



973: Cycle Syncing Secrets: Master Your  
Hormones and Boost Your Vitality  
With Dr. Jen Pflieger

Child: Welcome to my mommy's podcast!

Hello and welcome to the Wellness Mama Podcast. I'm Katie from [wellnessmama.com](http://wellnessmama.com), and I am back today with Dr. Jen to tackle the topic of cycle syncing, mastering your hormones, and boosting your vitality by understanding your cycle more deeply. And this is both a professional and a personal passion for Dr. Jen, who has helped so many women with autoimmunity, with hormone issues, and with under understanding their cycle more deeply.

And we dive deep today on topics like specific supplemental support, when peptides can come into play, and cautions to know if you're gonna go that route. Nutritional support, lifestyle factors, how to support the fluctuating hormones at different parts of the cycle, and during perimenopause as well.

And she shares so many actionable tips that you can learn from and implement immediately. I learned a lot in this episode, so let's jump in now.

Dr. Jen welcome back. Thank you for being here again.

Jen: Thank you. Super excited to dive in.

Katie: Well, if you guys missed it, we had an amazing first episode all about perimenopause, and Dr. Jen gave some really helpful actionable tips that women can immediately try. And in this episode, I'm really excited to learn about a topic I have not gone deep on on this podcast yet, which is the topic of cycle syncing and how that can be so beneficial to women.

I feel like to start off, it probably is important to define what that term is and what falls under the umbrella of cycle syncing. So when we're talking about this, what do we mean? What do you mean? What factors come into play?

Jen: Yes, cycle syncing is syncing your activities, your diet, even realizing your emotions and how you deal with things to your menstrual cycle. So yeah, this episode is just for women who have a 28 day menstrual cycle. Now, this is also for women not on birth control. I mean, if you're on birth control, you could still play and, but it's gonna be different because your hormones are suppressed. So this is for menstruating women and also really, I love this with perimenopausal women, and this is kind of why I am so obsessed with it and wanted to write about it and talk about it more.

Katie: Yeah. I love that. I feel like we talked a little bit our first episode about the hormone fluctuations that naturally happen during the menstrual cycle. But I feel like we're not conventionally given a lot of insight into what that means and ways we can support our body when we understand that these hormone fluctuations are natural.

And I know in the first episode you mentioned that PMS is not normal, which might come as a surprise to a lot of people listening. And it sounds like there's a tremendous amount of tools within our ability to affect change that we can use that actually can improve our experience of our menstrual cycle in.

All of the phases. So can we, let's jump into that topic. Maybe walk us through what the different phases are and how they each kind of request a different type of support.

Jen: Yes. Follicular phase is the first two weeks of the cycle, where the first day is the first day of normal bleeding. So some people have a couple of days of spotting and then they'll have their cycle. So it's that first day of normal bleeding. This is usually about 14 days. That you have this follicular phase.

Now we break it up into the follicular phase. It can be broken up into the bleeding, the actual menstrual phase, which is usually about one to five days, and then the rest of the follicular phase till ovulation. So when we have the follicular phase, this is where estrogen is more dominant. So estrogen at the day of the first start bleeding all hormones are low, and then estrogen starts to climb up.

So the first five days, I tell women it really just depends on how they're feeling. Some people hit follicular phase running and they feel amazing and they're ready to go. Most people need a couple days. I just usually need like a couple days to recalibrate, and once that estrogen, that estradiol starts to pick up, I feel good. So the first couple days when we look at diet and exercise we want to just still kind of take it easy and not really do crazy things like HIIT workouts or sprints, power lifting.

You just wanna do lighter weights just for the first couple days, see how you feel. And then with diet, this is when we're not gonna be doing extreme fasting, but that will come in follicular phase. So the beef of the follicular phase is days four to five all the way up to ovulation. And this is where you are going to go hard. I mean, I know personally I feel amazing in follicular phase, that estrogen like I, that makes you be able to multitask and do all the things.

So you want to start doing projects, brainstorm, you know, just go at it if you have things to do. Now, workout. This is where you want to do your HIIT workouts. If you're doing HIIT workouts at all. You know, I one, actually, one reason why I really started to talk about cycle syncing more and been handing out for years, like diagrams on it for my patients in my office, is because I had so many women that like to go to Orange Theory. And I remember I did a post on Instagram and I had all these Orange Theory coaches like yelling at me and I'm like, well, but you don't get it.

Like I'm seeing the data with saliva cortisol, like my patients are burnt out, they're gaining weight, doing all these HIIT workouts and getting these splat points. And the worst thing is, is who's competitive, like that? Type A women. I'm recovering type A personality. Like I totally get it. I would be, I would be there trying to get the splat points too, but that is not good.

That is not what our body wants us to do all the time, right? If we're doing that in the wrong phase, we're gonna be crashing our progesterone and increasing our cortisol and it's gonna be disaster. And I've seen this in real patients. And so I allow them, I say, you know, you can go to Orange Theory and do the HIIT workouts those weeks. Save the actual like, HIIT workout splat points for, you know, use them now and then save the weightlifting for them, whatever. So, HIIT workouts. That's high intensity interval training. Now this is coined that, and it's coined great for fat burning. So think about a woman in perimenopause. They're starting to gain a little bit of weight in the belly. They're starting to get more insulin resistance.

They can't eat dessert like they used to, or it sends them into a spiral and they gain weight. What are they gonna do? They're going to do the workout that is best for fat burning, which HIIT is, you know, that's what all the people say. Well, it's not. I'm gonna break it to you all. It's, it's not, that's not the best for fat burning weightlifting is. But if you wanna do HIIT, and if we're looking at VO2 max, which is a marker of longevity and health span. VO2 max for women, we should be doing sprints.

Okay? And I started adding in sprints to my workout. I used to do long distance running and I stopped that. So that's another story I'll tell you guys when we get to it. But you when you do sprints, when you wanna increase that VO2 max, if that's important to you. Or if you are training for something, do the really hard workouts during that follicular phase.

This is also when if you are weightlifting that you are going to go for that personal record. You're gonna go for that pr. So when I'm in my follicular phase. Which I just got out of like, I loved it because you get to lift heavy, you got to go, you know, add on those weights, be like, oh, I just squatted the most I ever have.

Yes, do it then because as we'll talk about, the luteal phase, you're more likely to get injured. So this is another reason why when we really niche down on the workouts, we want to be careful in that follicular phase that we can push ourselves hard. We wanna be careful when we're doing the right workouts.

So follicular phase HIIT workout, sprints, okay. You know, really extensive, stressful trainings. Follicular phase weightlifting, follicular phase. Okay. Now when it comes to

working out in the luteal phase, so the luteal phase is this second half of the cycle. Luteal phase is where progesterone is the dominant hormone.

We need that progesterone to maintain the corpus luteum if the egg is fertilized. This is where you're going to want to stay in, watch movies. Working out in this point is where you wanna do more restorative workouts, okay? You don't want to be doing HIIT workouts. You don't want to be trying to push yourself so hard in that luteal phase 'cause it's not gonna end well.

It's gonna increase your cortisol, it's gonna affect your hormones and affect that progesterone. And then when we have that progesterone bottoming out, you're gonna have that estrogen dominance and you're gonna have symptoms that, like PMS symptoms that are not normal. But things like anxiety, anger, you know, just the rage of PMS. So that it can affect the hormones or shortening of the cycle. So during that luteal phase, things that you can do are still weight train please, please, still weight train. Don't give up weight training ever. You wanna do that consistently, but not really have it... you can do lighter weights and more reps. So you can still get to that weightlifting, you know, to failure, super sets.

You can still do that, but do do more reps. Okay. Don't push yourself so hard because you can get injured. And it was really interesting, this study that they did on, they were a bunch of footballers, they call them, so women's soccer players over in Europe. And they looked at their menstrual cycles and where they got injured more. And it was during the luteal phase. And there's another study on ACL Tears and women during the luteal phase that second half of the cycle. So because of how progesterone reacts with our ligaments. It we're more likely to get injured during that luteal phase. I had a patient, super healthy played soccer through college and stuff, and then was just on rec teams, tore her ACL and I'm like, you are in your luteal phase, right?

And she's like, yes. And I'm like, oh man. But I mean, you can't, if you're competitive playing soccer, you can't be like, oh, I'm not gonna go for that ball, I'm luteal phase. But it, it's really interesting because we do have to be more mindful to injury during that second half of that cycle. So if you're like, oh, I, I really wanna want run sprints. I was like that a couple weeks ago.

I was like, I wanna run sprints, but I have to wait. I'm gonna wait. So I don't wanna get injured. Especially when you get older, it's not as easy to bounce back. So that's, that's like the working out like, how you need to look at it. And that's why it's so important to know where you're at in your cycle and have it be like second nature to be like, where am I at and what should I be doing? So I don't, do you follow any of that right now?

Katie: I do, and I've like dialed that in more and more over the years and I feel like another consideration here is any type of fasting. I know it's something that like is controversial in women to begin with and some people say never fasting, ever. Others say you need to be aware of your stress levels and everything else going on if you're going to do any kind of fasting.

I know for me it was actually a really helpful piece in reversing my Hashimoto's and so I found it very valuable, but I also can see and experienced a little bit if I did it in the wrong times, how it was stressful on my body. So I'd love to touch on fasting and when it is appropriate or not for women especially.

Jen: Yes. This was another big point with patients because you know, everyone wants to do fasting and they're just doing it whenever. And this is something you definitely have to time to your cycle and I'll tell you why it makes sense from a biology standpoint. So estrogen, remember, is more dominant during that follicular phase, that first half and estrogen is gonna make you more insulin sensitive, okay? Where your body is going to respond better to fasting. And I also tell my patients if they're going to be starting to go low carb, which can be a shock to people that aren't metabolically flexible. So being metabolically flexible means that you can bounce from fat burning to sugar burning back and forth without like disastrous meltdowns.

Okay. I always tell people of the Snickers commercial, right, the hangry or whatever. I mean, I always joke with my kids if we would see that commercial. I'm like, well, they're not, you know, they're not metabolically flexible, which only like 12% of Americans are metabolically flexible. So it's that ability to bounce between fat and sugar burning, which our body does at night.

At night when we're sleeping, we do switch into fat burning into some ketosis. So when it comes to follicular phase, if you're just starting out intermittent fasting. Then I would start during your follicular phase to try it out. I wouldn't be like, I'm gonna start this new intermittent fasting during your luteal phase because you're not gonna feel good.

You might crash. Your body isn't used to it. Now, I can intermittent fast during my luteal phase now, but do I do prolonged fasting during my luteal phase? No. So follicular phase, pick, you know, if you're doing a 24 hour fast once a month or a 36 hour fast, pick a time during your follicular phase. I also tell people if they're gonna do like a three day fast for like sardines, or I've had patients do three day fast of carnivore bars or just do carnivore for two weeks just to work on some gut healing.

I have them do it during their follicular phase. It makes a lot of sense because you're more insulin sensitive. You're not going to have extreme cravings. You're not going to fail is

another thing, because it could be very frustrating if you try to do a fast and you just fall flat on your face because your hormones are not having it. And your body's like, Hey, like, I want more carbs now. I need a little more support, from a nutritional standpoint, from a macro standpoint, and you're trying to push it. Once again, it's that pushing past is not really good for women all the time because it can affect our hormones. Now, remember, men. Husbands, kiddos, parents, you know, men have a 24 hour cycle of testosterone and hormone pulses where women have 28 days. So this is where it's, we can't compare, and this is where we have to embrace it, because if we're not embracing it or recognizing it, we might be doing it wrong and causing harm. And this is where I advocate also for a continuous glucose monitor. And for women to wear one, for one full cycle. So they, I want to see the data from their follicular and their luteal phase.

And continuous glucose monitors are very helpful. I had a patient, she was, she's post-menopausal, but she was doing intermittent fasting and she gained 10 pounds. So we had her wear a continuous glucose monitor and she was getting a big glucose spike, probably from a cortisol spike at breakfast time that she wasn't eating and she was passing through.

So we put her on three meals a day that had adequate protein and healthy fats, especially that morning meal is important. If you're eating breakfast, you want it to be healthy fats and proteins. And then she lost, she lost like 15 pounds and then we did a touch of a GLP1 and now she is just at her goal weight and off of everything and just eating those three meals. So this is really important to have the data. So maybe if you are trying different fasting and something's not making sense, you don't think it's working, you're maybe super hungry, you might be doing it the wrong time, or it just might not work for you. So sometimes it's hard when you're listening to podcasts 'cause you're like, I'm gonna try it, but then it doesn't work.

And you may just be different. You may need to get some personal data, like from, you know, some wearables like Fitbit or Oura Ring, or from a continuous glucose monitor. So I think that's really important for the follicular phase to realize that that is where lower carb, you can do the fasting. And then luteal phase.

So luteal phase, since I've been cycle syncing for a couple years, I allow myself to, if I really want some popcorn at night with the kids, I let that happen, you know. You can let carbs in, just make sure some people, if they, the restricting and binging things. So just be careful, just be mindful, you know, if you are having more carbs or you are having a dessert, you know, I tend to have it be during that luteal phase.

So luteal phase, progesterone is the star. Progesterone is going to be, you know, dominant compared to estrogen at that time and compared to the other parts of the cycle. So you are

gonna be a little bit more insulin resistant. So a little bit higher, blood sugars, a little bit more insulin resistant. Insulin is what brings glucose into the cell. So insulin resistance means the glucose is just floating around. So our body by nature, does crave more carbs and you will feel like you want more carbs, but we want it to be the healthy carbs.

And patients that are doing just keto, like all the way through, and they're keto adapted. They're metabolically adapted and flexible. I just tell them, if they're not gonna add on more carbs, just add on more healthy fats, and it's okay to eat more and have more calories in that luteal phase. Like it's okay. And I think that we get stuck in this, I am gonna lose weight, I'm gonna restrict. That's not good because it's not gonna end well either.

If you restrict and your cortisol gets so high, you're just gonna pound on that abdominal weight 'cause your body thinks it's endangered, it's going to stockpile, right? It's gonna put up a stockpile. But in your gut and around your belly for when you're going into famine, that's what they're worried about. So one nice way to look about it is the luteal phase, you're like, okay, like my body is craving a little bit more carbs. I'm gonna have some healthy carbs and not like stress yourself out about it. Not be like, oh my gosh, like I had 80 carbs today, or a hundred carbs, or whatever. If you're counting macros, which I don't, but sometimes people like to count them. But you're not holding that like stress and shaming yourself because you know, I'm heading into follicular phase.

I'm gonna do my 24 hour fast for autophagy, for gut rest, to reset everything. And my body will just stay pretty steady throughout the cycle. So I think that's one way to, as a woman, just to think about the different phases too, is like give yourself grace during the luteal phase, because the follicular phase you can just be a little bit tougher. Do your therapeutic fast or do a 36 hour fat loss, weight loss fast. There's, there's a bunch of different options.

Katie: And that was so helpful. And you mentioned the glucose monitor. I would love to also talk about like what are some of the best tools that you're aware of that women can use for cycle tracking? Of course, you mentioned glucose monitors being a great one. I know their data is so available right now, which I think is so helpful and sometimes it can be like data overload.

So what do you recommend as the most helpful things for women for tracking?

Jen: Definitely the continuous glucose monitor. And I, one thing I didn't mention is coffee. So coffee, the research, if you look at the research with coffee, what I recommend, if you're gonna have fasted coffee, that you make it kind of like that bulletproof coffee. You put the MCT oil in, you put the butter in if you're gonna have caffeinated because you do want something to go with that caffeine. You just don't wanna do the caffeine on an empty stomach. But if you do the butter, MCT oil in there, you're going to continue in that



ketogenic state, so that's what I'll recommend to patients. Or you could just have decaf black, right? But even if you add a little bit of cream, that will probably knock you out of ketosis.

So that's why a continuous glucose monitor if your goals are therapeutic ketosis or fasting for longevity and for cellular cleanup. And autophagy is what we call that as the biological term. But if that's your goal, a continuous glucose monitor is helpful because you can see what affects you. A lot of the times if you're doing extended fasting, we wanna have electrolytes, well, certain electrolytes can bump up blood sugars. So that's something that's really good to test out on your continuous glucose monitor. And then you have your own personal data and then you don't have to wear it, you know 12 months out of the year, you can just use it like one month out of the year.

Just when you're fasting. Ketone monitors are great also, if you are trying to see, you know, ketones for ketosis. A lot of people I just had this conversation with just, casually with someone last week, that protein can kick you out of ketosis, right? So if you are heavy protein instead of heavy fat, that is could be why you're not getting in ketosis.

So that's why it's also good to look at your ketones and see what's going on, depending on what you wanna do and what your goals are. If you want to do a couple days of ketosis, for therapeutic ketosis, or if you want to do fasting, you know, there's a bunch of different things that you could do. So I definitely think that ketone monitor is great too.

I love, you know, I love Oura Rings or other tracking devices. I think also you need to weigh that with like EMF and Bluetooth exposure, so that's another thing that you can use and then you could take a break from. But monitoring sleep is so important. So when we look at sleep, we're gonna have better sleep in that follicular and ovulatory stage.

And sometimes in that luteal phase, if your progesterone is not coming up and showing up, that can affect your sleep because you're having that imbalance and you're supposed to have some progesterone. So I think looking and tracking at sleep can be very important because any part of our cycle we need to be having good sleep. And also helping the cortisol just be at a normal level. And you know that nice rhythm where it's high in the morning, it comes down for bed. We don't want it to be high all day and we don't wanna be burnout. So working on blood glucose and having it be stable can also help that cortisol sleep and then, you know, prayer, meditation, they can all help.

Katie: And you've already given us so many actionable tools in this episode. What would a perfect sort of week look like in cycle syncing? If a woman got all these things dialed in.

Jen: Yeah, absolutely. So I would say start out the month you're, you start out with your bleed, you're eating just moderate carbs and healthy proteins and fats. Then you get into your follicular phase. You pick out, maybe do it with friends, like if they're on the same cycle as you, a 24 hour fast, maybe a 36 hour fast, depending on what you have going on, but you look at your calendar. Like, I am going to do a 24 hour fast today 'cause my husband is going out of town and I can, I just really can, I'll just take the kids out to eat or maybe just cook them something that just they would eat. So as a mother and doing this, you need to look at your calendar if you're gonna plan out a fast.

So you have to plan out a fast. I think that would be the important thing of a perfect week. So that follicular phase, you would go to the gym and you would, you would hit it hard. You would do a really heavy weight workout and then maybe later on that week do some sprint intervals and you would go home and recover with amino acids, with protein, with creatine, all the things.

And then ovulation, you would plan time with your husband. Plan some special time use PT 141 or oxytocin as we discussed earlier. You would, you could still be like more doing low carb there, and then you glide into your luteal phase. You're doing more restorative walking, some mobility exercises, and you're allowing more carbs in there.

You're allowing some more like healthy carbs in there if you, if you want, but you are eating more volume and more fat and you're nourishing your body. And relaxing or staying in, journaling, watching movies with your kids. So all those things. And you're not doing any HIIT workouts 'cause you don't wanna get injured and you wanna protect that progesterone.

So that would probably look like the perfect month. And if you're having symptoms, then you know, you need to reassess what we spoke about in the earlier podcast. You need to look at your liver health. You need to make sure that the hormones are flowing through your body properly.

Katie: Amazing. That was so helpful and I took so many notes as you were teaching. Where can people find you? I know you have a lot of resources for women, that you do a lot of videos that even further explain some of the things we've talked about. So where can women find you, learn from you, and work with you?

Jen: Yes, so I'm on Instagram mainly a lot of teaching there. Also family life and that's Integrative Doctor Mom. I am on YouTube as integrative doctor mom. I have lots of information on there on peptides, on perimenopause. And then my website [healthybydrjen.com](http://healthybydrjen.com) and also Dr. Jen book. Will eventually in the spring, late spring have a book on perimenopause that goes into more detail.

Katei: Amazing. Well, that is super helpful. I'll definitely let everyone know when your book comes out, and I love how deep you go on this topic and how obviously passionate you are about supporting women and them understanding their hormones and at deep level. I loved how in our first episode you said you even view symptoms as gifts because that's our body communicating with us and how you give such practical tools for women to improve their health.

Thank you so much for your time and for all that you've shared today.

Jen: Thank you, Katie. It was so much fun.

Katie: And thank you as always for listening and sharing your most valuable resources, your time, your energy, and your attention with us today. We're both so grateful that you did, and I hope you'll join me again on the next episode of The Wellness Mama Podcast.