

The Keto-Green Diet For The Female Brain

Heather Sandison, ND
with **Anna Cabeca, DO, FACOG**



Heather Sandison, ND

Welcome back to the Reverse Alzheimer's Summit. I'm your host, Dr. Heather Sanderson, and I'm so thrilled to have Dr. Anna Cabeca here with us today. She and I are very much aligned on what's best for an aging female brain. Lots of greens, a ketogenic diet, and being very mindful of hormones and making sure we get the right nutrients to support optimal brain health. Dr. Anna Cabeca is a DO and OB/GYN who's triple board-certified, and a fellow of gynecology and obstetrics, integrative medicine, and anti-aging and regenerative medicine. She has special certifications in functional medicine, sexual health, and bioidentical hormone replacement therapy. For the past 20 years, she has served over 10,000 women in her private practice, plus millions more through her books, online videos, and articles. When her own health took a troubling turn during menopause, she sought out the wisdom of healers around the world. She learned that modern medicine and time-tested natural remedies are not at odds. Working together, they create indisputable results for true well-being, using delicious healing foods and simple lifestyle changes. Dr. Anna reclaimed her health and her life, and now she can share that with you. Fueled by her belief that every woman deserves to be empowered and in control of their health and life, she developed the keto-green lifestyle, which has helped thousands of women opt out of menopausal misery and experience a joyful transition to the next stage of their lives. You can breeze through menopause and into your second spring feeling the best you ever have. I can not wait for you to share with our listeners what this looks like. Welcome.

Anna Cabeca, DO, FACOG

Thank you so much. It is great to be here with you, Heather, and really I have enjoyed everything you are doing. And this summit is amazing. I mean women's health and brain health go hand in hand. Physical health, mental health, and yeah, I'm glad, and hormonal health and our menopausal brain and what that means for the rest of our lives. I'm thrilled to be here to talk with you about this.

Heather Sandison, ND

Well, we both know that women are affected by Alzheimer's so much more than men. Not only are they diagnosed with Alzheimer's more frequently, but when a man in a woman's life has Alzheimer's, she is the caregiver, she ends up being that provider for that person. So women kind of get it on both ends as the patient and as the caregiver. And caregivers also have higher risks of ending up with dementia. And so I really wanna dive into how we can fully support women

and understand why there is maybe this difference. What are the hormonal changes that affect memory?

Anna Cabeca, DO, FACOG

Yeah, and I think it is really beautiful to understand this because when I was going through my own perimenopause hell I did not understand this. It is not taught, it is not well-explained. And it is really not well understood. It is not well understood. I'm really excited for more women, especially in women's health. Go, understanding their own transition through menopause, and it is gonna change, we are disrupting menopause, disrupting the standard of care, and what people are being put through, just because with the best we have, we just do not know. And so my experience at 48 was this brain fog, memory loss, erodibility, like where's this monster coming from my patients would say, I was not the monster for my patient, but my patients would come in and say, "Dr. Anna, I have this monster within me. "She is like raging sometimes. "And I do not know why I'm acting that way." Well, when I was 48, going through this hormonal hell, I understood that. And that is why what led me to write my first book, "The Hormone Fix." It takes more than hormones to fix our hormones. And while menopause is mandatory, every one of us will go through it, and natural process, suffering is optional. Suffering is optional. We do not have to suffer through this. We have to transition and transform just like we did in puberty, right, just like we did in puberty.

So this is a transition and a transformation into the second spring of our life. How do we get a gorgeous second spring? We have to have good soil. We have to have a good foundation. We have to have good seeds. We have to have good care and nurturing. And this is true, especially in perimenopause menopause for the rest of our life. It doesn't matter how old we are. Women in their 80s, starting anew with creating a healthy brain, body, and libido. I mean, it is amazing, like they are my inspiration. I'm like, "Wow, I helped you do that, thank you." Like, they are my, like, I wanna do what you are doing. We are doing what you are telling us to do. It is a beautiful transition. You asked about why women have so much difficulty in these hormonal changes, this neuroendocrine vulnerable time period that we go through between 35 and 55, is one of the key reasons. And then again, it doesn't stop. But during this transition, it is really important to understand that for the rest of our lives the way our brain is designed, our brain will use glucose for fuel as a preference.

And circulating glucose levels. There's that maintenance level, but above and beyond the use of glucose for fuel in the brain, and gluconeogenesis in the brain is hormone-dependent, it is estrogen-dependent specifically, most likely progesterone-dependent. Now, unless you are studying brain neurochemistry, you might not have ever learned that. Or unless you are suffering from brain fog or memory loss, and you used to have a perfect, darn perfect memory, and you are like, I can not remember my kids' names, let alone wanna have the energy to do anything, right? Let alone be calm and feel responsive versus reactive. And so that took me on this journey, 'cause that took me into the keto lifestyle. And that is where I came up with my keto-green approach because keto alone is very masculine.

Keto-green is a very feminine, very combined feminine-masculine. So really that yin yang of health beyond, perimenopause and beyond. And actually, I really, I have girls from age 14 to 33, my own daughters, and it is perfect for each of them as well. And I'm 55 now with a 14-year-old, so brain health and clarity are even more important. At that time I'm 48. I had a teenage daughter in high school, one in middle school, and a wee one in elementary school. So brain fog led to mass manipulation. So we can not afford that as women. I mean, they were manipulating me. I do not remember you saying that or I do not remember what I said or whatever. And so this gluconeogenesis factor is hormonally dependent. That is key but the use of ketones for fuel in the brain is not.

Heather Sandison, ND

Got it, so if we can switch the fuel from sugar to fat, then we do not rely as much on the need to have plenty of estrogen and potentially progesterone around in the brain. So as we are going through this transition of menopause, where there isn't as much estrogen and progesterone around, it might be easier, is what you are saying, for our brains to burn ketones for fuel. And we'll get back that mental clarity, and that mental energy that we are lacking.

Anna Cabeca, DO, FACOG

Yes, yeah, absolutely.

Heather Sandison, ND

How exciting. Okay. So what else is going on in terms of mental health and memory and menopausal changes with our brains? And I am going to make it, I'm going to switch so that Dr. Anna can share her screen real quick so that everyone can see what she is pointing to.

Anna Cabeca, DO, FACOG

Yeah, I definitely feel like a picture says a thousand words, and I wanna explain this because it is such an important area to understand, and I'm very visual in learning and in teaching. So thank you for that. And one of the things is that this whole transition, like what makes it easy, what makes it complicated with this transition in menopause is certainly the hormones and where it relates to Alzheimer's, 'cause that is what we want. I have a strong belief that we have certain days to live out the many purposes of our lives, and the quality of those days is within our control. And having seen the ups and downs of being a caregiver of a father with diabetes, heart disease, consequences of diabetes, and him going into brain fog, foggy brain areas, but able to, with what I'm gonna teach everyone here today and what you are teaching is to snap him out of it. So maybe it'll help for me to share this story first, Heather, so people can come along with me and understand where I'm coming from as a physician because I always say I never wish any physician the journey I have been on to learn what I know. It is so true, my doctor's bag is full out of desperation, from it being emptied over and over again. And so my mom passed away. I was 16 coming home from school and my mom was 52 undergoing her first heart surgery. The first day I'd come home to my mom not being at home, to an empty house. I'll never forget that day.

And I just understood the gravity of her undergoing heart surgery being in a hospital, and recognizing the research that her clinical care was based on, was research performed on men. There were no 50-year old women in any of those studies. And that was a big aha moment for me at 16. And that led me to be passionate about women's health. And then I went into OB/GYN and my mom passed away in my first year of residency, undergoing her second heart surgery, at the young age of 67. She passed away and I was not able to help her with the best of leading standard medical care that I could. And my mom was my mentor in life and in death. And so then, a decade later, my dad's coming to visit us. He's 79 at this time and has diabetes again for 20 years and on 120 units of insulin a day, on 11 medications and on just like struggling, feeling cranky and irritable. He flew from Philadelphia, which is where our family home was, Philadelphia, and flew to Austin, Georgia, but he had to take the wheelchair and be pushed through the airport.

And my dad was World War II, he went into World War II, served 20 years in the Navy, and I applaud all veterans. And all of our active and retired military, I'm telling you, this is hard work. And this is also where the brain comes in. Post-trauma on the brain can create this neuroendocrine vulnerability in both sexes, especially women. So my dad was 79 at this time, and he's, my mom had passed a decade earlier and I was in private practice in St. Simons Island, Georgia. My son was a toddler and crawling around his ankles and my dad was irritable. He was kind of irritable and he sat on the couch and watched "Two And a Half Men" all day any day out if anyone saw that show. But you know, so laughter is medicine. So that is okay, but I said, "Dad, what's going on? "Why aren't you," you know, he goes, "You know Anna I just do not feel good." I mean, it was not like him to snap or to be forgetful. And so I said, well, let me, do you want me to call your cardiologist? And so I called his cardiologist, who I knew very well from our hometown in Doylestown, Pennsylvania.

And I said, doctor, you know, dad's A, B and C and D. These are his finding. These are his blood test results, blah, blah, blah. And he says, you know, Anna, your dad's 79 years old, he's lived a good life. And I could just hear in the back of my mind, like him washing his hands of my father. And I waited for him to say something else, and he did not. And I said, "Oh, I understand. "Well, do you mind if I intervene, "you know I'm a GYN from Emory." "So do you mind if I intervene?" He's like, you know, "Do whatever you think." And so I went to my father, this 79-year-old, retired naval attache. I said, "Dad are you done living "your doctor's done with you? And he's like, "Well, I'd like to see 80 years old." like okay. He goes, "Anna I'll do whatever you say, "because I just do not feel good." And in 30 days this 79-year old man lost 30 pounds, I took him off three of his prescription medications to start, and he went from using 120 units of insulin a day to 20 units of insulin a day. And not only like, I mean, that is key, like who talks about 79, you are gonna reduce insulin. You go into your doctor, well, let's increase it here, let's add another, glycemic aid or prescription or whatever. You are not looking at reducing it in a 79-year-old man. But those years, I think I wish I had started a lot earlier because that effect on his kidneys had been profound for many years. It ended up in dialysis for the last year of his life. But, you know, so 79, so I have reduced his insulin from 120 to 20 units a day. And not only was he off the couch, but he was also

playing, laughing, and beating us all in sudoku challenges, which our family will xerox, one sudoku page, and who does it fastest correctly. And he beat us all in that. And he was out on the tennis court with the kids. He was out on the tennis court with the kids at 79 years old, and not only, Heather, not only did he make 80 years old, he made 91 years old.

Heather Sandison, ND

Wow.

Anna Cabeca, DO, FACOG

91 good years. He outlived all of his four younger siblings, outlived them all, not just in the number of years, but by decades in the quality of his life. And I wanna encourage everyone to hear that story, male, female, 70s, 80s, 20s, I want you to hear that because at any stage we can change our physiology, which affects our behavior, which affects our wellbeing, which sets the stage for the rest of our lives.

Heather Sandison, ND

Anna gives us back what's most important. Like you describe him enjoying his time with his grandkids versus being crabby and grumpy about them crawling around his ankles. And you can just see these very diametrically opposed visions of what aging can look like.

Anna Cabeca, DO, FACOG

Yeah.

Heather Sandison, ND

And that is what's so exciting is creating this compelling future of like, "Yes, I can be out on the tennis courts, "whether that means with my friends "that I have had for decades, or it means new friends, "or it means my family, or it means work, "whatever's purposeful and meaningful for me. "I have the choice to engage in it, "because I feel up to it." Right, and I think that is really the key to what's so exciting about this. So what did you do exactly, what was he doing? I think that there is one other little point I wanna make about insulin and that is that I think we think of sugar as being bad and that is what's doing all the damage, these glycosylated products and the damage that is done in the microvasculature and in the brain. And yet insulin itself, when we are not only raising blood sugar, but also raising insulin, insulin also sends signals that when we get too much of it, of course, we need enough, but if we get too much of it, it is leading to more inflammation and more degradation. And so just increasing the insulin level doesn't solve the problem. So I'm so glad you mentioned that, but now-

Anna Cabeca, DO, FACOG

Never creates more burden on the kidneys.

Heather Sandison, ND

Exactly, it can-

Anna Cabeca, DO, FACOG

Accelerates their route to dialysis.

Heather Sandison, ND

Just heartbreaking, which means you are in a dialysis center for three days a week for hours on end.

Anna Cabeca, DO, FACOG

Yeah and technically if you are over 70, I believe it is your life, I think it is 70 or 80, but I think it is 70, your life expectancy once you start dialysis is six months. So, I looked at that research 'cause when we decided to put my dad on dialysis he was 90. And so I was like, "Oh my God," I was just like, at 90 he'd been diabetic for over, oh my gosh, how many years, 40 years?

Heather Sandison, ND

Wow.

Anna Cabeca, DO, FACOG

40, 50 years at that point. But he was 90 when he was, and so, but he made it a year and 1/2 after starting the dialysis and he was good, I mean, he still travels. It was just really good, and he died very peacefully. So-

Heather Sandison, ND

Amazing to see that is possible.

Anna Cabeca, DO, FACOG

It was possible when his cardiologist, right, who deals with younger and older people.

Heather Sandison, ND

Yeah, just said.

Anna Cabeca, DO, FACOG

He's lived a good life and that is true. And that is what I hear over and over again. And I think this is the really big thing, it is the quality of our days that matters. But it is also the quality of our relationships. What was dad doing? And any time in the future, like over those next 11 years that I was blessed to have him in my life. Whenever he would start getting irritable or forgetful, it was like, okay, and you ask what did I do? And I have certainly refined it over the years. And over the time working with my dad. I never was able to take away his scotch, it is okay. 91 years old, he had a scotch that day. So, but it was definitely a reduction for sure, in beer drinking and sugar of course, and maintaining stability and just letting him live his life too and have this world of viva at that, he'd worked so hard to get with all, with his children, with his grandchildren and just with his freedom, he had freedom, he lived on his own till his last year. He lived on his own till his last

year. And so, and that is what I want people to recognize. At 79 he would've needed full-time care at 79, but he had another, you know, 10, 11 years of freedom, absolute freedom.

Heather Sandison, ND

And you turned it around, what's the formula?

Anna Cabeca, DO, FACOG

Okay, so this is what I teach and why I'm so passionate about it now. I focus on menopausal women 'cause that is my niche. This works for everyone, I'm telling you. So the concept between diabetes and Alzheimer's we call and you've addressed this in your summit clearly that Alzheimer's type 3 diabetes. So I have turned it around the way of my, what I call my keto-green approach. And I'll explain that in a minute. So, I turned it around by reducing the polyfoma. You have to do that very carefully with a physician's guidance and maybe a functional physician, a health coach, to really monitor some of them, and we have got so many better ways to monitor continuous glucose monitoring. I recommend everyone do that for at least one month. You know, at least one month, maybe even one month every few months, and just really see how your body is interacting? It is gonna change based on your stress level and your epigenetics, and it is really fascinating. So continuous blood sugar monitoring that is.

So anyway, we have got so many better tools, but it would be this keto-green approach with intermittent fasting, no more snacking, healthy fats, cutting out sugars, but having a healthy mic, healthy alkalize. And as I continue to get through, to understand the metabolic syndrome and understand mitochondrial dysfunction and understand what is happening, especially with the hormonal changes as our body ages. One of the key biomarkers that I have people do is check urine and pH for alkalinity, to know that when we have a more alkaline urine pH, we have a more grounded physiology. It is like being in nature versus being in an industrial city covered in smog. So how do we best operate obviously as by design and, but in nature? So that alkaline urine pH plus the work, have higher alkaline urine pH, with lower levels of uric acid and all of these important pieces to the puzzle. But I definitely see that alkalinizing component of our nutrition plan, mentally and physically as part of our.

Heather Sandison, ND

So then tell me, what are some of the things that make us more alkaline, what are some of the things that make us more acidic? Like, can I just drink a bunch of alkaline water or is it more than that?

Anna Cabeca, DO, FACOG

Yeah, it is much more than that. So the whole, we know that plant diversity in our plant foods creates a healthier immune system and lowers the risk of all metabolic diseases. So the whole part of the alkalizing vegetables and herbs and spices are really to add that fiber prebiotic content as well, to support microbial diversity and especially when it comes to, as women's health is prevalent. And men, 'cause their increased rate of prostate cancer, right, so detoxifying

estrogen healthfully, that is a really important factor. So, that alkalinizing with dark green leaf is, like B green, spinach, with herbs and spices like turmeric, curcumin, maca, I have my mighty maca plus formulation that has all these alkalinizing adaptogens, use super oxidants and that is beneficial. And the other piece is, you know, the herbs and spices, food is medicine. And I always say that, learn that the ancient physicians to the kings and back into the Ottoman empires, where the physicians prepared their food, they were their chefs, they prepared their food. And these herbs and spices came from, balancing the constitution of the royalty and of the, it is so fascinating to me. And then somehow we forget that and modern medicine, oh, you can just drive through, it is just about calories. It is not about, I mean, all that garbage that I learned growing up and being a student of health.

And so it is fascinating to me that alkalinizing, but with healthy ketogenic foods, healthy fats, from quality sources as well as high-quality protein, to continue to support our metabolism and our brain function and really restricting the carbs more, especially as I have been doing this now since I created my Keto-Green plan in 2015. I have been doing this now for many years. You know I know like that, I swing in between ketosis and not, and before I'm getting on a podcast or before I'm presenting, I'm like high ketosis because I want that memory, that recall, and it is true, it is just, it is true. It is honoring our physiology by design and the fluctuations in our 20s, and 30s. You can eat anything and have a perfect memory, not so true now.

Heather Sandison, ND

I love it, you were totally ahead of the curve, right? We did not, I think personally, many of us were feeling this, right, when I got into ketosis, I felt mentally clear and we were hearing it in the clinic from our patients. Like when I get into keto, I feel clear. And yet there is been this refrain for so long, certainly in the 80s and 90s, that fat was bad and lots of fear around a ketogenic diet because some people would interpret that as like cheese and bacon and sausage for three meals a day. I think clarifying that you can have what we want. In fact, the whole purpose here is a healthy ketogenic diet, a greens-forward ketogenic diet. I just wanna plug like you were right, because now we see, I do not know if you saw the recent article out of Florida, but in six weeks they took, it is a feasibility study. A small trial, but in just six weeks, they took nine participants with measurable cognitive decline and they reversed it with a ketogenic diet, with a healthy ketogenic diet. Really impressive. And everybody who got into ketosis had a reversal of their cognitive decline. You were on it, you knew, and so that means that you have a lot more experience than most people who were kind of on the edge, like, "Okay, maybe it is a paleo diet" or maybe it is a Mediterranean diet." You are like, no, keto since 2015.

Anna Cabeca, DO, FACOG

Keto-green, right? That is the thing. That is the difference, yeah, absolutely. There's keto dirty and keto clean, which is keto green. And then also learning 'cause right, 2015 I started doing, putting menopausal women on this plan and now it is reached hundreds of thousands of women in my first book, "The Hormone Fix." And then from there "Keto-Green 16," and now my next book coming out is, "MenuPause,".

Heather Sandison, ND

Love it.

Anna Cabeca, DO, FACOG

I know "MenuPause." And it is the five different eating plans that each can break a plateau, listening to your body. Again, we get into a certain way of doing things and we just think that is the way. But just the same thing with exercise routines, we have to change things up. That is really important to remember that variety. It is not a stuck way and it is just the same thing with some clients I have hadn't, even doing keto-green for a long time. It is like sometimes you need a feasting day. Sometimes you need a fasting day. So, we have to change these things up and you have to test, do not guess. So getting into ketosis and checking urine pH levels, it is the combination that is magic. Really the combination is magic and that is honestly the best place, if I could live in that zone, it is hard, it is stressful, takes you, right? Stress is gonna make you more acidic urine pH. Cortisol creates an acidic urine pH by increasing hydrogen ion secretion across the renal tubules of the kidney, we see that.

So you can be eating perfectly and be acidic because mentally you are stressed, but you are the only one who can upset yourself. So you have to learn these pauses, these controls, letting go of what no longer serves us. And that is also a chapter in, "MenuPause," too, is to let go of some of the things, pause things that no longer serve us, and practices that do not serve us, that do not benefit us. That may be media promoted, but they are detrimental and toxic to our bodies and our minds, and that is what's really important. So the constant education, the constant learning, the constant exercising of our mind, it is a critical piece of healthy aging. We can not do that without healthy physiology and physicality. So it is a combination of things and that is an important piece that you certainly, physicians do not have time to address in their medical practices.

Heather Sandison, ND

So what is a typical meal on a "MenuPause" menu or a keto-green menu?

Anna Cabeca, DO, FACOG

Yeah, so one of the things that I love is certainly keto-green smoothies. A lot of times people, and especially converting women from making their morning smoothie that typically had a lot of fruit or a banana or something in it, it is like cutting that stuff out. And instead, maybe a zucchini and avocado and some celery, but protein, and I use my keto-green protein powder, which is a seed and vegan-based protein. You can do collagen peptides, I love using those two sometimes and different proteins, but you wanna make sure you've got zero grams of sugar and healthy fats in there. So adding that avocado or that MCT oil, something like that, can really benefit, so healthy fats, high-quality protein, and some fiber. So some fiber and greens, and that is a really great way to have a keto-green smoothie. And again, still be incredibly delicious, and satisfying, and you are not gonna have cravings in an hour or two. And then another like a keto-green plate.

Like I love smoked salmon cause I can buy it and I can keep it in my fridge. And it is always there if I need it. But smoked salmon with capers, and red onions served on a bed of arugula, drizzled with olive oil is that keto-green meal and you were not gonna be hungry in a few hours. And like a keto-green saute, do it your own saute.

So, I'm a single mom with kids and I have been living in a small condo in Dallas for the last couple of years. I finally decided I was gonna stay and I bought a house here, but like cooking in one, all your food in one pan and having one pan to clean, like this is how I think, and these are how I create many of the recipes that are in my books, but you know, so like I would saute up some onions and B greens and saute that, drizzle it within gee, probably saute in gee or some olive oil and prepare them at the end, just put in chicken or some beef and saute that, cook that right there in the same pan, and yeah, one pan meals. And I love that, and that is a beautiful keto-green meal. You are adding healthy high-quality protein from ideally, non-GMO veggie, organic free range sources, your green leaves and spices, and herbs. Like I love sprouts, and I also recommend fermented vegetables as a crucial part of helping our hormonal balance and gut microbiome. And so that, I mean, that is like, that is a perfect meal right there.

Heather Sandison, ND

I love it, what we do in my house is we travel around the world so that we can, in our kitchen, we can keep it fresh because I think some people say, "Oh, are you having turkey every night? "Are you having ground beef every night?" Or like, are you, you know, there are great wigs to mix it up, right? You can do chicken thighs and then, and broccoli and then green beans and cauliflower. There are so many things once you start thinking about it. But for a lot of people who aren't used to this, it feels restrictive. And so one of the ways to keep it exciting is to say, "Okay, we are gonna use Indian spices one night, "and Moroccan spices another night, "and Asian spices like ginger and maybe some coconut aminos "or some rice vinegar, "something like that to make it taste different." Even though you are eating some of the same basic ingredients.

Anna Cabeca, DO, FACOG

Oh, I loved that.

Heather Sandison, ND,

And then the other piece I, we do exactly the same thing in the fact, that is what we did last night for dinner. The one great big cast iron skillet, that is full of all of the greens and all of the protein that we are gonna have. The other thing we do is roast it. So put it in the oven and then it is so much easier. It is like fast food essentially, 'cause you just put it in and you do not have to think about it. And then this one thing to clean. Crock Pots or the Instapot is another to simplify. I know I love, like, we, I'm gonna get hungry talking to you here.

Anna Cabeca, DO, FACOG

I know, I love it, but it is so good. And in my new book, "MenuPause," after I wrote "Keto-Green 16," my goal was to do "MenuPause" around the world while the pandemic had hit, right at the release of Keto-Green 16. And so I did not get to travel around the world, but I have already traveled around the world quite a bit. I love it when you say that, but I do menopause. I have topics on menopause around the world and how we use those foods to help with balancing hormonal symptoms. And I think it is just a beautiful thing to integrate and a fun thing to do with your family. Another trick is these garden guidance cards. I do not know if you've seen these on guidance.com, but it is like all kinds of vegetables in here. You know some of the most common ones and some like red, for example, red sweet potatoes or you know, like the difference, like purple onions or whatever it may be. And you just draw a few cards and incorporate those foods into your vegetable mix for the day. And I think that is a fun thing for the kids to do too, to get involved in, but plus, and I get stagnant sometimes and I'm like, I'm going to the grocery store, let me choose three cards and see what I can create with it or incorporate those into the casserole or something, yeah.

Heather Sandison, ND

Fun to keep that inspiration. One of the questions we get a lot is, you are suggesting ketosis, am I gonna be in this forever? And you mentioned a little bit of variety. So tell me, what is your typical approach, how long does somebody get into ketosis for, what do they do next, how do they know if, you mentioned testing like, what's kind of the basic, somebody's going through menopause, what's the first six months look like?

Anna Cabeca, DO, FACOG

Yeah, and it is so good because as you think of the metabolic flexibility and one thing, and again, I won't ask anyone to do what I can not do myself, but again, I'm always learning and growing. But I always say 10% fasting, 80% keto-green, and 10% feasting. And sometimes maybe it is more than 20% feasting depending on what season it is, et cetera. But the concept is, does my meal look keto-green? And so you are, for example, you are going out to dinner, you are ordering some steak and veggies maybe, and that is what you are having our fish and veggies. And you just say, make sure there is no sugar in the sauce you are using, and do not bring the bread to the table. And something like that is very, very easy to do.

And when you think about that combination, I mean it becomes easier and easier and then says, okay, well, maybe the next time we go out, we'll have like, and you can have a feasting meal, like a healthy gluten-free, dairy-free dessert or whatever your body tolerates, but recognizing that is just part of, it is just part of the ebb and flow of life, like using learning, what's working for you. And I found it very interesting 'cause I was interviewed on one of the Kardash by like, I think it was people.com, but about one of the Kardashians doing keto and she would have pancakes on Sunday. And I was like, well I'm in, they are calling it her cheat day, that is her cheat day, and asked me what I thought about that.

And I said, well, first of all, I would not consider it a cheat day. I would consider it a feast day. She is getting results, she is looking amazing. She is feeling better and more amazing. And depending on that feast day, she will learn what she can feast on and what she can not feast on as time goes on. So prohibiting it creates restriction fatigue, and often makes people feel like they are on the wagon, off the wagon, they've fallen off, they are failures, and they are just losers and can not do this and it doesn't work for them versus this is all, these are all opportunities to learn and grow and experience. So if I decided like I was out last night on a date or a Friday night on a date, and we restaurant hopped and ended up at this gorgeous little Cafe Madrid, here in Dallas. And they had flourless chocolate torte and flan on the dessert menu. I was like, "Oh, this is like a perfect feasting opportunity." And I looked at it that way and I had to watch myself. Well, I'm cheating on this. I had to change with the way I'm thinking, I'm feasting on this, this is fun. And where I love this restaurant and this food and its good products. So, to change your mentality around, we'll see how I feel tomorrow. But this is a treat, this is a feast. This is an experience, how will my body respond to this? And then I learned from that experience and opportunity, I'm not a failure, I did not sabotage myself. And I think changing the way we think about that is really important, especially as women.

Heather Sandison, ND,

And I might also even change our results, right? You mentioned how having cortisol goes up. If I'm beating myself up because I'm a failure and I did it wrong, and I fell off the wagon, well, now my cortisol is going up. And then now I might fall out of ketosis because of the cortisol, not even the flourless chocolate cake.

Anna Cabeca, DO, FACOG

Right.

Heather Sandison, ND

And so watching that, another piece that comes up is, my husband and I are doing ketosis and he seems to stay in ketosis, but I'm getting kicked out of ketosis. Why is it different for the two of us? How do you coach women when they have that coming up?

Anna Cabeca, DO, FACOG

Men have 10 times as much testosterone as women. The anabolic steroid. Men have more circulating estrogen in the brain because of testosterone conversion to estrogen in the postmenopause compared to postmenopausal women. So I think it is important to recognize that. Testosterone is an anabolic hormone. It builds up, it maintains bone mass, muscle mass, and higher metabolic basal metabolic rates. So they have a cushion there neurologically women, especially in menopause, we are like a pressure cooker with often the lid off. So it is all kinds of stuff with the decline in progesterone. And again, for me, a menopausal and postmenopausal woman should be on progesterone, a bioidentical micronized topical progesterone is my preference. And as a first-line therapy taking, I always say to take one or two days off a week, three to five days off per month postmenopausally and it is important, and men

too I have used bioidentical progesterone pregnenolone, and it made this an important factor for hormone stability, cognition, the neuroprotection, and it enhances the results that we get postmenopausally, whatever we are doing, but certainly when we are on a keto plan.

Heather Sandison, ND

So let's dive into the hormone piece, 'cause I know you've been an expert in that for a long time and there throughout sort of this debate in the field about. Is that healthy, is that the best thing for people? This big women's health initiative study was stopped early because it looked like all-cause mortality. Some people were dying more frequently when they were on hormones. There's a ton of nuance in that. And I want people to understand, especially women who are at risk for dementia, either they have a family history, known genetic predisposition, or they are already starting to feel the symptoms. Why is it, how do you take them through, sort of this cost-benefit, risk-benefit analysis of whether or not hormones are going to be a good idea?

Anna Cabeca, DO, FACOG

Yeah, well, I always say postmenopausally, I mean the benefits are for hormones and first of all, it is true. I mean, I have traveled all over the world. I have seen many amazing women in their 80s, 90s, and above that are just cognitively clear and are not on hormonal therapy. And what are they doing? They are walking, they are in the community, they are in nature. They are living in often rural unpolluted areas and they have a healthy attitude, healthy relationships, and maintain that. So there is always the exception certainly, I would say when we are living in nature, we have nature as medicine, but when we are not, we need to bring nature in and this is where hormonal therapies can definitely help. Our modern American lifestyle is very different. If I'm in Indonesia, in the woods, and I'm hiking along the black volcanic trails, I'm not on any hormones or supplements at that point. If I'm out camping in the woods and nature even here in East

Texas or so, you know around Dallas, if I'm camping, 'cause we have a horse trailer and horses. I mean, I do not need anything else, Nature is medicine in those instances, you are out of the stress typically, unless you are watching a 14-year-old barrel racer racing around a barrel anyway. But you know, those are good things. So I look at it as you know, I use, I have used and I have used in my patients. For now, I have been in medicine, for over, like working in biomedical hormones and sexual health since the 1990s. So in my own practice, I use bioidentical progesterone, certainly perimenopause and beyond, either cyclically or on a continuous basis with little interruptions and transdermals, the balance creams, come my balance cream, is progesterone and pregnenolone with tripeptide for healthy skin changes and collagen production. Of course, we want that if we are using a topical. And so that combination is powerful and uses DHEA and testosterone. So topical DHEA is used for the most important anatomy of our body and that is the clitoris to anus. So that is my jovial formulation. And I found, I have created these things, Heather, because I needed something for myself and for my patients that would work, and that was high quality and did not need a prescription. And so that is where

my formulas and one of the things, the products that I have created have come from because my doctor's bag was empty. And I found, and I created these, found these different ingredients to help me. And certainly, combining bioidentical hormones in prescription was a part of that, that is less than 10%. The 90% is the keto-green way of living.

It is not just what we eat, when we eat, who we are eating with, how we are eating, and how much are we chewing. What's our, there are so many factors to this. What's our mindset at the time of our eating, did we bless our food or not? You know, I mean, these factors that affect our physiology. So that is part of why it is not a keto-green diet, it is a keto-green way. And I think that is really so misunderstood in so much of standard medical practice. And in fact, there is fear and anger when you suggest that. "Look, it is not just in your powerful prescription pad," and there is backlash for that. But bioidentical hormones have a role and are bioidentical, not synthetic, and I do not care that they can be produced by pharma in a few different strengths. There's an art to medicine. Allow physicians to practice the art of medicine. Pharma is restricting us in so many ways and we really need to acknowledge that there are blessings, there is great pharma.

And then there is not. So bioidentical progesterone in a topical form, a little bit goes a long way, is a great option. Also, there is prescription bioidentical progesterone. A Prometrium has been around for decades now, and it is a bioidentical progesterone form. And then using estrogen DHEA testosterone and in troche, in topical, I do not like to use oral hormones after age 55, especially oral estrogens because oral estrogens increase inflammatory markers and risk for blood clots. So that is known as a side effect of oral estrogens. And we have an alternative, the only time topical estrogens aren't working as well, is if we have gut issues or GI tract issues. If you have any GI tract issues, the skin is a reflection of that and you will not absorb your hormones really well. And then sometimes we bypass that for a while, by doing either troches or sub-buccal lozenge type hormonal therapy and vaginal hormonal therapy. You can do some rectal therapy, it is not well-studied. There are not many people lining up for those studies. So, it is an option.

Heather Sandison, ND

So there are lots of options, that I'm hearing is there are lots of options. There are lots that can make it work for you. What about the breast cancer risk? A lot of patients have questions about that. Am I maybe reducing osteoporosis and reducing dementia risk, but am I increasing my chance of getting breast cancer?

Anna Cabeca, DO, FACOG

Well, I, you know, increase, this is where I think the antiestrogen talk is misogynistic, Heather. It really is, I mean these anti-women when we talk about estrogen, the focus is on estrogen, is it really? Well, our studies say estrogen alone did not increase your risk of breast cancer, so why is the drama still on that? And I wanna share a couple of things, a couple of images, and I know we are running close on time, but you know one of the things that increase your risk of breast cancer and diabetes and heart disease and dementia is hot flashes. The more and longer time

that you suffer with hot flashes, I'm relearning hot flashes, the higher your risk is for diabetes and dementia. And I think that is important too, and cardiovascular disease according to research. So I think that is really important 'cause we know that if we are at risk for diabetes, we are at risk for dementia. If we are suffering from it, we are at risk.

And this is the slide I wanted to show you. So if you are listening, I'll explain it. But, if you are able to see this slide. This is designed by me for the dramatic effect of the hormones that are fluctuating in our reproductive lifespan. So in our 20s, we have peak hormone levels, DHEA, for both men and women starts to decline in our 20s and progesterone starts to decline in a woman's 30s with declining ovarian production. And we get into this period with declining progesterone from our mid-30s to mid-50s. This progesterone decreases by about 75% from age 35 to 50. Estrogen decreases by 35% from age 35 to 50. The research on estrogen in the brain has been favorable, but we are ignoring bioidentical progesterone in the brain.

And one reason is bioidentical progesterone I believe is difficult to fund those studies since it is not a patentable profitable intervention, but it is critically important. And we know from research out of Emory with their project three trials, that looked at progesterone on traumatic brain injury. And when they used a bioidentical form of progesterone, they had improvements and good clinical results, the synthetic forms, whoever did not. So I think it is important to look at this. This period then becomes this timeframe of neuroendocrine vulnerability. So we get all the GYN symptoms, regular bleeding, breakthrough bleeding, cramping, all of that, and you get the neurologic symptoms, the anxiety, the depression, the PMS, the mood swings, the brain fog, the loss of libido. It just goes on from there. And as a physician working in this space, going through my own hell and journey, from age 39 with early menopause and infertility, able to reverse that at 41, and then plummeting again at 48 as a long story, I write about that in my, "The Hormone Fix." But you know, this was through my experience I recognized that these changes the power of the keto-green diet in this time period because these are neurologic symptoms. So as I practiced this in my, studied fine-tuning hormones, studying, putting clients on detoxification, nutritional detoxification plans, and an early version of my keto-green plan and they would come by within the further six weeks follow-up to review the labs, feeling 80, 90% better before I ever wrote anything on a prescription pad.

And that is so key, my mom and dad were military, my mom's immigrant to this country, and they did not have access to physicians like me. You do not have thousands of dollars to spend for initial consultation. That is this hormone fix, it is that for everyone, it is for everyone. And that is the difference. It takes more than hormones to fix our hormones. And then neurologically, this was published in 2015 and it looked at glucose metabolism in the brain. And this is what showed that when you have a decline in perimenopause, you have a decline in glucose metabolism in the brain with an increase in these neuroendocrine symptoms. In other words, your brain is starving for fuel. And it is important to recognize this because we bypass this process by switching to ketones.

And that is what I was talking about earlier. And you know, diabetes, menopause, and perimenopause are a single risk of diabetes. So if you are in perimenopause and menopause, you are at higher risk of diabetes if you are not. So, the research showed that it also increased in women who had their ovaries removed. Now, no one taught me this in residency or med school. And this was not part of my consent, informed consent process. And of course, you know, you've talked about insulin resistance and how that relates to PCOS dementia and Alzheimer's. And that is where this keto-green approach becomes powerful because we are creating insulin sensitivity, we are reducing cortisol and we are balancing our hormonal physiology.

Heather Sandison, ND

Aside from just, what you are describing is this testament to the foundations of health. The diet, the exercise, the sleep, taking really good care of ourselves, managing our stressors, that is really foundational. And there are so many people who can get all the help they need, just doing that without ever going to see a doctor, without ever spending any money on testing or hormone prescriptions or anything like that. And so I just really appreciate that empowerment, right? It is like going to read the book and understand how you can get the most out of this without the need to make it even more complicated and expensive. So I want everybody to be crystal clear about where they can find your books, where they can find out more about you, where they can get the support that you offer, and also the products that you mentioned, where they can find access to that.

Anna Cabeca, DO, FACOG

Yeah, thank you. And I would say, I love when you say, "Go get the book" and I would say, do it in community, like get a small group, your home group, your work group, your girlfriend, your book club, and do it together in community, because that makes a difference. And right now, April 12th, my book, "MenuPause," is released, and "MenuPause," is five different six-day plan. So they are fun to do together. Really good. And you can get that anywhere books are sold. And I'm excited about that. And my website, dranna.com, D-R-A-N-N-A.com. Lots of free resources and information, and information on my product, "Mighty Maca" and balance are all there too. And I was like, you know, like, ask me anything, you can tell or ask me anything, and I'm here to help. I have seen too many people struggle. I have lost both my parents to diabetes and heart disease on both sides of my family confirmed by genetics. Genetic testing. And I have done extensive genetic testing. I'm like, okay, I have got all these red flags, but I'm definitely healthier now than I was a decade ago. And we can turn the hands of time back, so can live our passionate, juicy, wonderful, intimate lives.

Heather Sandison, ND

How exciting! Dr. Anna, thank you so much for your dedication to this work, to your patients clearly to the cause of just making sure people are healthier out there. What other tips do you have for people, any last insights that our listeners can take away?

Anna Cabeca, DO, FACOG

Yeah, and one more thing too, and then connect with me on Instagram @thegirlfrienddoctor, 'cause I'm on there more often now than ever, because I have got a new grand baby and I can see my daughter's post on her. And also that is where I keep track of my kids. So I'm on Instagram @thegirlfrienddoctor and my tip would be, it is really like, you know, step into the keto-green lifestyle, step into intermittent fasting, step into working with our natural design, our physiology. And with that, there is the most powerful health intervention that we can make is a positive connection and love with other people. So it is this friendship, it is this nurturing, it is this connection that I always found to be my best medicine. It is why I do what I do.

Heather Sandison, ND

Oh, thank you again for your time. And I can not wait to get your new book, so exciting.

