



Episode 03: Diet & Lifestyle Interventions

Katie: We've talked about what thyroid disease is and the different forms it can take and the symptoms and how to find the doctors to get diagnosed. At this point, I'd love to switch gears and focus on the positive a little bit more and look at things that can potentially help. One question I had from a reader is, "When is medication needed for thyroid disease and how do you know?" The follow-up to that would be what type is typically best to take for the different forms of thyroid disease?

Izabella Wentz: Mm-hmm (affirmative). Those are great questions. Yeah, I love focusing on solutions because there are so many different things that people can do to get themselves better. Feeling better is possible and some people can even get their condition into remission. Starting off with medications, medications can make a really, really big difference in how a person feels. Generally, I would say if somebody is having any thyroid symptoms with Hashimoto's ... They've been diagnosed with Hashimoto's and they have any thyroid symptoms, and if their TSH is going to be elevated. That would be a good indication to start on medications.

If their TSH is still within normal limits but they have Hashimoto's, that's a controversial time for most doctors. Some doctors will say, "Well, let's just wait and watch." Other doctors will say, "Hey, let's try a medication now." The advantage of trying the medication is going to be helpful in addressing some of the symptoms. Even if your TSH is normal, you still might have some of these symptoms like the fatigue and the trouble with weight and so taking the medication can help.

It's also been found that taking medication can actually reduce the autoimmune attack on the thyroid gland. It acts as a protective layer for the thyroid because what it does is it takes the pressure off the thyroid to work so the thyroid doesn't have to convert as much iodine and the thyroid doesn't have to produce as much thyroid hormone. That lowers the TSH and that lowers all of these reactive oxygen species that are produced in the thyroid gland and the immune system is not as attracted to the thyroid gland then.

We'll usually see when somebody starts on a thyroid medication, their thyroid antibodies will go down. For those of you guys listening, thyroid antibodies, the higher they are the more aggressive the autoimmune attack is thought to be on the thyroid. Taking medications can potentially slow down the progression of the condition and prevent further damage of the thyroid gland.

Katie: That makes so much sense. I know there are a lot of people, and I would even consider myself in this category, who don't like to take medication superfluously or without really a good cause. I actually am on a pretty low dose of WP-Thyroid, which is a natural thyroid replacement. Can you talk about how those particular type of medicines are a little bit different than other types of medications, in that like they're actually filling a role in the body, they're not ... Because I think some people can be a little afraid of taking any kind of medication, especially being stuck on a medication? Can you talk about how thyroid medications work?

Izabella Wentz: Yeah, absolutely. This is a very, very important point because as a pharmacist, I like to think of medications and as having different types of mechanisms of action. Of course, one of my roles was to actually get

people off of medications because medications can have a lot of adverse drug reactions and I'm very, very passionate about appropriate use of medications.

With respect to thyroid hormones, I consider them to be very, very clean medications. What I mean by that is there are clean medications that work on the receptors. They're supposed to do the job that they're supposed to do in the body. Then there are dirty drugs that basically will bind all kinds of different receptors and then you end with a ton of different side effects and unwanted types of things happening where you're trying to achieve one thing and another thing happens that you don't want to have like headaches or weird rashes or any kinds of weird side effects.

The reason why thyroid medications are clean and why they are so not as likely to produce side effects unless, of course, they're overdosed or under-dosed, is because they're the exact same chemical structure as our naturally occurring thyroid hormones. There are a few different ones out there. There's T4, which is levothyroxine. Synthroid is the brand name of that and that was the number one prescribed drug in all of America in 2014, believe it or not. That is a synthetic version of one of the main thyroid hormones. A lot of doctors will prescribe this medication for most patients. Some people will do very, very well on this drug and they'll say, "Okay, it's helped a lot of my symptoms and I feel great."

Studies and doctors will say that majority of people will do well on this. In my experience and just with the clients that I worked with, it seems to be testosterone opposite. That most people don't do well with this type of medication. Of course, I am probably biased because people who are doing just fine on their medications are probably not going to come and ask me questions.

The other types of medications that can be helpful are going to be T4, T3-containing medications, so like the one that you're on. Nature-Throid as well as Armour Thyroid are going to be options, and also compounded T4, T3 medications. T3 is the other main active thyroid hormone and it's actually the more active thyroid hormone. It is four times more active than

the T4. Under normal circumstances when everything is going perfectly, a person basically will convert as much of the T4 to T3 as they need.

Theoretically, T4 medications like the Synthroid should be just fine for people because they should be able to convert them to T3 which is the more active hormone which helps us to grow hair, lose weight, build up our metabolism, make us warm. That doesn't always happen. Sometimes, it's due to different toxins or nutrient deficiencies or even stress that the conversion doesn't happen properly. I always, whenever a person is not feeling their best on thyroid medications, I would recommend doing a T4, T3-containing medication like the Nature-Thyroid or WP Thyroid or Armour Thyroid.

The other neat thing about these medications is they're actually bioidentical so they're going to be derived from the thyroid glands of usually pigs. Pigs have very similar, identical thyroid hormones to the ones that we have. Basically, what we're doing with thyroid medications is giving ourselves the very same hormone our body can no longer make. Long story short, I guess.

Katie: Yeah, exactly. Yeah, I feel like that's been a struggle for a lot of my readers and the question I'm not obviously qualified to answer, so I'm so glad that you explained that in-depth. I know a lot of people personally who are on Synthroid and who aren't seeing the kind of the results they were hoping for and they're still struggling with some symptoms. That makes so much sense that if they're struggling with that conversion to T3, they would still be potentially having a lot of those issues.

Izabella Wentz: Mm-hmm (affirmative), absolutely. The other thing that's a bit concerning to me, I know that AbbVie, the drug company is trying to work on resolving this issue, but there were some reports of Synthroid being cross-contaminated with gluten. We know that autoimmune conditions often come in pairs or in three's. People with Hashimoto's are going to be more likely to have Celiac disease and I've actually found that most people with Hashimoto's, even if they don't have Celiac disease, 5% of them might, the rest are very, very gluten sensitive.

When they take the Synthroid, they may actually be dosing themselves with gluten and that can be contributing to additional symptoms for people. Though Synthroid doesn't have gluten ingredients, there have been some cross-contamination issues.

Katie: That's really good to know. I had a reader, January, ask me, "Is it possible to overcome thyroid problems without taking medication?" If, say, a person does have Hashimoto's or even just hypothyroidism, is that something they can handle without medication?

Izabella Wentz: In some cases, people can. I would give yourself ... If you're really gung-ho about doing a natural approach, so some people who had both celiac disease and Hashimoto's, about 20% of them on a gluten-free diet, within 3 to 6 months they were able to reverse subclinical hypothyroidism, which means that they have the beginning stages of a sluggish thyroid and they were able to normalize their thyroid function after the trigger which, in their case, was gluten was removed and there was no longer that trigger that was causing their immune system to attack their thyroid gland.

In some cases, that would be something that you can try. My recommendation though for people is if you're suffering with symptoms, not to martyr yourself for a cause. A lot of times people will say like, "Oh, I only want to do things naturally," or "Natural medicine doesn't work," or "I won't do this or I won't do that," or "I won't change my diet," or "I'll only do things with diet." I just encourage everybody to ... You really keep an open mind and practice self-compassion. Be kind to yourself. If you are experiencing a lot of symptoms and if you could benefit from a medication, don't martyr yourself for a cause of wanting to do things medication-free.

Katie: Yeah. That's a great point. I'm curious if you have any insight into ... Because I've seen a lot of that research as well as far as the gluten connection for those with thyroid disease, but I often hear people say and I've wondered this as well, years ago, people liked gluten as much as they do now or sometimes even more potentially since there's more awareness about it and we didn't have these rates of thyroid disease or

perhaps we did and we didn't know about them. Do you have any insight as to why this seems to be a growing problem right now?

Izabella Wentz:

A few reasons. One of the ways that breads were prepared back in the day was through a fermentation sour dough process that actually burp down a lot of gluten, so that could be potentially, back in the day, we were not eating as much gluten as we are now. I know through, in just trying to get more people fed, and then things are always done for good intentions, right, so the gluten content in bread has increased and the use of, unfortunately, genetically modified crops which seem to be, of course, people or scientists were saying, "Oh yeah, let's feed the masses and let's genetically modify these crops so that they are resistant to different bugs and things." Those are some potential reasons why gluten may be more antigenic now.

It may not be recognized as the same protein that we used to have, and definitely higher awareness is another thing. Whenever a person is in a more toxic environment, they're going to be more likely to react to different things, too. Just our overall society being more toxic has been implicated in higher Hashimoto's rates. We do see trends with that happening. They've looked at the blood samples of people who are not frozen- ... People were not frozen. Their blood samples are frozen from 20 years ago and they just took recent blood samples and they looked at the rates of Hashimoto's and people from 20 years ago and people from now. We definitely have seen an increased trend in those higher rates and potentially toxins and potentially change how our food is processed and created.

Katie:

Gotcha. So that's like perfect storm that you talked about. We're almost creating in environmentally as a society between adding the excess iodine and probably not very much awareness about selenium and our change in our processed food and food being less cultured and less traditionally prepared than it used to be along with our high stress lifestyle. That makes so much sense that we're creating that perfect storm that both you and I had.

Izabella Wentz: Mm-hmm (affirmative). Yeah, absolutely, and then other things come into play too. Not eating fermented foods, not having enough vitamin D on board. Fermented foods, we used to eat them and they would contribute to getting us a very diverse microbiome. The microbiome has been connected with autoimmune disease and then just a lot of vitamin D deficiency has also been implicated in autoimmune thyroid disease. We're not spending as much time outdoors sunbathing as we used to or like running around foraging for food.

Unfortunately, it's really hard to isolate one thing. It just seems to be collection of different things that can contribute. I spend a lot of time looking at medical journals and reviewing different studies and there are so many different things that can trigger Hashimoto's. There's medications, there's different toxins, there's different foods, there's different infections and definitely stress is a contributor to that as well.

Katie: Yeah, that makes so much sense. You mentioned gluten, which I feel like there is a lot more awareness lately especially in health circles and people with thyroid disease. That's something that comes up in the research, but are there other dietary triggers that can contribute or that are especially problematic for people who may have thyroid disease?

Izabella Wentz: Yeah, absolutely. I'm really, really glad that gluten is getting so much awareness in them. Very, very happy to see that. I've had a lot of people who submitted success stories through my website. After going gluten-free and getting into Hashimoto's remission, feeling so much better, it just makes me so happy that this kind of awareness is out there. Other foods can be triggering as well. The two biggest ones are going to be dairy and soy. The main proteins in dairy are going to be casein and whey, and usually it's the casein protein that seems to be sensitizing for people with Hashimoto's. Lactose is people often will say, "Oh, okay, so you have an intolerance to dairy. Can you just have milk with lactate in it or lactose-free milk?"

Actually, the part of the dairy that people are sensitive to is going to be the casein. That's a dairy protein. I have seen a lot of people, I will say probably 70 to 80 percent of people with Hashimoto's are going to be

dairy sensitive and they'll have improved outcomes once they get off of dairy. I had one person who actually just went dairy-free, that was only for intervention and she was able to get into remission from Hashimoto's. That's almost as an important trigger as gluten. With my experience and surveying my readers, about 88% felt that they were better off gluten-free with dairy at somewhere between 70 and 80 percent.

Katie: Wow.

Izabella Wentz: Soy is another interesting kind of food that is often commonly reactive in people with Hashimoto's. I've seen people who get off of soy, they may not have a lot of symptoms of soy intolerance, their thyroid antibodies do start reducing indicating that the immune system attack is becoming less aggressive.

Katie: That's really fascinating. Another thing you mentioned in relation to, I think, part of your own story was the role of gut health. This is another topic that I feel like is awesome right now because we're learning so much about so quickly. There are a lot of studies right now that seemed to be coming out about the role of gut health. How does this play into thyroid disease? Because you hear terms like leaky gut and gut permeability and different things related to digestive health, but how does that play a role in how someone's thyroid may work?

Izabella Wentz: It's actually interesting because the thyroid gland is part of the same tissues that were started off where the thyroid and the tongue, so they come from similar tissue. You can say that the thyroid gland is actually derived from our gut. That's one interesting connection here. Really, the main connection would be with respect to the three-legged theory of autoimmunity. This was a theory that was recently explored and proved by Dr. Alessio Fasano who's a gastroenterologist that specializes in autoimmunity and celiac disease.

He found that every person with a autoimmune condition, be it Hashimoto's, be it lupus or MS, had three things that needed to be present in order for the autoimmune condition to develop. The person had, obviously, the right genetic predisposition to develop the condition.

They also had some sort of a trigger that brought on the condition. We talked a little bit about the different triggers out there. Then the third piece of the puzzle is that they also had intestinal permeability or leaky gut. All three of those things need to present in order for the autoimmune condition to manifest or to develop.

If you had a genetically predisposed person who only had the trigger but not the gut permeability, they would not develop autoimmune condition. If they only had the gut permeability but not the trigger, they would also not develop a gut condition. That was really, really exciting for prevention when you first came across this. Later on, he also came across something else. It's that if you are able to either remove the trigger or remove the intestinal permeability, the autoimmune condition would go into remission. Obviously, we can't change our genes. We're always going to have these genetic predisposition that we have but we can definitely change how the genes are expressed and that's through manipulating our triggers, be they nutrient deficiencies or foods or infections.

Then we can also look at healing our gut which is where the intestinal permeability comes into play. There's a few different reasons for intestinal permeability. Whenever I work with people and what I like to write about is really looking at all of the potential root causes of intestinal permeability and trying to figure them out and address them so that we can get a person feeling better and potentially into remission.

Katie:

That's what I love so much about your approach and especially your book which delves into the root causes so much, is that even though your background is more in the conventional medicine as a pharmacist, you've really learned so much as delving into the root causes and not just treating with medicine. I love the two-prong approach that you have seemed so effective for so many people. What about the adrenal health? Because you also mentioned that sometimes symptoms can look like thyroid disease but they're actually adrenal related. I've also seen that you've written about how adrenal health can impact thyroid health. Can you talk about that connection too?

Izabella Wentz:

Yeah, absolutely. There's like basically five main things that are going to be happening in Hashimoto's that are going to be contributing. They're going to be nutrient depletion, food sensitivities, poor stress response which is where the adrenals come in, impaired ability to get rid of toxins, infections which are oftentimes going to be in the gut. Adrenals are two little glands that sit on top of our kidneys. They're responsible for producing our stress hormones. They're very closely in synergy and work in sync with our thyroid glands.

A lot of times when you have one adrenal dysfunction, you will have thyroid dysfunction and vice versa. Adrenal depletions and dysfunctions in adrenals oftentimes are going to precede autoimmune disease. What will happen a lot of times is people will experience a very, very stressful time and release a lot of stress hormones, and then the body can't keep up with the stress hormone production and starts becoming low in these stress hormones like the cortisol. Once we are low in cortisol, that makes us susceptible to different types of infections and then a person will often, at that point, develop some sort of a gut infection. That's the triggering and starting point of the intestinal permeability which can then lead to autoimmune conditions.

With the other ways that the adrenals and thyroid work in feedback with one another is whenever there's excess thyroid hormones, the body will try to slow things down and they'll produce reverse T3 instead of the active T3 so that to basically not to activate the thyroid receptors but just to take up the thyroid receptors and prevent a person from becoming hyperthyroid. The adrenals play a very, very important role in making sure that we are keeping with homeostasis.

Under normal conditions, the two work very, very well together, but in terms of autoimmunity and thyroid dysfunction, you'll often see that both adrenals and thyroid gland are going to be impacted. Majority of my clients who didn't get better with just maybe some nutrition or medications will find that they have some degree of adrenal fatigue or adrenal dysfunction where they're not producing enough of the stress hormones and that's dragging their thyroid hormone production down as well.

Katie: Wow. It's really such a vicious cycle that any of those factors whether it's intestinal permeability or adrenal issues or even like stress or diet, they can all trigger that cascade that affects everything. I feel like hopefully that's going to become the future of medicine is looking at all of those factors in a holistic way. I feel like there are people like you who are leading that charge and looking at root causes and looking at all the factors. I think that's so hopeful what you said that even just if you can fix one of those legs, whether it be the intestinal permeability or the trigger, that that can help put a condition in remission even if you still have, like you said, that genetic predisposition or maybe you still have a trigger but you don't have the intestinal issue or vice versa.

I feel like that's really hopeful because sometimes the conversation about thyroid problems can get gloomy. It's good to hear that there are people who are getting in remission and that's a definite possibility, that it's backed by the research.

Izabella Wentz: Mm-hmm (affirmative). Yeah, absolutely. Sometimes it's an infection that triggers the condition. There's research supporting H. pylori infection being a common thing in Hashimoto's. Treating that infection, I've seen some people get into remission from that. A new infection that's just been recently described in the literature that I've seen for a few years not is blastocystis hominis. It's a protozoan parasite and that can actually contribute to leaky gut in the person. I've seen whenever we treat that infection in people, that their gut permeability will reduce, their food sensitivities will reduce and their thyroid antibodies will start declining.

Katie: That's fascinating. I'd love to get your take on a couple of myths that seem to be related to thyroid disease as well, or at least maybe they have truth to them but they're very often repeated. In fact, I'll even have people come leave comments on my blog to tell me about them quite often. The first one is that if you have any kind of thyroid problem, you should absolutely not eat cruciferous vegetables because they have compounds that attack the thyroid. I know that you've written about these and there seems to be a lot of back and forth, but can you clarify that?

Izabella Wentz: Mm-hmm (affirmative). Yeah, absolutely. That's a really good one, Katie. Those poor cruciferous vegetables, they're so good, they're so tasty but they get this bad rap, don't they?

Katie: They do, yeah.

Izabella Wentz: Basically, there's a word that people should be familiar with. It's goitrogen. This is an old word and it's not the best descriptive word in the world because what it basically means is something that interferes with thyroid function. There's a few different mechanisms for interfering with thyroid function. We talked about soy and how people with Hashimoto's and thyroid conditions should avoid it. Soy is a goitrogen because it interferes with the thyroid peroxidase enzyme, which if you guys remember, that's the enzyme that's usually a target for the autoimmune attack.

Soy can lead to increased amounts of thyroid antibodies. That's a goitrogen that we definitely don't recommend. The cruciferous vegetables, they are listed as goitrogens because they can block iodine absorption into the thyroid gland. Now, back in the day when primary cause of hypothyroidism was due to iodine deficiency, that can potentially exacerbate iodine deficiency if you are eating all these vegetables, all these big heads of cabbage and lots of kale. That could potentially prevent any tiny traces of iodine to get into your thyroid gland. That's how that myth got started.

For people with Hashimoto's, generally that's not going to be an iodine deficiency condition. Studies time and time again have shown that the rates of Hashimoto's increase with iodine, so the higher rates of iodine you have, the more likely you are to develop Hashimoto's if you are genetically predisposed to get that. Looking at goitrogens from the respect of the broccoli and the cruciferous, those are not going to play a role in Hashimoto's. If anything, they're going to be helpful for detoxifications because they have a lot of great sulfur-based compounds that help us detoxify and we talked about how detoxification is a system that's often impaired in Hashimoto's.

Definitely, you can eat your broccoli, you can eat your cabbage. A small percentage of people with Hashimoto's, I would say less than 10, maybe iodine deficient or may not be able to tolerate the cruciferous vegetables in their raw state. That can be due to ... Because of the iodine blocking reasons or because they cannot just tolerate raw vegetables. In that instance, I would recommend steaming them or fermenting them. Fermentation process and steaming will actually reduce the iodine blocking components of these vegetables. Yeah, that's one of those myths that has a little bit of truth in it, but we've clarified that and more people will buy more broccoli.

Katie: Exactly. Basically, unless you have a very specifically diagnosed iodine deficiency that you're working on correcting, there's no reason to avoid them at all. You've mentioned the iodine thing quite a bit. One reader, Savannah, asked, is iodine okay if you combine it with selenium properly? Because a lot of the research, at least, that I've read and I'm not a doctor obviously, but it seems to say that it's most dangerous when it's out of balance with selenium. She wanted to know if you combine it with selenium in proper ratios, is it okay? If so, how much to take of each one?

Izabella Wentz: That's a really great question. That is a big thing in the research is basically iodine and selenium play very well together. When you don't have enough of one, you can have problems with the other. Definitely, we talked about that pathway whenever thyroid hormones are produced from iodine and get converted and hydrogen peroxide is a byproduct of that. That can be damaging; where selenium actually makes specific proteins that help detoxify this hydrogen peroxide. Having enough selenium onboard can be protective of higher doses of iodine. This can be very, very helpful but at the same time, unfortunately, clinically, I haven't seen that in everybody. Some advocates of iodine will say you can take iodine as long as you take selenium. In some cases, this can help, but not in every case.

Katie: That makes sense. Maybe if someone suspects that they have, over the course of their life, gotten too much iodine, they can work with their practitioner to take selenium to see if that helps or to maybe get it from food. I know things like Brazil nuts are supposed to be pretty high in

selenium and just see if maybe raising their levels hopefully does help, but that wouldn't necessarily mean that as long as you're taking selenium, it's fine to just consume as much iodine as you want.

Izabella Wentz:

Yeah, absolutely. As we talked about iodine seems to be a narrow therapeutic index or goldilocks nutrient, when you have dosages of it too high, that can be potentially irritating to the thyroid in Hashimoto's. Studies have looked at what dosages were tolerated by people with Hashimoto's. Up to 250 micrograms is generally going to be well-tolerated. Some people may even be sensitive to that. Generally, I'll tell women, especially of child-bearing age, that usually the amounts that are found in multivitamins or prenatal vitamins of iodine are going to be fine, like the 150 micrograms and the multis will usually have a selenium in there as well. I get concerned when people start doing those really high dosages of iodine in the milligrams which is like a thousand times more than a microgram.

Because I've seen unfortunately some people who would have their TSH go to like a hundred, their T4 go to 0, and their thyroid antibodies go in the thousand range with the high dosages of iodine which can actually accelerate the thyroid tissue damage. With selenium, that seems to be something that is very, very well-tolerated by most people with Hashimoto's and Grave's disease as well as women who want to prevent post partum thyroiditis if they're at-risk for Hashimoto's. The dosage of that seems to be 200 micrograms per day of selenium methionine. That's been the most well-studied dose. It's been found to reduce thyroid antibodies, reduce anxiety, and then reduce the incidence of post partum thyroiditis and post partum thyroid abnormalities.

That's something that I definitely recommend for people to keep in balance and talk to their practitioners if they have any questions. Generally, the dosages in multivitamins of iodine should be okay for many people even with Hashimoto's, and then with the selenium supplement, I generally recommend doing 200 micrograms a day up to 400 micrograms a day. You don't want to go above 800 of the selenium because it's also one of those goldilocks nutrients. Anything above 800 may be toxic. Whenever you're working with nutrients, you want to be mindful of what

effect they're going to have on your body and having the right balance of them.

Katie: Yeah, absolutely. To recap everything we just talked about as far as the positive things that can start helping, even if someone is having trouble maybe finding a practitioner they can work with, from what you said, there are things they can absolutely do that are in their control. Like they could try an elimination diet with some of those triggers and see if that makes a difference or they could look at gut health and start doing some of the things that can help improve gut health and see if that makes a difference. I feel like that's such a positive step. Even someone who maybe can't find the medical help that they're looking for, those are things they can start trying in the meantime.

Izabella Wentz: Mm-hmm (affirmative). Yeah, absolutely. Making sure that they're eating nutrient-dense diet free of any reactive foods is one of the first steps that people can take and start feeling much better. I also surveyed my clients and patients and readers on what things help the most. We talked about removing inflammatory foods works wonders so does of removing inflammatory people. Making sure that you're not stressed out and you're not spending time with people that stress you out, doing things you love, all those things are going to be very, very helpful. As we know, stress contributes to just about every condition, especially thyroid conditions.

Katie: Exactly.