



Menopause Can Be Hard, But Is Your Husband?

Dr. Sharon Stills interviewing
Dr. Sabrina Solt



Dr. Sharon Stills

Hi, welcome back to Mastering the Menopause Transition Summit. I'm your host, Dr. Sharon Stills and we've got a different kind of talk tonight that affects you, but we're gonna be talking about for those of you that are partnered, that have a male husband about his health because our partner's health affects our health. And if you are all here rocking your transition, we wanna make sure you're bringing the fellas along with you. And so I love the title of this talk and I can't take credit for it, my dear guest wrote it, But Menopause Can Be Hard, But Is Your Husband? So that's a good one. And my guest is a dear friend and colleague, her name's Dr. Sabrina Solt. She is also a naturopathic medical doctor. We come from the same Alma mater and she's located where I am, in Scottsdale, Arizona.

And she has been practicing regenerative and anti-aging medicine since 2013. And over the years, she's mastered various treatment modalities such as prolotherapy, PRP, adipose and bone marrow-derived stem cells, as well as birth tissue biologics such as amniotic allograft, and exosomes. She's known for crafting comprehensive and custom-tailored treatment plans for her patients which include things like diet and lifestyle changes, nutritional supplements, bioidentical hormones, peptide therapies, and of course, regenerative injections. In her free time, Dr. Solt enjoys reading, traveling, and spending time with her husband and two children. And she's got lots of information, but her children are adorable so follow her for that just so you can see how cute her kids are. So welcome Sabrina, it's great to have you here.



Dr. Sabrina Solt

Thank you, Dr. Sharon. So excited to be here on your summit.

Dr. Sharon Stills

Yes, yes. And I'm excited to have you, 'cause this is kind of like a little bit of a different conversation that we're having here, but an important one because we are, in some ways, we're only as healthy as those around us, and when we're in a relationship and someone's not feeling good, it really brings us down and so we wanna bring the men along with us. And so how did you, for starters, how did this kind of become your niche that you were gonna focus on men and erectile dysfunction?

Dr. Sabrina Solt

Yeah, we could totally dive down that. I wanted to make a comment 'cause you brought up something just right off the bat that's so, so, so fascinating and I don't know if you've heard about this, but there's actually research that supports how when you are partnered up with someone for a long period of time, you actually end up sharing a microbiome.

Dr. Sharon Stills

Yes.

Dr. Sabrina Solt

Isn't that fascinating? So yes, your health can actually be directly linked to your partner's based on yours or their microbiome and how they work together. But we don't wanna jump down that rabbit hole.

Dr. Sharon Stills

I forgot about that study, but yes, that is very true.

Dr. Sabrina Solt

Isn't it funny? Yeah. So anyway, about me. So like you said, I'm a naturopathic doctor, and yes I've started, I've been working a lot with men's health recently. And of course I started in the hormone industry and a lot of the patients that were coming to see me were women who wanted to help, they wanted to fix their hormones as they're going through the transition. Some women even premenopausal, but a lot of them postmenopausal



going through all the changes that come along with it. Well, they started feeling really great, they started sending their husbands in. And what was really neat about working with the husbands is the transformation that I was able to see in these men when we were taking them from just feeling lackluster, no drive anymore, gaining some weight, not feeling as strong, and then this complete 180. We see this all the time. we joke that we're jealous of this at how men are just such fast responders to anything. They can just think about cutting cake outta their diet and lose 10 pounds. It was just like that in clinical practice, the transformations were incredible.

And what I really started noticing beyond that was when men were coming in with more serious issues, things like heart issues, blood sugar issues, beyond just the hormones and especially ED, when we were actually able to get them better, it was like there was a brand new man in front of me and it was just amazing to see this over and over and over again and I just started becoming obsessed with it, obsessed with just being the person that can catalyze a man into his fullest expression 'cause I really do believe that a lot of things that are happening in the world currently are due to a lack of true masculinity. We see that we hear this term thrown around all the time, toxic masculinity, et cetera, et cetera, but I really do think that there is room in this world for the fullest expression of that true masculine man to come through, and doing our part on the health side, I really do think leads into that in a really, really big way.

Dr. Sharon Stills

Hmm. I love that, so powerful and so important. So yes, so this is the conversation we're gonna have. And so if you are married or in a relationship with a man and he's nearby, go grab him if he's open, if not, grab your notepad and just start taking notes. Because often as Dr. Sabrina was saying, and I've seen over 20 years in clinical practice, the majority of men I treat are a husband of a patient, a brother of a patient, a son of a patient, there's some, but I can count them fairly easily who have like come on their own seeking health. It's usually us dragging them, the women are dragging 'em. So, if you can drag someone right now to listen, great, if not drag a notepad and take notes because then you can share the information. So let's just start about what is ED? Let's just define that and why does it happen? And what are the underlying causes?



Dr. Sabrina Solt

So ED, we can just generally say is any sort of dysfunction that happens throughout the course of sexual function from getting an erection, through maintaining the erection, through any difficulties with ejaculation. And there are even some sub classifications within that that have to do with even things like curvature of the penis. So basically anything that can go wrong during that process could be classified under ED. Now, some things that can cause it very severe traumas, for example, that's one concern. When we're talking about in the context of just general health, we're gonna be talking about the underlying factors that can contribute to this, just to kinda make this a more basic conversation. Otherwise we could get into the weeds with every single thing possible out there.

So understanding that to understand what can go wrong when it comes to erectile dysfunction, we have to first understand, well, what are the actual things that we need to make to get an erection in the first place? And I kind of break it down to three different ingredients, per se, first ingredient being we need the adequate hormone conduction. We have to have that hormonal signaling that'll actually deliver the message that we need to achieve this erection. And that's usually mediated by the male hormone, which we will call testosterone. Where a lot of us are very familiar with that. Of course, this isn't the only hormone that comes into play, but it is a really, really big one in the sense that levels that drop even below about 300 will actually lead to some degree of erectile dysfunction. And what's criminal is that a lot of regular physicians won't even give a guy testosterone replacement until he's in the low 200s.

So there can be a lot of suffering that happens in this intermediary phase. Not even being said, my personal preference for guys is usually between about 900 and 1100. So if we think about, this guy's going to his doctor, he's telling him he's not feeling well. Maybe he's got some intermittent ED, maybe it's not all the time, maybe it's just once in a while, he feels a little bit stressed, he can't completely fall through to completion and he just kind of brushes it off. And his doctor's like, You know what? Your testosterone's fine. It's sitting at 350. I think it's criminal. We can be doing so much better than that. So that's the first ingredient. Second ingredient is actually gonna be adequate nerve conduction. So kind of how I was just mentioned with, oh, sometimes guys, they get a little bit stressed out, a little bit harder to get to completion, and that's because, well, of course stress can affect it as well, but you need your nervous system functioning properly. And



your nervous system is actually gonna function in two different ways, when we're going from erection to completion. And the way that I like to describe it is point and shoot, and they're gonna correspond from parts of the nervous system. So the point part is going to be the actual erection part. And we think point, we think P, we think our parasympathetic nervous system. So we actually have to be able to get into the rest and digest state, this is our parasympathetic state. And so again, we have to be nice and nice and relaxed. This is why it's super easy for a gentleman to wake up with morning wood because they are in that rested state. But then the action the body has to actually transition to the different part of the nervous system called the sympathetic nervous system.

Sympathetic, S for shoot, feels actually go and move forward with ejaculation. This is where we actually see hiccups in what we'll affectionately call whiskey, you know what. When guys have consumed too much alcohol, they've put too much of a stress on that parasympathetic part of their body, they're actually too, too, too rested that they can't completely go to completion when they've had something like excess alcohol that prevents them from going into that sympathetic state. Of course, this can be affected by whether or not you're on other types of medication, too. Certain other things like SSRIs can impact this as well. But that's another aspect of our ingredients that we need. The final ingredient that we need is actually adequate blood flow.

This one should be pretty obvious. We understand that there is a great deal of blood flow that happens when it gets engorged, that's how we create an erection. There are numerous things that can impact blood flow. And this is usually an area where we have to do a lot of digging into a guy's medical history, exposures to different things, because we need to figure out, well, where is this leak coming from? And a lot of the time we see underlying conditions like diabetes and heart disease will actually affect the blood flow part the greatest.

Dr. Sharon Stills

So yes, yes. And yes, I wanna go back to, to testosterone and just kind of, 'cause what you brought up is such a good point. Could you just kinda, for those that have their notepads, like what should they be asking their doctors for? 'Cause it's more than just a testosterone.



Dr. Sabrina Solt

It is so much more, yes, than just testosterone. We really do wanna see how hormones are working in harmony. So not only do you wanna check to make sure your testosterone is good, but another thing that a lot of guys will actually miss is what is your ratio of testosterone to your estrogen? Interesting thing, A guy might have normal estrogen levels, but really, really low testosterone, and all of a sudden, now the ratio's thrown off where he still might be developing, what we call gynecomastia, or the more common term, man boobs, which we don't necessarily want but that's one of the ways that can happen. It's not necessarily that you're making too much estrogen, it's that in a male body, these ratios are incorrect. Another thing that we usually like to look at is something called the sex hormone, binding globulin.

Now sex hormone binding globulin, the way that I like to describe this it's like the bus that drives testosterone around in your body. If there's a lot of those buses, it's binding up a lot of your testosterone and when testosterone's riding the bus, it can't go to work. It's on the bus. It's completely, it's bound up. So checking to see what those levels are at, 'cause another thing, you might have high testosterone, but you also might have high sex hormone binding globulin, meaning you're not getting enough free testosterone freely available in the system. So we talk about strategies on how we can work with that such as reducing alcohol consumption, weight lifting, eating more protein, those are usually the best things that we can do to actually bring that up naturally. In addition to that, I do actually like to even check guy's cortisol levels, again, the stress response, and what's interesting is I don't just check cortisol, I actually check a hormone called prolactin.

Now women might be listening to this and thinking, prolactin? I know what that is. That's the hormone that we release as females when we're lactating. And I'm certain, ladies, if your husband was lactating, he'd probably tell you, but if he's not, and it's so interesting, we see this pop up a lot on labs because it has a direct correlation with cortisol. So they get, the hormone that signals the release of those comes from the same gland and those two kind of travels together. The interesting thing is that with cortisol, it actually gets released at four different times throughout the day so it's kind of pulsatile. When we check labs, we're getting one single reading from one point in time throughout the day and that might not be the time of day that that cortisol is misbehaving. But if we do that test and we see that the prolactin is elevated, we can actually extrapolate that



the cortisol is haywire at some other point throughout the day and we actually need to work with that. So this has been a really, really useful tool for me for figuring out, hey, is stress an issue with you? Is this cortisol rhythm something that we need to work on? The other option is you can just actually run the four times a day, salivary cortisol test but I do find a lot of people just aren't usually game for spitting in a tube four times a day. This is usually a lot easier for us. Addition to all of that, I usually love to check thyroid function as well. Underfunctioning thyroid can have a whole host of problems with it and it can definitely, I mean, it's gonna affect energy, it's gonna just even affect how your skin looks, it's gonna affect your digestion, there's a lot of things there that we need to unpack. We also like to check things like fasting insulin, hemoglobin, A1C, blood sugar, again, that other ingredient for our erections, which is our blood sugar management and that's how it's affecting the blood flow.

That's what that one's doing. In addition to that, I also like to do prostate checks, so PSAs. So we wanna make sure that we aren't gonna be giving a gentleman any testosterone if there is any sort of red flags in the prostate arena, and this isn't because the testosterone causes prostate issues, but there is the possibility that if some sort of prostate cancer, some sort of prostate issue was developing that the testosterone could potentially exacerbate it. In addition to that, this is another thing, we, of course, like to run cholesterol levels. Cholesterol is one of those things that I feel like has been so demonized in the medical space for, we can get on a soapbox here, cholesterol is not as bad as they say it is. We have to know what the cholesterol is doing to be able to determine if it is actually a problem. So of course we run a normal cholesterol panel which is gonna look at things like our LDL, which is our quote-unquote bad cholesterol, our HDL, which is our quote-unquote good cholesterol.

And then of course our triglycerides, which is probably the most menacing thing on that panel because it's literally just a fat bound to a sugar. So when we're looking at that and we're seeing something like an LDL, a lot of other doctors will freak out if the LDL is super, super high, because they think, oh my gosh, this definitely means that you have plaque in your arteries. This definitely means you're gonna have a heart attack. We gotta get you on statins. We gotta XYZ the whole down the road. And oh my gosh, and especially if your blood pressure might be slightly elevated, it's just all hell is gonna break loose. But that's not necessarily the case. A lot of times I'll do kind of a couple steps further than that, and I'll actually run something called the oxidative LDL and it's to



check to see if the LDL is in its oxidative form, which is its bad form. Or I'll actually go another step further than that and check for inflammatory markers, something like the hs or the high sensitive, high sensitivity CRP, or C-reactive protein. And this will tell us if there is any, one, generalized inflammation in the body, or two, cardiac inflammation in the body. So hope that's a lot of stuff, I know. I'm trying to be super thorough.

Dr. Sharon Stills

We do a lot of tests.

Dr. Sabrina Solt

We do, and the cool thing about that is that, a panel like that, you're thinking, oh my gosh, there's all this stuff, all this stuff, all this stuff, a lot of great data, really only under \$200. So that's, of course, working with me in Scottsdale but that's, it's really quite affordable if you think about, you go to your regular doctor, by the time you're done with things like co-pays and whatnot, we can get all this data for a really, really great price. And it tells us so much about what's going on under the hood.

Dr. Sharon Stills

Well, in most primary cares, they're just gonna run a testosterone, they're not even gonna, they'll run the PSA, but they're not gonna run a free testosterone, they're probably not gonna run estradiol, they're definitely not gonna run prolactin. Women seem to have the, the real estate on thyroid disease but men have thyroid problems too and so that's a misconception that it's hypothyroidism is a women's issue. We can share that with the men, unfortunately. And so you can just see that there's so many things that go into your men's health, just like there is that go into our health as women. So for women listening, I guess now let's take it to a little different place. Like, how do you notice in your man? How do you talk to him? Because this is, I think as women, we're a lot more comfortable saying, I just don't feel like having sex, but I think men are so, it's such a part of their persona that it can be very embarrassing.

Dr. Sabrina Solt

Yeah, I think so this is, this conversation, I think we have to kind of set the stage, because this is a conversation that if you're having this with your husband, it should be at a time where it is away from the actual act. You're not gonna be initiating this while he's initiating, that this is maybe a planned thing. And that it's of course being done in the



context of an otherwise healthy marriage. I just need to, preemptively say that if you are in a marriage where you feel unsafe, or if there's any of those issues, that there should be other steps that you should take before going into a conversation like this. So just for full safety and full transparency, that's what I wanna lead with.

Dr. Sharon Stills

Good advice.

Dr. Sabrina Solt

So that all being said, if this is otherwise very happy, very healthy, very on the same page marriage, honestly, the first thing that you can do is just one, lead by example, and two, lead with love. I find that guys, your husbands, your partners are gonna be so receptive to you wanting to do the best thing for them because, and this is gonna sound pretty crazy, they want what's best for you too. It's so interesting. I know at least in my marriage, my husband is always trying to do what is best for me. And I find that we're happier when we're both equally trying to serve and to pay attention to each other and trying to do the good things for each other. So a couple things that you might notice in your marriage if this is something that's affecting your husband. One, you might notice that there's a change in his appetite. So when the body starts getting low on energy, it's gonna start going for quick energy.

So he might be going more for the sweets, more for the salty things, more for that like quick convenience food, and he might be eating at different times and he might be eating more. So that's one thing to pay attention to. Where is he getting his fuel from? Another thing, how is he at the end of the day and how is he first thing in the morning? At the end of the day, is he tired? Is he sluggish? Is it hard to hold a conversation with him? Is he just not quite present with you? There could be something else going on too, that's a good indication that maybe his testosterone isn't keeping up. He's not able to just, again, fully engage with you and be present with you. Same thing for the first thing in the morning, is he struggling getting out of bed? Is he hitting the snooze button multiple, multiple times, maybe his thyroid isn't getting up in the morning. Maybe his cortisol is actually really, really low at that time and he's supposed to be getting what we call the cortisol awakening response. And it's just not coming. Is he still going out with friends? Is he still participating in the hobbies? A lot of these things are gonna be behavioral things that you're gonna notice, because guess what? He's probably not



gonna tell you how he's feeling. He's just not. Guys really, there are exceptions to this rule, I will say, but for the most part, he's not gonna tell you how he's feeling. You're gonna have to rely on your sleuthiness and looking at what are the behaviors that are happening. And once you, if you are paying attention to these, if you're like, yes, this is my husband, if you know, you know, if you've seen this, you've been going through this, it's not his fault. This is another thing that I wanna preface this with. If you are noticing these changes, honey, he is not doing it to you. It just is. He is going through something. He's not not trying to pay attention to you, he's not not trying to pull his weight around the house, he's not doing it to you, it just is. So this is the great, the best opportunity where you can tell, like, even just gently suggest it that, hey, maybe you should go get your hormones check.

And it's so funny because a lot of time, guys, they actually get excited about the idea of being on testosterone, because they've seen the bodybuilders, they've heard about it in TV shows, they've heard about it in movies, and to them, it's like, oh wow. Yeah, I might be a candidate for this. I could feel better. Perfect, let's go. And so it can become easier at that. Now, that all being said, there has to be another layer that happens too, which is what are the things that you have to do as a couple to foster a more healthy lifestyle for the both of you? So what can this look like? This might look like maybe you reduce how much you go out to eat? Maybe you don't consume alcohol when you do go out to eat. Maybe you just stop keeping alcohol in the house. Maybe you really start paying attention to what kind of snack foods are coming into our home and really eliminating what's gonna be, again, going into your bodies because, let's be honest, as we get older, it gets harder to be healthier. I almost feel like every decision that we make it's either gonna lead us towards health or lead us towards disease and more and more and more so, again, as we're getting older. So this is something you get to do together. I think it's gonna be a lot easier to, again, have that conversation with him.

Dr. Sharon Stills

Absolutely. It's always, I think of it as just this continuum and you're standing here and here's help and here's disease and every thought, every action, every food moves you one way or the other.

Dr. Sabrina Solt

You nailed it.



Dr. Sharon Stills

There's only two options. So those are great. Great tips. What about just environmental and how does toxins play a role in erectile dysfunction? And I don't think we actually have said the word andropause, everyone knows about menopause, but men go through something similar called andropause and we as physicians know about it because we maybe get a little blip about it, but it's a real thing.

Dr. Sabrina Solt

It is a real thing. And there is this, I wouldn't even say the misnomer, but everyone says men can men keep their virility or their ability to conceive children throughout their whole lives. Well, that's true, but that doesn't mean that their actual testosterone production and their male hormone production stays up the whole time. Do some men, yes, but it is very, very few and far between where I see men who are into their even fifties and sixties who maintain high, if not barely adequate testosterone levels. It is usually the norm to see it go down. And it is like you said, because of that andropause.

Dr. Sharon Stills

Yeah, I had recently, like maybe in the last six months, I had a patient in his seventies who had normal testosterone and I was like, are you sure you're not getting test- Like, I was like, wow, I rarely see this. You must have stock genes there.

Dr. Sabrina Solt

Yes, well, but like you were also saying, there's the environmental toxins too. So where do we even start with environmental toxins? I mean, it becomes so, I don't wanna say funny 'cause it's not necessarily funny, but it's almost entertaining just how pervasive these toxins are in literally everywhere. I mean, women, did you know that some of the yoga pants you wear contain things called forever chemicals that actually make their way into your skin and slowly poison you over time? I know, I'm sorry. I just lost probably about a thousand viewers just by saying that I'm sorry, I'm sorry.

Dr. Sharon Stills

Clothes down and emptying out our closets now.



Dr. Sabrina Solt

But it really is that bad. And I don't say that to be overly dramatic but to really just drive the point home that, I mean, we are living in such a toxic environment and it becomes, and again, as we're getting older, it becomes a lot harder for our bodies to keep up with those detoxification demands. And unless you're doing things like daily saunas or really, avoiding things like the alcohol or those purposeful toxicants, we'll call those purposeful toxicants, that'll put that extra burden on the body, a lot of us, if you run like a tox burden test, we're gonna show up pretty bad. But for men, there are a few things that I will say that we should definitely go over and not even necessarily toxin.

So the first one that I like to bring up that always surprises a lot of people that could be a boner killer is actually mouthwash. A lot of people don't know this, and it's really crazy, it always blows people's minds, but yes, mouthwash. 'Cause what happens is that mouthwash will actually kill off some of the beneficial bacteria in the mouth that are responsible for producing something called nitric oxide. Nitric oxide is actually the molecule that causes the relaxation in the blood vessels to allow for adequate blood flow. So we can see how that connection can happen, as above, so below sort of thing. So while not necessarily a toxin per se, it can be toxic to that pathway leading to erectile dysfunction. That's a really big one. And then, oh my gosh, where.

Dr. Sharon Stills

Well, and I think most mouth washes, they're blue and they're green and so I think they, we can put them in the toxic.

Dr. Sabrina Solt

Yeah.

Dr. Sharon Stills

I'm still kind of reeling about the yoga pants.

Dr. Sabrina Solt

The yoga pants are the worst, those PFAS I can't, for the life of me, I cannot pronounce what the actual name is. But if anybody's listening, pops what are PFAS into Google, you will find out that these are the forever chemicals that your body can't actually get rid of.



So that's a really, it's a really big deal. And so it's not even just yoga pants, ladies, it's actually things like waterproof mascara, certain makeups.

Dr. Sharon Stills

Let's go back to the boner killers.

Dr. Sabrina Solt

I know, I'm sorry.

Dr. Sharon Stills

We've talked a lot about toxins. I want the women to take a break. Let's focus on the men.

Dr. Sabrina Solt

Let's go, okay. We'll go back to the boners. So for men, there are other things too that can impact this. And again, a lot of the things that can cause these impacts are things that are attacking one of the one or more of those three ingredients that we talked about, blood flow, hormones, nerves. Alcohol is actually another big one for men. So certain alcohol is worse like beer. So beer is gonna may be made from a lot of grains which are gonna have possible phytoestrogenic compounds to it which is gonna throw off hormones. But even then we also get the alcohol impact on our nervous system function, and of course we get that alcohol that actually causes damage to our blood vessels as well. So that's like a three in one, that's probably one of the, one of the worst ones that's out there for sure. And then of course we like to have the conversation about our diet. So I'm personally a proponent of a, we'll call it a pseudo carnivore diet, meaning greater than 70% of calories coming from animal-based products. So think steak, chicken, eggs, whatnot. And a lot of the guys are like, hold on a second, I'm gonna come to you, we're gonna get my testosterone up, we're gonna fix my ED, and I don't have to eat a vegetable? Sign me up. Yes, you can do all of this without eating a single vegetable.

Dr. Sharon Stills

Yes, so we follow each other on Instagram and I'm always drooling those, the bacon.

Dr. Sabrina Solt

So much stake in my house. There's a lot.



Dr. Sharon Stills

And so I'm curious, 'cause I was gonna ask you about this, so what is the other 30%?

Dr. Sabrina Solt

So it's mainly animal-based, and I say 30% is like a minimum, but I will tell you on most days, I'm usually 90% or more, I might eat a couple pieces of fruit, but that's pretty much it. And I have coffee, so that makes up a little bit of the other part as well. But like today, for example, I had one-and-a-half New York strips, I had some plain full fat yogurt and I had butter on top of those. I had coffee with like an organic heavy cream and some bacon, and that's what I ate today.

Dr. Sharon Stills

And you look good.

Dr. Sabrina Solt

Yeah, and I feel good too. But so when it comes to guys and their diets, so the whole cholesterol thing we already talked about, that's a complete myth, so you're not gonna completely blow up your arteries going and trying this animal-based diet. That being said, there are certain cases where maybe I wouldn't recommend this, or I wouldn't recommend this as like balls to the wall right away. But definitely like, especially if you have any serious cardiac concerns might be something that we'd have to discuss in an actual consultation. But that being said, at the bare minimum, we are fully anti-vegetable, anti-nut and anti-seed simply because of all of the lectins, phytates, and oxalates that are present in these.

Simply put, these are what we call antinutrients. And for most people, there is a greater cost to consuming those than there is a benefit that you get from the thing that you're consuming. So we can also say that every single plant in the plant kingdom exists on a spectrum of toxicity. This is a thousand percent true, spectrum of toxicity. Some of them very, very, very low toxicity, some of them very, very, very high toxicity. And then some fall right in the middle, like poison ivy, you touch it on your skin, you're not gonna be happy for a couple days, but it's certainly not gonna kill you, but you definitely wouldn't want to eat it. Now, humans, we exist on a spectrum of tolerance. Some people can really tolerate this stuff super well and it's not gonna cause 'em any problems, which I think is great. Clearly we operate these meat suits that are designed to eliminate stuff.



We have kidneys, livers, colon, urine, bladders, all these things designed to get things out in addition to our skin. So clearly, we can eliminate things. However, when we end up in a meat suit that has disease and dysfunction, we actually lose the privilege to eat whatever we want because now we have to fuel it to actually heal the disease instead of just eating. And so this is where we talk about these really, we'll call them extreme diet changes because the Ron Swanson thing I think is kind of funny. People have seen that, he gets a plate of salad. Oh, you've actually accidentally given me the food that my food eats. But again, if we're in a disease state, we sometimes have to eat in a very specific fashion to get us out of the disease state, doesn't mean that you'll never be able to eat some of these things ever again, but it does mean that while you are here, you gotta work with it.

Dr. Sharon Stills

So this is very controversial. You just said vegetables are, I gotta stop you, 'cause I'm sure-

Dr. Sabrina Solt

Losing their minds.

Dr. Sharon Stills

First, I guess one of the questions would be that I would think you would hear a lot is fiber, what about fiber?

Dr. Sabrina Solt

So there's a whole, so another doctor that I know that I'm friends with, Dr. Robert Kiltz, he's actually a reproductive endocrinologist up in New York. Fantastic human. He actually has a whole writeup on his website that I- Of the fiber myth.

Dr. Sharon Stills

Wait, hold on one second. You just like.

Dr. Sabrina Solt

Am I here now?



Dr. Sharon Stills

Now you're here. So start again with, I'll just say what about fiber and we'll have them cut it out. So people, I would think, I mean, this is so controversial. I got a few questions that I'm sure women are like, we gotta ask this, but they can't. So I'll ask it for you. I'm pretty sure I know what you're thinking. First, what about fiber?

Dr. Sabrina Solt

Yes. And I'm gonna send you a link to this because a colleague of mine, Dr. Robert Kiltz, he's actually reproductive endocrinologist up in New York. He has a whole big write up on his website that dives into this in detail and does it way more justice than I can do in a couple minutes here. Short version, it's a myth, we don't need fiber. You can have completely perfect poops without it. In addition, there's actually a PubMed study that I can send you where they actually cured constipation on a no fiber diet.

Dr. Sharon Stills

Ta-da! So what did you say? You said vegetables were toxic? Or not healthy or what?

Dr. Sabrina Solt

Yeah, so every plant exists on a spectrum of toxicity. Cabbage actually contains 49 known carcinogens. Now, of course they're not in super, super high quantities that it's gonna certainly give you cancer in one go of some sauerkraut or whatever, but it's exposure over time and it's also exposure for what type of body you have. Again, a healthy person, you can probably process this. And a person who is in a disease state, for example, I'll give you a really, really great example. This is something that I've actually seen multiple times in my practice, and it's the woman who comes to me with joint pain all over her body, not long after starting a brand new, healthy lifestyle where she starts juicing kale and spinach or blending kale and spinach. It's the oxalates, it's depositing in her joints.

So now, that all being said, raw vegetables are definitely gonna be the worst because you are getting these poisons in their raw state. Cooking them will remove a lot of them, but you they're still gonna be present. And again, if you are a healthy person, it probably doesn't bother you. I'll tell you, I haven't had a meaningful vegetable in probably seven or eight months. I just haven't. And the first thing that I used to literally eat a salad every single day. Like every day, I would go to Salad and Go. You know Salad and Go. You're in Arizona. If you're in Arizona, you know Salad and Go. Best deal ever like \$6 for an organic



salad with chicken, sold, right? So I stopped eating these salads and I had this like little belly pooch that just never went away after having two kids, it was gone in like, no time, just gone, just gone. Okay, that was cool. And then, so my husband started doing this diet first and I was actually so against it because I'm a really good ND and I was brainwashed into vegetables. So of course, the more vegetables, the better, and I'm watching him and I'm thinking, you're absolutely insane. I don't know what you're doing. You're gonna kill yourself. You're gonna never poop again. Like the fiber thing, I was into the fiber thing too. But then his skin got better. His eyes got whiter. He was like more even keel.

He's already a pretty even keel but he was like more even keel. Like he didn't need coffee anymore. He was like off coffee cold Turkey. I was like, there's something to this. Like again, I was watching my husband's habits in a different way. I was watching how he was actually improving. So I'm like, all right, I have to experiment. So I cut out the salads first and then I kind of did my slow descent into it. And then I finally removed white rice, finally removed oats, and now like I just told you what my diet was. That's pretty much my diet on and any average day with maybe the addition of like some berries. So yeah, it's been-

Dr. Sharon Stills

But wait, I thought we forced our kids to eat their veggies.

Dr. Sabrina Solt

So it's so funny. My oldest, she was raised eating her veggies. We don't make them eat veggies anymore. And our youngest, he's about 18, 19 months and he is like a full on carnivore baby. My husband has these videos of him just like gnawing on ribs. And so here's the crazy thing, the other day, and this has happened more than once, we'll give him the option of fruit or meat, he picks the meat every single time. There's been instances where he'd like start to eat the fruit and he'll see the meat and he'll spit it out. And it just goes to showcase, so here's, this is gonna be a bold statement, but human beings are the only animals that are dumb enough to need a study to tell us what to eat. Like that lion in nature does not need to be told that he should eat the gazelle instead of like a tree or a leaf or something. And if a human being generally was dropped off in the woods, they'd probably try to go and hunt something first before nibbling on a leaf. So we think about, well, where did we come from ancestrally? And there is a very, very big



conversation that you can have as far as are we actually obligate carnivores? And again, stomach pH, our incisors, like there is a lot for that, including like nitrogen dating that's been done on human remains from thousands and thousands of years ago says that we were carnivores. So if we're sitting here and I think we have the ability to eat plants because I don't think that there was always a meat available every single time, and I think plants are more of a survival food versus a thrival food. Meat, for example, has many nutrients in it that we can't get anywhere else, like a lot of B12, taurine, carnitine, carnosine, these are all present in meat that are essential for our bodies that, thankfully we, we live in a world right now where we have the luxury of being able to supplement our diet if we choose to not eat meat. But ultimately, where would we have gotten that? I mean, vegans would've died out. You wouldn't have had the privilege of being able to choose that as a lifestyle.

Dr. Sharon Stills

I've been wanting to have this conversation with you. I didn't know we were gonna have it on air. So ladies, I'm like, I'm learning along with you 'cause I've been watching you and I've been like, this is interesting. And I'm thinking about my granddaughter, who I always say, she's a carnivore. She loves meat, meaties, meaties. And the other day I'm like, come on, eat the broccoli and she's like, meaty, and doesn't wanna eat the broccoli. And I'm like, come on, the broccoli's good. And she, I mean, she also does like a mean cookie. I dunno if she'd choose meat over the cookie, but she definitely has always, I mean, she loves protein and I just think about all of us and, eat your veggies. Now what about someone like me as you're talking about this? 'Cause I love high protein, but when you were like talking about the cabbage, I'm like, I love cabbage and I love broccoli. So is it, from this perspective, can you still eat it or is it really that, we-

Dr. Sabrina Solt

It's so funny.

Dr. Sharon Stills

Say, it's such a total.

Dr. Sabrina Solt

I made a post not too long ago about this sort of thing. And the way that I kind of explained it was that vegetables to a lot of us are basically Stockholm Syndrome. So if we



think about it, as a kid, we're disgusted by them, we hate them, as if they're our captors, like we're being held captive by these vegetables and we're disgusted by them. We hate them. We don't want anything to do with them. And then it's, over time, over time we get broken down and now we love our vegetables. And I'm like, but do you? do you actually like, would you actually truly miss these vegetables if you weren't eating them? And here's the other thing too. I thought that I would miss it too. I really thought that I would need my salads and that I would so miss these flavors but now, knowing how good I feel without them, and I've tested it a couple times just to see like, like I said, I haven't ate like a meaningful vegetable in a really long time, I've tested it 'cause I wanted to see, did I actually feel that bad? And I did, the bloating resisted, my joint pain came back, like I would get like the upper back, like the knots and like the discomfort, that went away a lot.

I would need to see go see the chiropractor less, I needed less adjustments 'cause I was taking in, I think less toxins. And this conversation kind of went into this regard, but I want this to be a conversation for both men and women that are watching, there might be something to this. And if you are one of those people that has been on iteration or iteration or iteration of a quote-unquote healthy diet, and you're still not feeling great, maybe it's the healthy diet that's doing it to you. Like maybe it's the vegetables. The definition of insanity is doing the same thing over and over again and expecting different results, and it's like, man, how many times do you have to double down on vegetables before you're just bust? Try just cutting the vegetables. We really can survive on just meat. There is no nutrient that you will miss if you do an all meat diet. Not saying you do need to do it, that's as extreme as you can get, we call it the lion diet, meat, salt, water. You don't gotta gotta do that. Like I said, I classify myself as hyper carnivore, so greater than 70% of my calories coming from animal-based products. So steak, that also includes eggs, also includes butter. Also includes things like heavy cream in my coffee. But yeah, for the rest of it, it's small pieces of fruit berries.

Dr. Sharon Stills

Does it include chocolate?

Dr. Sabrina Solt

So it's so funny. I used to be an admitted chocolate addict. I thought that I could not live without chocolate. And so I'd be like, oh, I'm just gonna treat myself to a little bit because



I'm used to it. And I would get the like 70% dark organic stuff. The bougie, the bougie chocolate. And it would mess up my sleep. I am now seeing just how bad chocolate was for me by isolating it like this. So could you? Yes. May you find that it doesn't work for you? Sure. Possibly, possibly.

Dr. Sharon Stills

Feel stuck on, I do truly like broccoli and cabbage, but I could probably give up a lot of other veggies. This is such a different way of thinking, but that's what we're doing. We're showing that there's so many different ways to health and so much of what we have been taught can be false.

Dr. Sabrina Solt

Well, and here's the other thing too. It's all a grand experiment. None of us really know what we're doing and none of us are getting out alive so why not experiment while you're here, especially if what you're doing isn't giving you the results that you want. And that's my biggest thing, do what gives you results. It shouldn't be complicated. It shouldn't be rocket science. And if you can't gain the results that you're looking for, work the provider that you think can get you there too, but ultimately do what works for you. So if somebody's completely happy eating vegetables, like I will never rip you from the arms of kale. I just won't.

You can stay with your bed of broccoli, whatever it is that makes you happy, go for it. But if it's not, if you are not getting the results that you want, entertain something else even if it goes against everything you have been made to believe in your entire life. I mean, doctors used to bloodlet, doctors used to bloodlet, right? So why are doctors aren't infallible and that's just this other thing too, that it's like, oh, this idea that somebody went to med school and they're a doctor and that makes what they're saying accurate. Well, no, I can be completely full of shit. You're not gonna know until you test it for yourself.

Dr. Sharon Stills

Yeah, I mean, we are the greatest laboratory, our own bodies. And I mean, I have watched you doing it and it's been pretty interesting and I see you looking great, feeling great, your markers turning around and it goes against everything we believe in.



Dr. Sabrina Solt

And that's the thing, I share my labs because I have nothing to hide. If I'm telling you guys I'm doing something, I'm not gonna be like, oh it's so working so well. And then like secretly, I'm like, oh crap. I don't feel great. I'm gonna show you, this is true, real objective data that says my cholesterol is fine, my inflammatory markers are fine, my insulin's fine, my blood sugar's fine, all the things that are impacted by your diet and lifestyle are doing better.

Dr. Sharon Stills

So we definitely tangented there.

Dr. Sabrina Solt

We did, but this is, I think it's an important conversation because this type of diet is what I do. I talk to men about this to actually help with their ED. So it's important, I think, I think we did good going here.

Dr. Sharon Stills

Yeah, so anything else about the, what do you call them, the boner busters?

Dr. Sabrina Solt

Well, yeah, so I can give you a download and I have a whole thing and it's called The Top 10 Boner Killers Hiding in your Home, so we can make that available for your audience to download. Yeah, I think it's pretty entertaining and it's things that you might not be thinking of and it does actually dive into the science behind why this is affecting it. And I do link a bunch of studies in there too if you are just as nerdy as I am.

Dr. Sharon Stills

We love the nerdy. So wow, this has been, I'm gonna go into an existential crisis.

Dr. Sabrina Solt

Join me on the other side, we have steak.

Dr. Sharon Stills

'Cause I eat a paleo diet so it's veggies and protein.



Dr. Sabrina Solt

But if it's working for you right now for all of your goals and you feel perfectly fine, don't change. But if there's just a little, if there's like a room for more and you're like a little bit curious.

Dr. Sharon Stills

I've been so intrigued. I have been so intrigued, trust me.

Dr. Sabrina Solt

Here's the thing, give yourself 30 days, and in those 30 days, it's not gonna be long enough to cause damage by doing just carnivore but it will be long enough to see changes, positive changes. So I always tell do that, and if you like how you feel at the end of 30 days, do another 30, do another 30. Just commit to that, and again, make it your own. It is an experiment we're all just out here,

Dr. Sharon Stills

And there's books written, right? If someone's really, this is intriguing. Are there books you can recommend?

Dr. Sabrina Solt

Dr. Shawn Baker wrote the Carnivore Diet. Dr. Paul Saladino wrote, I think it's called The Carnivore Code. Judy Cho is a dietitian, She wrote The Carnivore Cure, I believe. There's a lot out there. Dr. Paul Saladino's book, I read that one and he actually goes into really, really deep detail about plant antinutrients so if that's something that you're really interested in learning more about, that's a solid one. All those doctors that I just mentioned, they all have pretty big YouTube channels, lots of great information. Dr. Ken Berry is another one. He's another doctor that promotes this type of diet and lifestyle. Dr. Anthony Chaffee, they all have YouTube channels.

Dr. Sharon Stills

You have a great Facebook group, Carnivore...

Dr. Sabrina Solt

Yeah, so our Facebook group, my husband and I run it and we offer just basically help in coaching in that group And it's called Carnivore Harder Happier Healthier. Harder



Happier Healthier is our brand for our men's health outreach as well too so it's kind of like our offshoot for that. But men and women are welcome in there. We actually have a lot of women in there. It's a fast growing group, and yeah, everybody's welcome. And one thing that I like about this group is that it's kind. We were in some other carnivore groups and people got really dogmatic about their beliefs. People were kind of bullies. We really try to make this environment so welcoming so that wherever you're at, wherever your starting point is, you're welcome here. You can sit with us like, it's totally cool and we're gonna help you. And we're gonna help you with resources, we're gonna help you with food ideas. We're gonna, wherever, if you're running into a hiccup, sometimes people are like, oh, my poop is really weird in these first couple of weeks of transition. Maybe you shouldn't trust that fart, that's a place to come and talk about it. We're totally open, it is a great group. So yeah, just search us, Carnivore Harder Happier Healthier.

Dr. Sharon Stills

Awesome. Well, this was fun.

Dr. Sabrina Solt

Yes, it was.

Dr. Sharon Stills

Fun. A lot of from testing to...

Dr. Sabrina Solt

We delved into a lot.

Dr. Sharon Stills

To veggies, to toxins, to mouthwash, to yoga pants, there's a lot to digest here. You're just a wealth of information and always a joy to talk to so thank you, thank you so much for being here and for sharing and for certainly shaking things up a little.

Dr. Sabrina Solt

My pleasure.



Dr. Sharon Stills

Yeah, and there's so many roads home when you think about religions, there's so many roads to health and so perhaps the carnivore is your road and explore and especially it's, you're living proof so I can vouch for that. So ladies, mind blown, mic drop, I'm gonna go exhale, breathe, go ground on the earth and just kinda take in.

Dr. Sabrina Solt

Your steak first of all.

Dr. Sharon Stills

Maybe go hold my broccoli and have a talk.

Dr. Sabrina Solt

Break up with broccoli, #breakupwithbroccoli. I like this. Ladies, if you're listening to this right now, #breakupwithbroccoli. This is gonna be our hashtag on social. Do it. Tag us. Will you break up with broccoli?

Dr. Sharon Stills

Oh my goodness. Bye.