. Sports bras are not for everyday wear. They're very constrictive and very compressive. But if you happen to need breast control, you can do it for that moment. You know, it's not like the end of the world if that happens, but realize the benefit of exercise is circulation improvement. Your lymphatics actually circulate over 20 times more, 20-fold increased circulation during exercise. So, if you have your breasts moving, like, let's say you were swimming, where there you don't have to...you know, you actually swimming naked would be ideal. You can go bicycling. You could do yoga. You could walk, which gives a natural movement. You want your breasts to move. You don't wanna necessarily to be, you know, hard movement, like, unless they're comfortable with it. And, again, if you've been bra-free all your life, you'd be comfortable with it. If you've been wearing a bra all your life, then, of course, you're conditioned to wearing your bra. You take off the arm sling and try to do normal things and your shoulder won't be able to deal with it until it gets strong again.

So, we discovered in this study, the breasts lift, the pain goes away, and they also breathe easier. Every woman has said...this is an interesting side effect of wearing a bra. When you have a band around your chest, besides its effect on your breasts, it has an effect on your sympathetic and parasympathetic nervous system. And there have been studies that have looked exactly at this. And they found it increases your...Wearing a bra, compared to none, increases your core body temperature, reduces melatonin secretion, slows down digestion so it can create constipation, and it even alters your menstrual cycle. And women...and it reduces breathing. You don't take as deep a breath, and their reflexes involved. I mean, some people try to figure out physiology in this but it's clear. And you can find this out for yourself. You can stop wearing a bra and you'll suddenly realize, "I could breathe easier without a band around my chest."

And the body seems to know it. It's like it's stressed out having a band because on a subconscious level, our bodies, you know, wanna take care of themselves. And they have defense mechanisms, even if we consciously try to subvert those. And one of the defense mechanisms is when you're uncomfortable, like, if you're sitting in a wrong position, your circulation gets impaired a little bit, it makes you wanna move. The discomfort tells you to move. But if you can't move, you eventually learn to just ignore it and turn that off. So with the bra, there is an implicit discomfort of having a band around your chest, pushing on your breasts. And that discomfort affects you on a subconscious level where even your nervous system is reacting to...Because in the long run, it can really hurt you. It's hurting you.

So your body is trying to defend you and tell you to do something about it but the culture and the messages we've learned get in the way of that and women don't listen to the discomfort, which was one of the things we study in our bra and breast cancer study that we have in our book, "Dressed to Kill." One of the things we asked about attitudes, behaviors, and women who have a history of breast cancer, they didn't mind the fact they had more likely to have marks on their skin and more likely to ignore it. That's the thing. If you ignore the messages your body is giving you, the discomforts, women, the first thing they do when they get home, if their bra wearers, one of the first things many women do is take off their bra when they get home. And, you know, they wear it because they think they need to look that way in public because that shows you how brainwashed everybody is. But when they're home, it's not comfortable. So they take it off. That's their body telling them, "This is not good for you."

But they have to do it every day. And then they get addicted to it, conditioned to it, and they identify with their image wearing the bra and the clothes require a bra. And the whole culture is so into it that they've had problems...But 25 years later now, since we came out with the book and started this whole journey of trying to educate the world about this, now, there are laws that prevent discrimination against women in the workplace forcing them to wear bras. Women do not have to wear bras at work. Anything that men don't have to do, women don't have to do. Unless it's explicitly part of the job you need that. But if it's not, you can't force women to wear high heels to sexualize their bodies at work. You know, we're used to the workplace being an eye candy place for guys to look at women. And maybe nowadays is the reverse too.

It's like the workplace is implicitly sexualized for women to go to work the way they do with high heels, and cleavage, and perfume, and cosmetics. The workplace is a place for...I mean, maybe that's part of the social lubricant of working together but it's implicitly sexual. And I think today's world, we're challenging that, and the fact that it's making women uncomfortable, unhealthy, and they shouldn't have to be objectified and sexualized at work. And they can say no and they are saying no, even high school girls are saying no to bras, and they're starting to wake up to the fact that women have the right to be comfortable and that bras aren't comfortable. There's nothing comfortable...they're not meant to be comfortable. They're meant to be, you know, breast shape changers.

Katie: So many interesting points that you just brought up. And definitely, I can understand. There's so many memes online, I know women have seen these of the feeling of taking off your bra when you get home after a long day. And certainly, I think a lot of women can relate to that. And I've heard even people say that that's one of the benefits of this past year is, like, nobody's had to wear a bra for a year, right, and realize just all the other layers of that that you just explained. And you also compared it to shoes and feet. And I'm glad you brought that up because this is something I've talked about before on this podcast. I've written quite a bit about in our family, especially this past year, but even before then, I would say I wear shoes maybe 1% of the time, maybe, and that would be a stretch. And I don't even wear shoes in stores at times. I get some strange looks. My kids have...they wear shoes so rarely that they...There have been times where they needed to actually wear them on an airplane or something and we didn't have shoes that fit them because they hadn't won shoes in months.

So I can understand the foot connection. And when you explain those in correlation, it makes sense to me. I have a friend who never wears shoes either, and when people ask him about it, he uses the analogy like imagine wearing two gloves on your hand all the time, like a thin one, like a sock, and a thicker one, how you wouldn't be able to feel anything and how detached from your hands you would feel, and how smelly they would get. But yet we think with shoes, it's normal. And like you just explained, there's kind of that same connection with all of these tight restrictive garments, not just bras because certainly, our culture does seem to like a lot of tight-fitting clothing.

Before we move on because there's some other areas of this, I think that are really important to touch on, I wanna delve into one that's gonna definitely be controversial. And that is, so many women in today's culture, I know the numbers are declining, but a lot of women have breast implants. And I wonder about...Because then we're talking about incisions. We're talking about something that would seem like also puts pressure. Are there implications? Have you looked at the implications specifically of that?

Sydney: Yes. You're absolutely right. First of all, incisions, there's a recent study that's confirmed how lymphatic impairment increases cancer incidents. They found even...This was a dermatology study. And the breasts, of course, are an accessory skin organ, so they're part of the skin. So, the skin, what they found is any incision interferes with lymphatics, like, almost forever. It never gets back to what it was in circulation. And it increases the cancer incidence in the tissue that's distal to that. So it creates an immune-compromised area by interfering with lymphatics. So, the lymphatics have to go from distal of your body towards your heart. And if you have any cuts between that pathway, it interferes with that drainage. So, the area, you know, that's further away from your heart from that cut is immune-compromised compared to the rest of your body. And so, yeah, we're also...I sort of lost track of where we're going on there.

Katie: I just wanted to touch on the idea of implants and...

Sydney: Oh, the implants, implants. Yes, thanks. Okay. Implants, so they have to make an incision to put them in. The other thing is, there's gonna be pressure from within pressing on the lymphatics. So, if you have an implant and you wear a bra, you're making, like, a sandwich out of your breast tissue with an implant pushing from the inside and the bra pushing from the outside. And the result is going to be, you know, definitely restricted lymphatic flow. Plus the implant is...I mean, it's going to be...well, you can imagine what the thing inside your body is going to do. It's gonna displace what should have been there. And to do that, it's gonna be giving pressure to things.

So there could be a lot have side effects from implants. They're a very bad idea. And it's a sign that medicine doesn't really care about you that much that they promote all of these cosmetic surgeries that aren't good for people. But it makes a lot of money for them and it perpetuates the insecurities that women have. But to answer your question directly, if you have implants, you probably shouldn't wear a bra. And you don't necessarily wanna get them removed right away because there might be side effects of that. If you don't have implants, think twice before you get them and ask yourself why. But there's no way they're gonna be healthy for your breasts and they certainly will exacerbate any circulation problem.

Katie: Gotcha. Okay. I definitely wanna go into ways we can improve lymphatic function, but I feel like that's gonna be a good place to wrap up. I also have notes before we get to that point to talk to you about things like the implications for some of these things with thyroid health. And specifically, I have a note about the link between your voice and your thyroid. And a decent amount of listeners have struggled with some form of thyroid dysfunction. So, talk to us about what you've learned related to the thyroid.

Sydney: Well, that's an interesting one. That's another culture-caused disease with a twist. I mean, I not only identify the cultural cause, but I also have enough understanding of medicine and I'm free of the bias of looking at things from a pharmaceutical point of view. That's what medicine does, okay? When you go to medical school, they teach you how to identify conditions in terms of drug prescriptions. I mean, it's all about drugs. That's why they're doctors of medicine. And as opposed to doctors of chiropractic, or osteopathy, or herbalism, or Chinese medicine, they work with drugs. And I went to a medical school, you know, that taught that. And the way they think of the thyroid is that it's only controlled by pituitary hormone, thyroid-stimulating hormone. And there's a feedback loop. And it's a very famous one that's taught in biochemistry. It's like the first one they ever discovered of a feedback loop so that your brain tells your thyroid to be stimulated to make more thyroxine. The thyroxine enters your bloodstream, goes back to the brain, and then it shuts down that or inhibits the stimulation. So it's got a feedback, a negative feedback loop. And that's all they think about with the thyroid.

But what I've discovered is there are very simple mechanical answers to things that medicine ignores, possibly because they're so easy to understand, but probably because there's no drugs involved. And the one with the bra that we just talked about is a simple mechanical issue of compressive garments and how they affect circulation. This shouldn't really be much mystery to that once you really think about it in those clear terms. But the other thing with the thyroid that made me wonder, when you know anatomy, the thyroid is right next to your voice box, your larynx. I mean, it's connected to it. And the thyroid inside is actually, sort of, a gel-like material that has thyroxine. And if you squeeze the thyroid, you actually can make a give out thyroxine. Massage therapists know they have to be careful massaging people's throats, especially if they have hyperthyroidism because you can oversecrete thyroxine that way. So the thyroid is actually sensitive to touch and to stimulation that way by mechanical contact. Why would you put that on a voice box?

I mean, if you are God, or biology, or whatever, making the human body in evolution, why would you take a thyroid...? And in many animals, this is the case. It's on their voice boxes, a vibrating structure. Why would you put an organ that vibrates and releases hormone on a vibrating structure unless that was part of its mechanism for hormone release? Well, now I've written about that, and I actually discovered people that got transient or temporary hyperthyroidism, too much thyroxine, after going through bouts when you ask them what they've been doing in their lives, which doctors never do, but anthropologists do. They went through bouts of yelling. And that over-vibrated their thyroid. It was an unusual yelling. Like, you know, they went through some...and that extra overstimulation of the thyroid by yelling caused hyperthyroidism. And it probably would have gotten better if they stopped yelling and let it all heal, you know, and not overstimulate it, and you recover.

But when you go to the doctor for thyroid disease, they'll give you radioactive iodine to assess the activity of the thyroid. And, of course, radioactivity is not a good thing. And that same radioactive iodine, they'll just give in more dose if they wanna ablate or basically burn your thyroid off. And then they put you on thyroxin, you know, a pill. And you'll have to take up the rest of your life. I've written about that in a book I wrote called "Doctor is Out." And it was talking about various scams of getting people on lifetime medication. And this is one of them because they are actually assessing your thyroid using radioactive iodine that burns thyroid tissue. So, by the time they finish testing it, you know, it's probably damaged already by the test and they'd rather just ablate the rest of it, and they just control how much thyroxine you're getting with pills, and try to see if, you know...And that's, of course, not ideal. It's good for them in the medical industry and pharmaceutical, but it's not good for the patient.

So, the other thing we found is if you don't stimulate your voice enough, you'll get hypothyroidism. And, for example, I did radio shows on this talking about this issue. And I got contacted by a nun who had to go into a time in her studies and a meditation where she was silent for a long time. And then she comes up, they develop hypothyroidism. Also, deaf mutes. I looked this up right away when I was thinking about this theory. Deaf mutes, you know, they're born that way where they can't speak, they can't hear. By the time they're adolescents, they're on thyroid medication. So, they don't talk. So if you look at people who don't talk, they have thyroid problems. If you look at people who yell, they get thyroid problems. And why would a lot of women get this in culture? I mean, well, first of all, our culture right now is doing less talking and more communicating over the internet with, you know, texts and emails. And so it's a little less verbalization. We don't sing like we used to.

People years ago in the 20th century, there was a lot more singing, community singing. If you look at old movies from the '30s and '40s, I mean, people had no problem singing. And we don't vocalize like that anymore. I think we're much more into getting entertained than participating in it. And yet, you know...And then if you're a single mom or you're a woman who gets, you know, by the time you're 50, many women are divorced, and without children, and alone, and as you get older, if you're alone, you're not communicating, your thyroid is going to not get stimulated. So I think what happen...And there have been recent studies, by the way, that found when you take thyroid cells and stimulate them with sound, they secrete thyroxin. And another study that has confirmed that thyroxin is released upon vibration from the thyroid, from the larynx, the voice box.

So, this is correct. It's gonna change the way everybody talks about the thyroid because it's another part of the stimulation of the thyroid that medicine does not even consider at all. And someone did tell me that Ayurvedic medicine knew about the thyroid and voice and did voice exercises for the thyroid but that's like thousand of years old. So, this has been known and it's really obvious when you think about it the way I presented it, you putting an organ on, well, why isn't it in our abdomen or protected from any vibration since it's so sensitive to it? If you work in factories where there's big banging sounds from machinery, you can actually get thyroid damage, and there's studies on that. So people who work in loud occupational settings get thyroid damage from the actual vibration.

So, if you have thyroid disease, not disease, but if you have a problem that's been related to your thyroid, I would suggest either singing for low thyroid, read out loud, talk, use your voice. I think as we grow up, as we develop, the brain and your vocalizations sort of reach...they work together and you get, like, what's your normal amount of talking. You know, some people are talking of all their lives and some people are quiet all their lives. And I think your brain gets set at a certain amount of thyroid-stimulating hormone relative to the amount of vocalization you do. And as your life changes and you vocalize more or less, your TSH, thyroid-stimulating hormone secretion is going to adjust but it has a window of how much you can adjust before you start experiencing thyroid secretion issues. So, what you wanna do is if you don't talk enough and you're low thyroid, vocalize. Get your thyroid going. But you can even massage your throat, you know.

And if you have hyperthyroidism, you should ask yourself if you've been yelling lately, and it could be people in bad relationships suddenly, and they're yelling at each other, or it could be you went to a football game and you overdid it, and you yelled too much. That won't happen during the pandemic, I guess, but that could have happened in the past. So you have to ask yourself what kind of vocalizations you may have had? And did you overstimulate your thyroid? And then just shut up for a while. Give yourself, you know, a month or two of quiet. Talk less. Talk softer.

And if you're hypothyroid, talk more, talk louder. They will affect your thyroid and then you'll see how you feel. And I've had people try this and they say they feel a lot better. A lot of women, it seems,...I ran into a lot of people who said they used to sing like at church or a choir and then they got some depressive thing. Usually, after a depressive event in their lives, people stopped singing. They stopped talking. It takes a lot of steam out of them. And that is reflecting in their vocalizations. And that affects their thyroid, which then gets their energy lower because they get hypothyroid. And it becomes a spiral.

And it probably spirals the other way, too. If you're aggravated and you're yelling all the time...like this one guy, this exactly happened. At the time I was living in Hawaii, this guy moved to my neighborhood who he used to live in California, and he was a man in position of power. And he lived along a road that we were used to the traffic on the road. But he did not like the traffic going too fast on this road because people were speeding by. So he was out there yelling at the traffic, "You slow down. Slow down." And he did this for, like, months. And then I didn't see him for a while. And I saw him again and I said, "How have you been?" And he said he had a thyroid problem. He went to the doctor, the doctor, you know, said he had hyperthyroidism. They ablated his thyroid with iodine and now he's on thyroid pills the rest of his life.

I said, "I've been working on this theory about its with vocalizations." And as I'm telling him this theory, a car comes by, and he reflexively screams at it to slow down. And he looks at me, it's like the light went on. And he said, "I wish you would have told me this before." And he saw exactly what he was doing to himself. And it was so clear an example of people creating hyperthyroidism by overstimulation of their voicebox. So, anyway, that's the story of the thyroid. And, again, it's a mechanical circulation issue. I'll tell you another issue, another cultural-genic problem. Do you want me to?

Katie: Yeah, absolutely. And after you do, I have some experimental experience on the thyroid part, but yeah, keep going.

Sydney: Well, once you say your thyroid one before I...Because I'm gonna switch gears completely.

Katie: Okay. As you were saying that, it was like a lightbulb moment for me because I had...I've talked about on the podcast before, Episode 309, but I had a pretty severe trauma in high school. And ever since then, like I had kind of, like, emotionally shut down quite a bit. And people would say, like, "Oh, you're so soft-spoken. You're so quiet." And I had started to suffer from thyroid problems a few years after that. And part of my trauma recovery in the last few years, I used a lot of different modalities, but at one point did, like, essentially rage therapy, where they got me to yell because I had not raised my voice a single time since that happened. And then also to challenge myself, it was the scariest thing I could think of, I started taking voice lessons around the same time. And my Hashimoto's is completely gone. Not just...I mean, it's in remission, but I don't take medication anymore. So that was really fascinating that those things lined up.

Sydney: Well, that's awesome. I'm so glad you told me that. That totally confirms what I'm saying. But, you know, this is another one of those things. With thyroid medication, do you know how many people are on thyroid medication? I mean, this is a huge moneymaker, a huge moneymaker. You know, you run into so many things in medicine, where they get any common disease that we're all suffering from, that they have a medication regimen for, that we're all comfortable with. And people are still suffering from it. It's like a cash cow for the medical industry. And they're never interested in trying to understand the cause of these things or help people come up with non-drug alternatives to figure it out.

Here's the other one I was gonna tell you. And I wrote a book about this. And this is probably our biggest discovery next to "Dressed to Kill," and thyroid. It's about the way you sleep. People are sleeping too flat. And it's causing their brains to get too much pressure because when you're lying down, gravity doesn't assist. Well, let me put it this way. When you're standing up and your head is above your heart, the heart has to pump against gravity to get to your brain. And as it goes through your brain with, you know, the cerebral spinal fluid forms, and then it collects, and then it comes back down through your veins back to your heart and gravity helps pull that down. So it resists the pumping to the brain and pulls down the blood assists the drainage from the brain.

When you lie down, the relationship between your heart and your brain via gravity is different. Now, they're on the same plane. So there's no gravity gradient. That means that when the heart is pumping into your head, there's no resistance from gravity. So it makes the blood vessels...It makes your face red, your whole head is actually getting congested. So, your heart, actually there's in your carotid arteries, there's pressure receptors, that lower your heart rate and pumping force in order to prevent you from giving yourself a stroke by blowing a blood vessel in your brain, you know, like a balloon popping. You don't want too much pressure in your brain. You want circulation. You don't want pressure.

So when you lie down, you get pressure in the head and the heart tries to slow down. Now, if you get up real quick sometimes, you can get dizzy. That's called orthostatic hypotension. It's normal, in this case, because when you got up, now suddenly, your head is above your heart, gravity prevents...Your heart is pumping softer because you were lying down for a while. And it's not ready to pump hard to get the blood up to your head. It's used to the head being on the same level. So you get up in the middle of the night to go pee, and you get out of bed too quickly, and you feel a little lightheaded, that's because your heart wasn't ready for you to get up that fast. And it's called orthostatic hypotension, which means low pressure due to posture position and standing up.

So, anyway, that made me actually getting orthostatic hypotension one night was when it made me think about this. And I started to think about the effect of gravity on brain circulation and sleep position. And nobody was looking at this except space medicine I discovered because there's no gravity in space. So they've been looking at the effect of zero gravity on the brain circulation because they find that astronauts have fluid shifts to the head because it's not coming out. It's not draining that well. It's pumped up there. Like, when you're lying flat, no problem getting the blood to the head, it's the problem is getting it from the head back down to the heart. There's no gravity to pull it down. So the only way for the blood to drain from the head to the heart when you're lying flat is for it to push from the heart up to the head through your brain and push all that fluid back down. Now, when you stand up, that will just flow back down.

In fact, doctors can test how much heart...They test your heart's ability and heart failure by having you lie on a flat table and then they raise the head of the table. And as soon as it reaches an angle where your blood vessels contract, like your blood vessels...your veins will be sticking out when you're lying flat. You can have anybody look at it for you, you'll see the veins on the side of your neck sticking out because the blood is pulling between your head and your heart. It's not effectively getting back into your heart, it's very sluggish. So the pressure builds in your veins, it's like your congesting your blood in your head and veins. And by the way, that's why when you wake up in the morning, you'll have baggy eyes, sinus congestion, a groggy head, your ears, even your middle and inner ear can be congested, especially if you're leaning on your head...leaning on your ears side sleeping.

But you're in a down position getting congested and compressed all night. And there's a whole bunch of diseases that have high brain pressure as part of those diseases. But medicine hasn't figured this out, okay? They haven't figured the connection between, except in some diseases, like, for example, sleep apnea. You can treat sleep apnea by head of bed elevation. And by the way, NASA found that 30-degree head of that elevation is optimal for both brain and heart circulation. I had conversation with a NASA physiology guy who was studying these things. And they know all about this, but the rest of medicine doesn't know this. So, people...Now, if you have a hiatal hernia or you have GERD or acid reflux, they'll tell you to sleep on a wedge or elevate your bed so you have an inclined plane because they're using gravity. They'll use it there, but they won't think of it preventatively like everybody should be sleeping elevated, which is really the truth.

And so, what we found is migraines are caused by this mechanism. Nobody understood migraines. They still don't know what's causing migraines. We know what's causing migraines. At least in 70% of the cases we found from our migraine study, we're able to get rid of their migraines. These were chronic migraineurs and

for, like, all their lives. And when we had them raised the bed, the head of their bed, they stopped having migraines, like, really fast. And that's because we figured out what a migraine really is. A migraine is a brain flush. What happens is, if your brain is down all night and you have them in the morning, I mean, these are, like...Anything that's bad, this is a tip. Anything that you have worse in the morning is from what you did overnight. And if people wake up with a headache or they get migraines that are known as morning headaches, it's because what they've been doing all night. And at night, they're flat, lying too flat. And their brain is getting pressurized and not circulating well because of the lack of gravity.

So, as the brain cells, you know, metabolize, they're using up their oxygen, they're using up their sugar and the brain needs that. So by the morning, the only way for you to get...You know if your brain is suffering, it has to protect itself. How else is the brain gonna get the fresh oxygen, and fresh sugar, and nutrients but through the bloodstream? So it opens up blood vessels in your neck and you get the blood vessels in the brain open. And there's this pressure of pushing new blood through and that's what a migraine is. And if we had people raise the heads of their bed, they didn't need that. Their brains had enough circulation, they didn't need the migraine. So essentially, a migraine is a defense mechanism to protect the brain from losing too much oxygen and sugar. And they found that people who have migraines actually are protected against other diseases that we think are related to the same thing, including strokes.

If you're down low, your head's low and you have a lot of pressure in your head, you could get a stroke because, in fact, most strokes happen in the middle of the night. Most people die while they're in bed sleeping because their brain gets overdone. And the respiratory center in your brain that controls breathing, which is between your ears and the brainstem, that gets messed up too when you're flat. And that's why it causes sleep apnea and sudden infant death syndrome. So if you raise the bed, they know that helps with sleep apnea. With SIDS, they say put the baby on its back so its head isn't turned to the side because that lowers brain circulation. It actually just turning your head to the side. like looking at your shoulder, compresses the veins going down and increases your brain pressure.

And also, if you crane your neck with two pillows so your head is too high, like, craned up, that pressing of your chin down towards your chest also compresses your veins draining your brain and you'll increase your brain pressure. So you don't wanna just have two pillows. In fact, pillows...I'm sleeping no longer with pillows. I'm using a towel that I fold under my neck and head making it very low uncomfortable, but I'm on an inclined plane. And you should sleep, in my opinion from what I've been studying on this, sleep on your back because sleeping creates compression injuries. I mean, that's what we're talking about here, mechanical forces. You lean your body. What are you gonna lean your body on? If you lean it on your shoulder, expect to have shoulder problems as you get older and circulatory problems because you're leaning on your arm. You know, you wake up with your arm numb and dead, you know, in the middle of the night, that's not a good thing. And it's from compression. And you keep on doing that, you'll pay for it over the years.

And if you lean on the side and you're a side sleeper, you're leaning your ear and that side of your face against the pillow, I could actually look at a person and tell if dominantly right or left side sleeper, or back sleeper, or stomach sleeper, which is the worst, because of the way they turn their head. People usually have a habit of sleeping one way predominantly. And you can actually see their face over time from compression. Their faces

become asymmetrical and distort. So the nose will start bending away from the pillow because you're pushing it that way. Your cheek on that side and your eye will start...they'll, like, melt with time. You look at older people, you can really see on their faces how they sleep because they're leaning on it. And the ear that's down is gonna be a worse ear. The eye that's down is gonna get astigmatism because you're gonna change the shape of it from leaning on it. And it will be the worst side. So people who side sleep have those problems.

Kids who side sleep, they're gonna get ear infections in the ear you're putting them down on. If you're on your back, there's nothing bad to compress. It's just flat. It's a flat, wide surface with no circulatory problems by lying on it. But there is on everything else. and you can expand your lungs when you're on your back. If you're on your belly, you can't even breathe deeply. And your head's to the side, increasing brain pressure and your one nostril is closed. You can't ventilate. So, it's all very logical. Once you start looking at these behaviors, you can see how our culture teaches us to do things, has beds a certain way. I think the cultural standard of sleep is on your side in a fetal position. When you look at a picture of a person sleeping, they're usually flat with a pillow on their sides in a curled-up position. Like, that's how we think, side sleeping. Even when they sell adjustable beds, they'll show people sleeping flat. And it shouldn't be that way.

You really should have your bed elevated from the top or elevate the whole bed. Put blocks under the head of your bed, and have an incline plane. If you put, like, one cinder block's height worth, 6 to 8 inches, that'll give you an inclined plane enough to help with circulation. And you will feel different the next day. And I'm not exaggerating. If you did this tonight, you will feel different the next day. You'll wake up with a clearer mind because your brain is circulated. You will have less sinus congestion. Some people say they thought they were allergic to something and they found out it was their sleeping that made them stuffy from that. You know, it was sleeping, getting congested in your sinuses, from your head being down.

You know, you'll also sleep less because you won't be so groggy and you'll be able to get up immediately, and not feel like I gotta lie in bed and try to recover like I've been strangled all night. You know, like, why are people so exhausted when they get up? You'd think they'd be refreshed from what they're doing to themselves. So anyway, that's a big one. And it relates to migraines. We think Alzheimer's is the end disease of this because if you look at an Alzheimer's brain, the ventricles inside the brain, which are these big cavities filled with cerebral spinal fluid, are extremely expanded. They have extra pressure inside their ventricles. And there have actually been Alzheimer's treatments trying to reduce that pressure with surgery trying to shunt the fluid from the brain into the abdomen and maybe trying to give some anti-inflammatory drugs, something to deal with this extra pressure. They don't ask what's causing it. And it's caused by sleeping too flat because people spend a third of their lives that way. So, of course, it's going to affect your brain. We think that's the end disease.

Stroke, for sure, glaucoma, for sure, and they already use head elevation to treat glaucoma, although they won't tell you because that's another great cash cow for them. But glaucoma is treatable by raising the head of your bed and that lowers your eye pressure. Impotence is even a problem here because one of the reasons you have impotence for men is that, and maybe for women too, I don't know, when you have an orgasm and you get your pressure up pretty high, it can give you a stroke if you have the brain...some problems potentially having a stroke, like weakened blood vessels. So the body doesn't let you get that excited and that high

pressure to save your brain. And if you raise the head of your bed, you're not gonna get into that position as much. And it might allow...I mean, I don't know, it's hopeful for some impotence but the impotence has been associated with increased brain pressure too.

Attention deficit disorder. We've known children who had that problem sleeping 12 hours a day flat. You get them elevated and their whole behavior changes, they sleep less. Their whole life changes. It's amazing that's such a simple thing can have such profound influences. But you understand how you feel when you're sleepy and groggy and how that affects your whole body. These little things like how you're sleeping really does have a huge impact on so much of your body because your brain controls everything. And if your brain is congested, depending on what part of your brain is congested, if it's your respiratory center or some other part, your eyes, anything, depending on how you're leaning on your head and your particular circulation inside your head, you will have different manifestations of this congestion inside your brain. And it could lead to a lot of different problems.

So, the advice then for today for what we've talked about would be, don't wear tight clothing. sleep with your head elevated, your torso elevated so that you have proper circulation in both cases, and try to use your voice if you're low thyroid and try to use it less if you're high thyroid. Those are easy lifestyle changes that could keep you from lifetime medication, on drugs, and death from cancers and other things. So, anyway, simple stuff to test for yourself. And that's what we do, by the way. We call these self-studies. Self-studies means you do it for yourself, you feel what you feel, and you'll know if it's working. There's no...We don't need double-blind placebo studies on this. We're not doing drugs. We're not testing, you know, surgical procedures. This is something that's very simple. It can't hurt you to try it. And you will know if it makes you feel better. And that's telling you it's improving your health if the other thing you were doing was harming you if this makes you feel better. So, that's my advice for that.

Katie: That is so, so fascinating. I've been taking notes and I know we're already to the end of our time, but I'd love to already just say let's go ahead and schedule another episode on really going deep on lymphatic support and some other...I have so many more questions for you but you definitely brought up some really interesting points. I took so many notes and definitely I'm excited to do some self-study myself on all of these.

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The other question I love to ask at the end of episodes, unrelated, but if there's a book or a number of books that have had a dramatic influence on your life besides, of course, your own, and if so, what they are and why?

Sydney: I was thinking of that question because I knew you were gonna ask me. I think the book that I would recommend is "The Little Engine That Could." I mean, when I was a kid, I had...you know that book, do you know that book? "I think I can, I think I can, I think I can," "The Little Engine That Could."

Katie: I do. Yeah.

Sydney: I think that's a really good book because it shows that you can try and you can make it happen and be...You know, I saw that as a little kid and I think that helped me feel empowered, that I could make things happen. And when we're talking here about lifestyle issues, where the culture is like the enemy, trying to addict you to these terrible things, and then you go to the doctor, and then they wanna addict you to their things, it's like, what do you do? It's crazy. Someday we should talk about GERD, I mean, there's...I've been recently dealing with those issues with some people and studying what goes on in the proton pump inhibitors and what they really cause and how to deal with these...You look at the problems our culture is facing. There's so many in big areas and we're in a status quo, where everyone's making money on it, the people selling you the stuff making you sick, and the people trying to sell you the stuff to make you better.

And it's really in your own hands. You can make yourself better. You think you can, and then you'll discover, I knew I can. And you will feel the difference. You just gotta care enough. Stop listening to their messages, even if you think it's on the internet and you read it. I mean, that doesn't mean really very much. There's so much misinformation from all sides that the only thing I think I could trust is my own feelings, my own body. I mean, you gotta start from fundamentals. Your body and your feelings are what we've been given for millennia to get us through life, as in, you know, healthfully and happily, if we listen to our bodies. And the culture gets in the way, and we let it, and we gotta stop letting it and take control over our culture. And that means getting rid of

your bra and checking it out. Even though you're a little shy about that, try it. You will really feel good about it. Give yourself one month for being without a bra.

Go to our [brafreestudy.org](http://brafreestudy.org) and check that out. You could sign up, and then we'll at least follow you and communicate with you on it so we can get your story and hear about what's going on, and share, and give you encouragement and all of that. But that's something you could do. Have the courage to do those things. Sleeping elevated is easy. But again, changing patterns of sleep is not easy. You've been doing it all your life. Suddenly trying to break a pattern will take determination. But that's better than taking drugs and being sick. And the drugs have their own problems. So, you know, I feel bad that the only alternative people have is medicine, and medicine doesn't have these answers to simple things like mechanical issues. They don't even think about...You will never find a medical textbook talk about tight clothing, or gravity. And yet, obviously, both affect physiology.

So, how do you trust this medical community when all they wanting to do is give us these lifetime drugs? And they wanna deny these issues that I've been fighting for, particularly the bra. I'm sorry, we didn't get into all of that. Hopefully, in another interview we can because it's criminal what they're doing, telling women to ignore what I'm telling you. Like, "Don't listen to this. Don't look at the man behind the curtain," You know, realize that we've been ignoring this issue and telling you for 25 years to not listen to this, and that there's no evidence, and even doing a bad study to try to discredit this. They actually did that, that didn't even include bra-free women. It was a sham study on bras and breast cancer that didn't even include women who don't wear bras. So there was no control group. And that's, like, their big study that shut everybody up about this. You know, if it wasn't for the fact that it works, this issue wouldn't have survived.

That's the thing that's my secret success formula is if people try it, they'll know it works. There's truth in it. And you could try it and see it. It's nothing that is mysterious. You know, you take off your bra, you don't know what you're gonna feel you. You'll know when you feel it how it feels. And there's no mystery. You can prove it on yourself. And that's why the issue is still alive despite all the resistance. And if you look this up on the internet, you'll see lots of attempts to try to discredit this, to not admit their own studies, to just...And then to parrot. Everybody echoes everybody else's misinformation in the mainstream and then there's no way to break through that because they've come up with this is their take on the bra and breast cancer issue. They don't want anybody to follow up on this and there's no further discussion.

Although they're getting rid of bras, admitting they cause a whole bunch of problems, but they still wanna say they can't cause breast cancer, you know, because it's gonna revolutionize their whole cancer industry. That means every study they did that ignored the bra is like studying lung cancer and ignoring smoking. It's all flawed research that hasn't considered the most important variable in a woman's breast health, which is, you know, if you ask, "What are we doing to ourselves? What component can my culture have in this?" It's you're wearing a bra, you're constricting these things, not to mention shooting through with radiation every couple of years to look for tumors. I mean, those are other cultural problems. But wearing that bra is going to set you up.

And anyway, so, I hope I've given everybody that's listening the encouragement and information. Go to my other website, [brasandbreastcancer.org](http://brasandbreastcancer.org), and you'll see references and other resources. And get my book "Dressed to Kill." I mean, it's going to tell you how it works and it'll give you all these studies and all this information. And it's available everywhere "Dressed to Kill," the second edition, 2018. And tell your friends about this, and your children, and your daughters.

Katie: I think that's a perfect place to wrap up. But absolutely on the round two, there's still so much more that I even had on my list that we didn't even get to touch on today. So, I will have my team already start scheduling that. But in the meantime, definitely a lot of food for thought in this one. Sydney, thank you so much for your time. This was even more fascinating than I expected it to be. And I knew it was gonna be good. So, thank you so much for your time and for sharing.

Sydney: Oh, you're great, Katie. Thank you very much.

Katie: And thank you guys as always for listening, and for sharing your most valuable assets, your time, and your energy with us today. We're so grateful that you were here, and I hope that you will join me again on the next episode of the "Wellness Mama" podcast.

If you're enjoying these interviews, would you please take two minutes to leave a rating or review on iTunes for me? Doing this helps more people to find the podcast, which means even more moms and families could benefit from the information. I really appreciate your time, and thanks as always for listening.