

Hey there, beautiful! 🌈 Before you dive in, a quick heads-up: this transcript is a super close-to-verbatim buddy from our podcast, but it's got its quirks! We didn't call the grammar cops on it, so you might bump into a typo or two. But hey, that just adds character, right? 😊 Embrace the wild side of language and enjoy the read! Happy exploring! 🚀



How to Beat Menopause Symptoms Naturally

Carmen Hecox: Hello, and welcome to another empowering episode of Create the Best Me, where we believe midlife isn't about a pause, but a pivot to the most vibrant chapter of your life. I'm thrilled to have Dr. Kris Sargent with us, a renowned Chiropractor, functional medicine provider, health coach, and a beacon of hope for thousands of women navigating the complexities of midlife health.

From battling PMS to navigating menopause, Dr. Kris has not only lived through these experiences but has also helped countless of women regain control over their health using her expertise in functional medicine. Today, she's here to share her wisdom, offer practical advice and inspire you to listen to your body's signals before they turn into loud alarms.

So, if you've been feeling off kiltered, experiencing those baffling symptoms of hormone imbalance, or just curious about how to maintain your health as you age gracefully, you're in the right place. Let's welcome Dr. Kris Sargent.

Dr. Kris Sargent, welcome to Create The Best Me. I am thrilled to have you on.

Dr. Kris Sargent: Oh my gosh, thank you so much, Carmen. I am excited to be here, and I am so honored to be here. Thank you for reaching out. I appreciate it.

Carmen Hecox: Dr. Kris for the viewers and listeners who may be meeting you for the very first time, can you please tell us a little bit about who you are and what you do.

Dr. Kris Sargent: So, I am a functional medicine guru. I've practiced functional medicine for 32 years. So, I'm, I'm the OG of functional medicine, if you will. Uh,

I was, doing functional medicine actually in my life before it was even called functional medicine, before it was known as lifestyle medicine, before lifestyle was even a thing back in the ah dark ages of the eighties, um, we were just like leftover hippies at that point.

So, um, when I was 19, yeah, I started doing like my first cleanses and, um, just all those kinds of things that were so like, hush hush under the radar kind of things to be doing, so I've been doing this for a really long time in my world. And, uh, I really believe that, um, I was put here to do this.

This is, this is what we do right. Um, not that I have any animosity at all. I want to clear that out before we even get started for our traditional medicine here in the United States, because they serve a purpose too. And there's a place and a time for what I do and there's a place and a time for what they do. So yeah, so I I'm a functional medicine, have fun with functional medicine kind of person.

Carmen Hecox: And you also have a YouTube and podcasts, is that correct?

Dr. Kris Sargent: I do have a YouTube and podcast called Spark Faith. I mash up my faith with health quite a bit. I think that we are called, if you don't mind, um, to take care of our temple. And I'm not here to push my Christianity on anybody at all. However, I mean, gotta believe in something. So, you know, if you believe in, that there's a higher power and there's a God, then again, taking care of this outside body that holds our inside soul is important. And that's the space I come from.

Carmen Hecox: And I have not a problem with that I think that we all need to have something to believe in. And I am also a woman of faith, and we believe in the same God.

Dr. Kris Sargent: I know, and I love that about you. I really, I think that's where we connected and probably what brought us together. So that's awesome.

Pivotal Moment in Career: Women's Health and Hormone Imbalance

Carmen Hecox: Dr. Kris, your journey from being passionate about dancing to becoming a leading expert in functional medicine and chiropractic care is truly

admiring. Can you share a pivotal moment in your career that solidified your path toward focusing on women's health and hormone imbalance.

Dr. Kris Sargent: Yes, that's an easy question. Like dancing to now, um, I still love to dance. So that's never going away. And actually, just the movement of the movement piece of my story, like that. I've always done some kind of movement, but yes, there's definitely a pivotal moment. I was in chiropractic school, um, and I had had really horrible PMS.

So, my cycles were awful. Most of the month I was one person, part of the month I was somebody else. I mean, mood swings all over the place. Just not anything that you would ever want to be proud of. Probably ruined a couple really good relationships, um, because of all the mood swings, to be honest. And, as a first- and second-year chiropractic student, we have vitamin reps that come in and talk to us much like, uh, medical students get drug reps in their first year. We get vitamin reps and supplement reps and herbal medicine reps. And this one particular gentleman came in and he was talking in a way that I really connected to, and I went up to him after class and I said, will you please help me? And he's like, look, I'm just a sales rep. I can't help you. And I'm like, but you know more than me. And I begged and I begged, and I pleaded, I made deals with him. Like, hey, I, I'm going to get in practice at some point and I'm going to really want to use your products. So, I need to know how to use them now. And so, I finally cajoled him and into helping me figure out my mess. And to be honest, the mess that we cleaned up is the same it's this, I use the same things now that I used, oh, so many decades ago, um, to fix my own issues and cleaned up my diet a little bit. It was already fairly good, but I was under a lot of stress in school. And so sometimes that kind of came off the rails. Cleaned up the diet. We did a huge detox. And I started taking some extra B complex vitamins.

It was pretty simple. It was a multivitamin and a couple of other things, fish oil, D, all the things that we do now. But within a couple months, all of my symptoms were gone. And my cycles were basically a blip on the radar. Like they, maybe a day I would have that, you know, your little, little teary or a little crabby, a little extra sensitive, but nothing like I had experienced before.

And so, I knew like, if I can do this for myself, then I can do this for thousands of women. Even if that's the only thing I do for them. I knew that I had something really special to help women with.

And, um, so that, yes, that was my aha moment of I'm doing this. When I get out of chiropractic school, I am, I'm going to focus on internal medicine and chiropractic care, and it wasn't called functional medicine then. I didn't know functional medicine until really around 1989, 1990, when I was in school. So that's where it all started.

Proactive Approach to Wellness: Success Story

Carmen Hecox: Great. You often emphasize the importance of a proactive approach to wellness. Can you share a success story where this philosophy helped a patient transform their health?

Dr. Kris Sargent: Oh my gosh, I have so many. You want me to just pick one? Um, one of my more recent women, um, had digestive issues for 30 years. Thirty years and, when you're 48 or 49 years old or 50 years old, that means those issues started in your twenties or late teens. And she just kept getting blown off by her medical doctor. Now, remember I said, I don't have any animosity there, but at some point, you know, she would do a colonoscopy. She did all the things, but there were no answers. There were tests, tests, tests, tests, tests, but not a lot of answers.

And so, she was pretty frustrated. And it had really taken over her life. When you have to know where every bathroom is between here and your job, or when you're going shopping. And that takes over your life and, um, it was devastating to hear the story, to hear her story. And I said, okay, we've got some work to do.

And, she had tried going gluten free and dairy free, however, not long enough. You know, we try things for a couple weeks or maybe even a month and we're like, oh, this doesn't work. Our immune system doesn't always work as fast as we would like it to work. And it certainly doesn't clean itself up as fast as we would like it to.

So, I have a 90 day program for a reason. And that's because it takes about that much time, not only to start shifting things, but just for your immune system to catch up to what you're doing new. And so, we did, we changed up her diet and I helped her with recipes and how to work things and integrate those things into your life, because it also requires that integration, right?

It's not just, oh, here's a diet, good luck. It's let's integrate this. What time do you get up? What time do you go to bed? How much sleep do you need? Where do you see in your schedule that you can go grocery shopping? How do we do meal prep? How do we do batch cooking? How do we make all that make sense to you? We did all those things together. And you know what, within a month, all of her digestive stuff was mostly cleared up. Not that she didn't have any symptoms at all, but I would say 80%. Now you tell me Carmen, what impact did that have on her life?

Carmen Hecox: Significant impact. It gave her a life back.

Dr. Kris Sargent: Yes, ma'am.

Carmen Hecox: Or a life she didn't even know she had because she'd been dealing with this issue forever.

Dr. Kris Sargent: Yes, exactly. And it changed her marriage. It changed her ability to like hang out with her kids. Like it changed everything for her. And so that's probably one of my favorite. Just because it was so extreme and actually just did it because of the supplements and because, the labs that I do figuring out deficiencies and figuring out what else is involved.

It's not just take these foods out. Like that'll get you so far, but it might only get you 60 percent there. If you don't have the supplements, you don't have the things that your body needs to heal, then you still can't really heal, you have to, add stuff in, in order to make that happen. Take things away and add the good things back in.

Carmen Hecox: And I think you brought it on a very important point. I say important because I believe in supplements. A lot of people don't understand that supplements don't work like medication Rx. They take longer for your body to process and start to see the benefits. So, you can't take something 30 days and then just dismiss it and say, well, it didn't work supplements. I've always heard, at least give it 90 days. After the 90 days, that's when you might start to see some results from it. Cause they're a little slower.

Dr. Kris Sargent: That's true. We have to incorporate all of that. And the supplements that I use, I have a hierarchy of, the way that I work things through people. If you look at it like a triangle, the bottom part of that triangle is your basic

foundation. And you can't skip the foundation. And the foundation are the things that nobody really wants to talk about because it's what you're eating, it's what you're drinking, it's how you're moving and sleeping. It's where is your faith or where's the meditation time?

Where is that stress management space? Um, where is that going to be? And I don't just use God for stress management, but certainly part. Like where's that body mind spirit kind of come together. And it's in that bottom part of the triangle. And if you take that triangle and we're going to make four parts, so that's your foundation of your triangle.

The next part are supplements. Supplements are not there to like, well, I eat McDonald's every day, so I take a multivitamin hmm. That's not going to undo the damage that you're doing with all the junky oils and the processed foods that don't have vitamins. And honestly, our junk food takes more nutrients to process than what it gives you.

So, you are constantly in a deficit. So, supplements belong there and that's vitamins and minerals. Okay, then herbal medicine. Now herbal medicine' is a whole different thing. Herbal medicines can be used similar to a prescription. Maybe we need an herbal for or a few herbals to help clean up some icky bugs in our gut, right? We might have some bacteria that need to go away. We can use herbals to shift hormones too. And those are more adaptogenic. They bring high things down and bring low things up. So, we can use some adaptogenic herbs for short periods of time. Then the top little, teeny piece of the triangle, that's where we go.

You know what we need to bring in our medical buddies and do some prescription work with you on top of everything else that we're doing. They're not mutually exclusive most of the time, we can all work together. Does that answer your question?

Misconceptions about Hormone Imbalance

Carmen Hecox: It does. It does. What are some of the most common misconceptions women in midlife have about hormone imbalance and how do you address them in your practice?

Dr. Kris Sargent: Let's see the most common misconceptions. I think one of the big ones is that you have to have hormone replacement. And I think that it's the easy way to go, but it's not always effective. And I've seen a lot more messes and maybe self-selected to be fair. Um, I've seen a lot of messes that I've had to kind of clean up, if you will, from pellets and troche and implants and just that stuff where progesterone is up too high, and estrogen is still too low or there's so much estrogen that you're gaining weight. Your boobs are getting bigger.

So, I think that the need for hormone replacement is a myth, and I think it can be done without. I certainly went through menopause without and I've kind of been on a, an interesting hormone journey. Obviously starting in my twenties, but I had my kids around 40. So that through, I didn't need any fertility treatments. Thank you. However, that still throws you into an interesting space around perimenopause and having children. And then your daughter starts her periods and you're stopping yours. So, like there's, it's made for some interesting times here at home. But I think that there's some misconceptions around hormone replacement.

I think that there's misconceptions about even some of the over-the-counter things that are supposed to get rid of hot flashes because the label says to take one and then if you take one and it doesn't work, then you think, oh, well this supplement doesn't work, but it may not be that. It may not be the right supplement.

It may not have the right ingredients for you. You may need two. You may need six, but you don't know that until you have an expert on board that can help you understand what do we need to do, or do we need to maintain estrogen and raise a little bit of progesterone like activity. Do we need to, um, which is usually the case, we need to actually handle estrogen better, particularly if there's some excess fat storage that's what we're going to call it, um, um, gently. And because estrogen gets stored in our fat.

So anyway, I think that those are probably the common things that I see. I think the other piece is there's a denial piece. There's a denial around the fact that alcohol, sugar, caffeine, really do impact the way that we sleep, which is a huge menopausal issue.

The way that our hormones are processed. Um the way that our sleep patterns get disrupted by those things. And we'd like to think that, oh, having a glass of wine is so easy, and it really chills us out. And certainly, I've been in that, place, and my data shows that drinking alcohol screws up my sleep cycle.

Period, end of story. I have data. So, if it screws up mine, it's probably screwing up yours too. I'm not unique. I'm not weird. It messes with your sleep cycle. So, I think we just have to be really honest with ourselves and self-aware around the fact that sugar, alcohol, and caffeine can really mess with us, particularly in that transition phase.

Carmen Hecox: And so, you say that sugar, alcohol, and caffeine can mess with women in that phase. Do you find that each woman is different to where maybe I don't drink, but I'm a sugar fanatic and I do caffeine; that maybe myself and maybe my sister, because we're come from the same parents. Is there a possibility that my body reacts differently to sugar than my sister?

Dr. Kris Sargent: It's true. Genetics only plays about a 10 to 30 percent role in all of your health, in any of it. So, you and your sister could be completely opposite, right? Just based on genetics. Um, or you could have some similarities. But yes, caffeine can make women anxious. It can make them, you know, some, women don't have any problems sleeping after drinking 10 cups of coffee during the day and others do.

And that's like liver detoxification, genetic differences and genetic shifts. Sugar, you know, some women, lean towards a more diabetic space with sugar. Other women, find that it makes them sluggish. Some women are just, crave it that they don't even understand why they're craving it. And, we had to unravel some of those things. Some of it's emotional. Some of that craving can be emotional. We'll use food to calm our emotions. Maybe we're using food to calm the anxiety of the caffeine that we had earlier in the day. Or because we drank three glasses of wine. And honestly, wine can make you feel anxious the next day.

And there's actually studies to show that wine can create increased anxiety the day after. So, it's not just that icky feeling of hangover like we had when we were teenagers that where you just don't feel good and you're a little sluggish. It's bigger than that now it's different than that now. So yes, everybody can act. Everybody is individual. I mean, as many people as on the planet is how many answers there are. And we just have to figure out what every unique person, that's the beauty of functional medicine, right? It's that personalization um, not that there aren't some broad brushstrokes across some of those things, but, um, it's the personalization and the patient centeredness that makes it special.

First Steps to Improving Health

Carmen Hecox: For our viewers beginning to notice signs of hormone imbalance. What are the first steps you would recommend they take toward improving their health?

Dr. Kris Sargent: Ooh, that's a great question, Carmen. So, you notice that the week before your periods, you know, your early forties, but you notice the week before you're kind of feeling like maybe you don't get as much sleep. Or maybe you didn't even correlate it with the week before your period yet. Right? You just know that there are times that you just don't sleep well. Pay attention. There's so many tracker apps. I don't have a favorite. I'm not on the board of any app, but like, find a tracker app and start becoming more aware and create knowledge about your body. If you haven't done that yet, now is the time to do that. So that would be one of the first things I would tell you to do is get a tracker app, start tracking headaches, start tracking sleep, start tracking cravings, start tracking those, start tracking horniness.

If you haven't already noticed, right? Like start tracking when you're feeling more desirous because all of those things have to do with your hormones. And if you know those things going into menopause in your late thirties, early forties, late forties, like things start to shift. If you notice that you're getting heavier clots, like those are some of the things to notice.

So, what are the things to do first? Let's figure it out, right? We've got to track this thing and notice what changes during the month. Before we can actually say, oh, look during that, week before I don't sleep as well. And I want sugar so bad. It's the only thing I think about. So now we can say, okay, that's generally a time when progesterone starts to shift in our body.

So are we having breakthroughs in estrogen and that's making us crabby. Are we having low progesterone and we're not sleeping well? What's going on during those times? And then we can shift our diet a little bit and say, okay, let's bump up our protein and fat so that you don't start craving sugar so that you maintain your blood sugar and have less anxiety and so that your body can make that, uh, progesterone that you need.

Are you super stressed out? Do you need to come off the cortisol so that your body can make progesterone properly and in a good place? What do you need to do

during that week to love on yourself really? Um, to shift as those hormones change and stay a couple steps ahead of it. But you got to track, and you got to know what's going on and sit down again with an expert to help you sift out and pick out what's important in all of that.

Carmen Hecox: And you know, when you started talking about that, I thought this is real important. And because you're an expert, I want you to talk about it versus me and my little medley research that I've done.

Dr. Kris Sargent: No, you're, you're a woman, you've done lots of research.

Understanding Perimenopause, Menopause, and Post-Menopause

Carmen Hecox: Can you talk about the phases? Perimenopause? When are you there? Menopause? When are you there? And post-menopause. When have you reached that point?

Dr. Kris Sargent: So, perimenopause, you know is it's kind of a joke, right? Perimenopause can really start at any time, generally mid to late forties. Generally, um, that time can really just come with small changes, like I said. Maybe you start having heavier periods. Maybe you don't sleep so well. Maybe it's just, you notice that your sex drive has shifted. Um, maybe you realize that you're done having children, but you're still on the pill and maybe you want to shift off the pill and that changes some things up, right. So, perimenopause is really while you are still having periods that is considered perimenopause.

The definition of menopause is one year period free, 12 months, no periods at all, that's menopause. Anything after that is post-menopause.

So, peri lasts a long time, peri lasts until you can call it menopause, and then it's put in your post-menopause. And you really, every little drip or drop counts. So, you have kind of like some pink discharge after nine months, you're like, oh, I have to start all over again. That may be the last little pink thing you see, but to be fair, you have to start all over again.

Carmen Hecox: Yeah, that was a rude awakening for me is when I went to the doctor this year and I said, hey, where am I? Am I in menopause or am I in post-

menopause? And she says, well, when was the time you had your last period? When was the last date? And then she says 12 months, oh, you're in post. I'm like, wait a minute.

Dr. Kris Sargent: I missed it!

Carmen Hecox: How did that happen? I thought I was in menopause, but now I'm post? How that happen? I skipped.

Dr. Kris Sargent: It's really semantics if you really want to, you know, I mean, you're a post-menopausal woman. You're in menopause right.

Carmen Hecox: And so, you brought up another thing. And so, when you're in post, can sugar, alcohol and caffeine affect the hot flashes and all the other stuff that you thought, oh, it only happens in menopause and woo, I'm skating free because I'm in post.

Dr. Kris Sargent: No, no, no, no, you're not done yet. You don't get to skate free. It's the, if you play, you pay, right? So, you can choose how you want to handle it, but know that sugar, caffeine and alcohol affects all of us differently. Like you said, you, your sister, me, my sister or whatever, right. It's going to affect all of us a little bit differently. And as somebody who's post-menopausal seven years what it was five years ago is different than it is now. And some of it is stress related for sure. We all, you know, maybe some of us are in a sandwich space where we still have kids at home, but we're taking care of our parents.

And so that increases stress and that increases cortisol production, and I've had to overhaul a whole bunch of things in the last three or four years because I started taking care of my mom and it's been very stressful. So yeah, things can shift but caffeine, alcohol, sugar exercise food all play a role in how well you're going to handle not having a, I haven't had a hot flash, and I can't remember when. Um, not having hot flashes versus having hot flashes, not sleeping well versus sleeping well. There are nights that I don't sleep well, but it's because I've chosen to have two glasses or three glasses of wine instead of just one. But it's a choice and it's going to be on a day where I know I don't have to get up tomorrow or I can take a nap.

Foundation to Health: Eat, Drink, Move, Sleep, Think, Feel Well

Carmen Hecox: In your approach to functional medicine, you highlight eat, drink, move, sleep, think, feel well as the foundation to health. Can you provide examples on how small changes, in one of these areas can significantly improve hormonal health.

Dr. Kris Sargent: Absolutely. Um, in fact, this is one of the things I just, I've been playing around with my own because I'm, my best experiment because I'm super self-aware about stuff. And if I learned something that I can help you with, then, hey, let's try this, right? So, one of the things that I've known for a really long time just in the nutrition space, we're going to talk about food because it has a big, such a big impact.

Is that if we eat protein for breakfast, we are about three times less likely to go overboard on carbohydrates. So, when we start our day with some solid protein. I just posted, I just hit a post, um, that I had made some lamb early in the morning and I eat lamb for breakfast well that kind of people are like, what?

But you know what it doesn't matter what protein source it is. I don't eat eggs because I'm sensitive to them. I can eat them once a week or so, they're a great protein source and not to be ignored ever. They just don't work for me. And because some foods are healthy doesn't mean that they're healthy for you.

I would just say, if you can start shifting your morning to some good protein source first, I think you'll find that you're much more satiated and even keel through the day.

The Impact of Carbohydrates on Blood Sugar and Hormones

Carmen Hecox: I've always heard that eating more protein keeps you full, keeps you more satisfied.

Dr. Kris Sargent: It does. You know, one of the things that I talk a lot about with people because diabetes is so rampant is what does a standard American diet consist of? Let's, we'll just throw this out there real fast, right? Like basically what happens when you're doing the standard American diet. Let's say you're trying to do the healthy standard American diet.

So, you're going to have oatmeal for breakfast. Well, oatmeal is about 40 grams of carbs by itself, but you put some brown sugar or some honey because you think those are more healthy, even though they're still at the bottom at the end of the day, they're just sugar. Um, and then you add, um, some berries, but that's still also more carbohydrates.

So, what we're looking at is 60 grams of carbohydrates in a little bowl. And maybe that doesn't equate to anything for anybody, but if you are a healthy female, maybe, and you're working on staying at a healthy weight; maybe you eat 100 to 120 grams of carbohydrates a day. That's half of your carbohydrate for breakfast. And what ends up happening is your blood sugar goes up, your insulin goes up, and at the top up here, things hormonally start to happen, insulin in and of itself is very inflammatory and will shift your estrogen to progesterone. Can you say PCOS?

Keeping Blood Sugar Even Throughout the Day

Dr. Kris Sargent: Okay, so we do oatmeal for breakfast and then we crash two hours later.

Let's say you eat at eight, between 6:00 AM and 8:00 AM by 10 you're like starving. So, we go, and we grab, because we're trying to be healthy, like a Kind bar or a granola bar right. And I'm not picking on any particular brand. We grab that, we shove that in her face really fast with lots of cortisol and it doesn't digest well, but it sends your sugar back up. Crashes and then you're like a sandwich person for lunch, so you get your two pieces of bread sandwich and some chips, and maybe you haven't gotten off the soda train. So, it's either a Diet Coke or a Coke and just swig that down. Guess what happens? Boom, right? Plus, you've added caffeine. So, boom, your sugar goes up, all those same things happen up there, and you crash at between two and four in the afternoon.

You're like sleeping through your afternoon meetings and you're like, where's my chips? Where's my Snickers bar? Where's my next, where's my next fix? Where's my next fix? So, let's back up, if we go ahead and eat some oatmeal, let's just say, but we're gonna cut the serving size in half. And let's use a packet of Stevia and a teaspoon of raw sugar.

So maybe just a little bit of both. We're gonna put in a dash of heavy cream or coconut cream and that's it, right. So now we've got half, we've got probably about 20 grams of carbs, which your body can handle perfectly well. And now we're gonna add about 20 grams of protein. I don't care how you get that, if that's leftover chicken, if it's two eggs and a couple sausages. Go ahead and find that 14 to 20 grams of protein.

Now you eat that, you want to know what happens? This is what happens to your blood sugar, it looks like this. It goes up and it stays even for about four hours and then it trails slowly. So that in that half an hour when you know like, oh, I'm getting a little hungry, you can make a solid decision instead of just grabbing the next thing out of the vending machine.

And hopefully you've taken a minute, and you've shoved some nuts or some peanut butter and half of an apple in your cute lunchbox, because we don't have a cute lunchbox, we're certainly not going to ever fill it up. So, you have your cute lunchbox with your half an apple and a tablespoon of peanut butter at 10 o'clock in the morning or at 11.

And you have that with a salad with all the same protein that you had on your sandwich, put it on a salad and part of an apple and a little bit of peanut butter. Now you're not hungry again until about three o'clock, but you're going to get hungry. So maybe some hummus and some veggies or some guacamole and some veggies.

As, maybe as you're going home, or later in the afternoon, right? Three, fourish. So that when you hit the front door of your house, you're not starving. Because then we all know what happens, right? I don't know, I know what happens in my house when I walk in and I'm starving. Where is that fresh bag of chips that I bought for my kids? Because that bag of chips is open on the counter and I'm eating that as fast as I can shove them in while I'm making dinner.

Carmen Hecox: Mm hmm.

Dr. Kris Sargent: So, the key is to keep your blood sugar even all day and not allow those insulin spikes and then your hormones stay automatically more even. So, you ask for one tip, like the one tip is even out your blood sugar, ladies.

Like, get them, get that stuff evened out. If you are still craving a little bit of something sweet, a small, tiny little square of dark chocolate, right? That should, cut that off instantly. Maybe you have one at lunch and one at dinner. If weight is an issue, you're going to need to not do that for a little while until you're at the space where you want to be.

But that was a game changer for me in the late nineties. around weight and weight control.

Carmen Hecox: You know, I had a girlfriend who had a weight problem, and she joined a weight loss program. And one thing that she did to satisfy her sweet addiction is she would get her candy and freeze it. And so, when she would have that one piece, it was frozen. And so, it took a while before it melted. So, I guess it sort of gave her that long feeling that she was having chocolate.

Dr. Kris Sargent: Okay, interestingly, there's actually a fun study done, but after about three bites, your center of satiation is actually satiated. So, if you have, let's say you make cookies, right? If you have just an average size cookie, if you slowly eat that, instead of shoving the whole cookie in your mouth, maybe you make it into five or six bites, right? You cut it up or you take just a little bit, little bit and make it last for a few minutes. You won't go back for more, you'll be fine. It will take care of that sweetness that you were looking for. And you don't have to go eat the whole bag. You can choose those things judiciously instead of them feeling like they control you.

Defining the Relationship with Food

Dr. Kris Sargent: And sometimes we have to have, uh, define the relationship with our food. And if, for those of us who are single, we know what that means. We don't ever like; those are never easy conversations when you're dating somebody. Sometimes you probably have to have them with your husband. Um, we're married. If you hadn't remembered it, we need to have a date night, right?

Like, but we have to have this define your relationship with your food and those foods that don't make you feel good, and you know it those need to be kicked out of your life. Doesn't mean you can never have them, but for the most part, you really need to divorce yourself from some of those foods.

You really do. I learned a long time ago that if I eat a lot of chocolate, I am crabby Kris. I am so crabby. So, I had to divorce myself from chocolate a very long time ago and I've convinced myself that I don't really like it, because it really doesn't like me. So why would I spend any time liking it?

Right? Honestly, I just don't eat chocolate. It's not a thing for me. It's not, it's not tempting. It's nothing. It means it's like my pair of glasses sitting here it could sit there all day and I'm probably not going to be tempted because it doesn't, it makes me feel so awful. And I become such a terrible person when I'm like that. It's not worth it. Did I answer your question?

Carmen Hecox: It does answer my question. I was going to ask you another thing, but what was I going to ask you?

Dr. Kris Sargent: There's a couple of benefits to chocolate. There's some, actual blood pressure, things that some of the phytonutrients in chocolate and cocoa or cacao, that are great for your blood pressure. There's great antioxidants in chocolate, but we are not talking about Hershey's, sorry, Hershey's.

We are talking about actual chocolate, which doesn't taste good in and of itself. It has to have some sugar in it. It needs to have a little milk in it. So those are the, that's the downside, right? Like just to eat cacao nibs, like, okay. It's like eating espresso, chocolate covered espresso beans. Like, okay, how much coffee do I really need?

So, you know, you can decide to have just a tiny little square of chocolate and it is, it can be good for you. It's just not good for me.

Differentiating Between Good and Bad Carbohydrates

Carmen Hecox: I was going to ask you, I had read an article that talked about the importance of women in nutrition once they hit menopause because of the

hormones, but the article also emphasized how much carbohydrates we need to consume every day because if we exceed this certain amount of carbohydrates, then we're at higher risk of developing diabetes.

Dr. Kris Sargent: That's correct. That's what I was saying about, and it depends on how athletic you are and how much you're working out. However, even in that, I still, I hang in that 80 to 120 range, for most women. There are, there's a subset of women that do really well on keto or, uh, a carnivoresque kind of diet who do really well with very low carbs.

I am not one of those women. Um I don't again, it starts to impact my sleep if I don't get enough, I start making too much cortisol because my blood sugar's off. So, I found that a one-to-one ratio of carbohydrates to protein really sits pretty nicely for weight management and for energy management for me.

Sometimes I might go one to one and a half carbs. So, if you have an egg, that's seven grams of protein, right? That means up to maybe seven to 10 or 12 grams of carbs with that egg. If you have two eggs, then you can go back to that little, tiny bit of oatmeal, like that kind of, that kind of feel where they're kind of even. And guess what? That's what keeps your insulin even

Carmen Hecox: And I know when I read that article, I thought, okay, well then, we need to consume carbs because our body needs carbs. But then it identified that there are good carbs and bad carbs. And I'm like, holy moly, this is

Dr. Kris Sargent: I know. Let's, let's not let's not get crazy. Let's, let's shift to think, I don't like to call things good and bad, because that's starchy carbohydrates versus non starchy carbohydrates, okay, versus processed carbohydrates. So, let's, let's, let's take a look at those. Non starchy carbs you guys all know what they are.

They're everything you would put on a salad or that you would steam or that you would grill, right? So, all your zucchinis, all your squashes, all your, sorry, summer squashes, all of your, broccoli, cauliflower, brussels sprouts, all brussels sprouts are we're not going to get that technical.

Brussels sprouts, carrots, celery, like all of those, you know what those are, right? All your lettuces, all your greens, versus a starchy carb. That's your fall squashes, like your acorn squash, your butternut squash, potatoes, sweet potatoes, turnips, parsnips. Then there's all the processed carbs, which are different than your starchy

vegetables. And what I'm talking about here is Americanized pasta, bread, rice, even quinoa, um, a lot of grains, right? What I'm talking about are grains. And they're not all evil for everyone, even your oatmeal, right? They're not all evil, but they are highly processed, and they do jack your blood sugar up faster than the other two categories.

The slowest category is your non starchy. That, first of all, they're pretty low in carbohydrates, but they also have a ton of fiber and a ton of phytonutrients that your body needs for healthy skin and hair and detoxification. Right? The starchy vegetables have a lot of fiber, so, and a lot of nutrients, so they don't jack your blood sugar up as fast as this other gooey white stuff that Americans eat in pasta and oatmeal and quinoa and rice and all the grains that we overdo. In the other, I guess there's one more category that I want to talk about and that's legumes and that's beans. Um, and not all of us are happy with beans either. And they have, but they have great protein. They have more carbs than protein.

They're not balanced for the most part. So, I've, and they have some things that can be inflammatory for some women. Okay, they have some phyto lectins and some of those things that women just, some women don't handle well. I'm one of those women. I can put about a quarter cup of red beans um on my salad and I'm fine, but I can't do it every day. I can throw some beans in my chili, but it's not something I'm going to eat every day. Um, again, this goes back to what we were talking about before, like, really understanding and having that self-awareness of how when I eat grains every single day for a week, I gain three pounds. Hmm that's data, ladies. That's data. It doesn't mean that they're bad or they're just not good for you. Right? So, and again, it does depend on your, on your exercise level. I run about three miles a day on those days that I run three to four miles plus do strength training. Those are kind of freebie days for me. I get to eat kind of whatever I want because I'm at a weight that I want to be at.

And so that allows me, I, you know, I run to eat. It allows that flexibility in my diet to have a little bit more starchy carb. Um, which we all love. Um, but that's just the self-awareness that I've had over doing this again, since for a long time, it doesn't take that long to have that kind of self-awareness. But you can, you can develop that over the course of a year or so, for sure.

Tailoring Health and Life Coaching for Women in Menopause

Carmen Hecox: Considering the comprehensive nature of functional medicine, how do you tailor your health and life coaching to meet the unique needs of women transitioning through menopause?

Dr. Kris Sargent: Yeah, sure. I mean, and we've sort of talked a little bit about that. I start with labs. I start with a deep history, first of all. I want to know everything about you, whether you want to tell me or not. I really hold space and allow women to talk about their sugar addiction, and I'm not here to judge anybody. I'm here to help. I'm here to serve you. I'm here to help you work through the sugar addiction or drinking too much alcohol or whatever that is. Like, I just love my coffee. Like, okay, well, let's, let's figure that out.

What can that look like for you? Um, and again, integration. But so, I start with a really deep history. We do labs and we don't just do labs that your regular doctor does. We dive in and do some cardiac. We're going to look a little deeper into cardiac health. We're going to look at how your B complexes is metabolized through your body.

Um, some of you may know about, um, genetic, the genetic anomalies of MTHFR. Um, like we, we get a clue. We don't do all the genetics, but we get a clue about that with some of the functional analytes that I take. And we get a good look at your, at thyroid function. We dive deep in your labs. Not to find out if you have a disease, although we will, I've picked those up too, but to really look at it from the functional, how is your body functioning?

You know that you take your car in, right? Ladies, you take your car in, they put your car in a computer and the computer spits out a thing that tells your mechanic what needs to be done. Well, that's basically how my labs work. We get about a 15-to-20-page report that says, these are the things that you're deficient in.

And I'm going to help you understand what, how those deficiencies manifest on the outside, right? Low B complex vitamins may manifest as fatigue. May manifest as brain fog, may manifest as poor sleep depending on the person. So, I'm going to help you understand how all of that fits together with what you've already told me.

And then we create a plan together. That's doable and sustainable. Now, that being said, depending on your goals, which we're also going to get into, we may decide that we're going to take some things off the table for six months. Right? And then

we will bring them back in or three months or two months or a week or whatever that that the case may be.

If you have weight loss goals, then we may take some things out for a while and then we can bring them back in, but as choices and as something that you control instead of, again, instead of the food controlling you. Does that help you understand the personalization? Because everybody's different and so everybody's going to need their little triangle filled out a little bit differently.

Overcoming Challenges and Shifting Mindset

Carmen Hecox: Yeah, that totally does. It totally does help me understand it. What are the smallest challenges that you find in working with women, that kind of say, this isn't working for me. How do you help them shift their mindset and overcome those gaps or the, or that hurdle?

Dr. Kris Sargent: Hmm. That's an interesting question. I think mostly digging in at the beginning, to really understand what your goals would be. Like if it was you, Carmen, like what is the big goal? What do you see? How do you want this to play out for you? In five years, what do you want your health to look like?

In 10 years? In 20 years? What is the long game? And now we can bring it back and say, if you're a Friday night, I know you're not, but if you're, maybe you are. If you're a Friday night pizza person and that's what you've done with your family forever, how do we hurdle that Friday night?

Because that's a fun time, right? With your family. And I don't wanna take you out of that fun time with your family. So, we would sit down and say, okay, so for me, I don't eat a lot of pizza because of it's a lot of that junky carb stuff. What if we create a recipe around chicken that has all those yummy flavors?

We could even put a piece of, we could take some chicken breast and some marinara, maybe put one piece of pepperoni with it. Maybe put a little mozzarella or buffalo mozzarella on top that you could have some chicken that would taste like pizza and then have a giant salad that you could still sit down with your family.

And it wouldn't take that much time to make because we can make them in muffin tins. I have some tricks. Um, so then you could eat things and you'd be smelling the same food that you're eating, but it would be good for you. And now we've solved that crisis of, but my family likes to eat pizza, or you have get to have one piece of pizza, but then you're going to eat your chicken and your salad or a half a piece of pizza, right?

Like maybe it's not never, maybe it's not 10 pieces. Maybe it's one, right? Like let's negotiate what we need to negotiate so that this is doable. It has to be doable or no, you're not going to do it. Neither would I.

Creating a Safe and Empowering Environment

Carmen Hecox: That is really good advice or that's really good. Uh, Kris, what is one thing from our discussion here that you would like the audience to remember and hold close to their heart.

Dr. Kris Sargent: I want you ladies to know that first of all, this is a really safe place to come. And I've probably been through a lot of the same things that you've been through. Maybe, you know, we come from different backgrounds or whatever. I've been sitting in this chair for a really long time, and I've heard so many stories.

So, I want you to feel loved and accepted. And I also want you to know that you can do it. You really can. You may have a bazillion excuses running through your head, so you may have a lot of resistance. That's okay. That's okay. If we understand it and we can talk about it and you can be honest about it, then we can move through it. And that resistance will pop up. And in my world, that's just Satan trying to pull you down, right? It's the crabs in the bucket trying to pull you back down. So, I think I would, I want you to know that you're safe and that you can really do this thing. And you can love yourself and be committed to yourself to do this regardless of your circumstances, regardless of your circumstances.

Working with Dr. Kris Sargent

Carmen Hecox: How can people begin to work with you?

Dr. Kris Sargent: Ah, that's easy. I am at Dr. Kris Sargent pretty much all-over social media. And if you'll reach out to me, you can [DM](#) me anywhere. That's probably the easiest way and fastest way to find me. Um, my phone number is everywhere on online. I do have a website it's DrKrisStargent.Com you know, my name is kind of my brand at the same time.

I do have, you can find me, um, again on [YouTube](#) by SparkFaith is my podcast. It's YouTube, [Apple](#), Spotify, all the places. Um, so I, I think I'm pretty easy to find if you really want to, if you're motivated.

Carmen Hecox: But here's the thing if you are Dr. Kris you do functional medicine. You don't have people coming at your door; you treat patients how?

Dr. Kris Sargent: Virtually, I treat people virtually. So, you can be sitting in your jammies in California while I sit here looking out my beautiful backyard here in Tennessee and, um, we can have a great conversation. There's a couple of states that I can't do, but they're up in the northeast. Um, but I practice virtually, so that makes it even easier.

My whole, everything is right here, um, and I did this actually right before the pandemic. Um, I had been practicing with a virtual platform before because I had people, I did have a brick and mortar for 25 years, but I had people in the city of Chicago that couldn't make it out to my suburban, suburb, spot.

So, I think we started using, it wasn't Zoom at the time, but we started using a platform, um, a long, long time ago. Actually, I've probably been doing virtual for 10 years to be honest. So, it works really well, I've got a smooth system, um, and I'm getting ready to put together a membership community so that we can have personalized and community, which I think is also super important.

Ongoing and Future Projects

Carmen Hecox: That's the next question I was going to ask you. I was going to ask you what are your ongoing projects that you're working on or future projects and when would we expect to see those projects.

Dr. Kris Sargent: Yeah, so the membership, just be watching out. I do have a Facebook group. Um, it is Spark Yourself and just like everything else, I love the

word spark. I have been told that I spark people and that I am sparkly and that's just part of my, my personality. So, spark, you can easily find me again.

If you'll just reach out to me on [Facebook](#) or [Instagram](#), I can put you in my Facebook group and then you will be up to date with when everything is going to be rolled out. That's the best I can do right now. So, and I always have on I do some online masterclasses. You can always watch for those too.

Carmen Hecox: Great. Dr. Kris, it has been an honor to you on. I will put all of your information in my show notes so that people can connect with you, join your masterclass, and get on your list to join your,

Dr. Kris Sargent: new membership.

Carmen Hecox: your new membership.

Dr. Kris Sargent: Yeah, I do take one-on-one too. I mean, I don't ever want um turn those, turn you away. I don't want you to feel like you have to wait for the membership either. Um, I do have a one-on-one coaching program that is ongoing and will always be there. So

Carmen Hecox: All right. And you do take FSA.

Dr. Kris Sargent: FSA, HSA, yes, ma'am. I do. Yeah. Just no not insurance.

Carmen Hecox: Alright, thank you

Dr. Kris Sargent: Thanks so much, Carmen. I appreciate your time.

Carmen Hecox: As we wrap up today's episode, I want to thank Dr. Kris Sargent for joining us and sharing her invaluable insights on hormone imbalances. We delved into how these imbalances can manifest when you might begin to see changes and the critical importance of documenting these changes to understand our body's better. It's clear that each woman's journey is unique. Emphasizing the needs for personalized care from your healthcare provider. Dr. Kris highlighted how functional medicine coupled with tailored diet, exercise, and self-care routines can make a significant difference in managing these imbalances.

Remember, it's about listening to your body, being proactive about your health and seeking the right support when needed. For those looking for more information or resources mentioned today, head on over to createthebestme.com/ep070 you'll find links to Dr. Kris's work and additional supportive material to help you navigate your path to wellness.

And if you haven't already, make sure to subscribe

This way you won't miss out on our weekly dose of motivation and advice to help you navigate midlife with grace, strength, and joy.

Next week, we'll be exploring celebrating independence, finding your own path in midlife. It's an episode you won't want to miss, especially if you're looking to rediscover yourself and carve out a fulfilling journey forward. Thank you all for tuning in until next time. Keep dreaming big, take care of yourself and remember you are beautiful, strong and capable of creating the best version of yourself. Catch you next week. Bye for now.