



## Conscious Life presents

### The Power of an Alkaline Diet

**Guest: Dr Anna Cabeca**

*Disclaimer: The contents of this interview are for informational purposes only and are not intended to be a substitute for professional medical or psychological advice, diagnosis, or treatment. This interview does not provide medical or psychological advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical or psychological condition.*

#### **[00:00:10] Dr Anu Arasu**

Welcome. I'm Dr Anu, I'm the co-host of the Hormone Super Conference and today I'm here, joined by Dr Anna Cabeca, AKA The Girlfriend Doctor. As well as being The Girlfriend Doctor, she is a bestselling author. She is triple board certified in obstetrics and gynecology, integrative medicine and anti-aging medicine. So she's quite some girlfriend to have. Anna, thank you so much for being here.

#### **Dr Anna Cabeca**

Oh, it's great to be here with you. Thanks for having me.

#### **Dr Anu Arasu**

So, tell me, women must come to you all the time with a whole range of things. They can't lose weight, they've got no sex drive, they're exhausted, they're burning up. What are your main strategies to get them back on track?

#### **Dr Anna Cabeca**

It's always basic. First you have to detox. You have to do the hormone detox. So for me, it's always been less is more in medicine, really less is more. So we can be very tempted to pile on all these medications, supplements, hormones, et cetera. But when it comes to really feeling well and vibrating at the highest energy that we can, it is cleansing. It is cleansing. Detox. Detoxing our hormones, detoxing our liver, making sure we're having regular bowel movements every day and supporting the detoxification pathway. So always the first approach for all of those symptoms is what I call my Keto-Green Hormone Detox.

#### **Dr Anu Arasu**

Tell us a bit more about that.

**[00:01:49] Dr Anna Cabeca**

Yes, absolutely. So, first, it's dietary changes, what I call Keto-Green. So, with intermittent fasting, high quality protein, healthy fats. Fats are necessary for hormones. So with a Keto-Green detox, it is about focusing on high quality proteins, healthy fats and healthy carbohydrates, like fermented vegetables. Vegetables that are low carb but rich in minerals and that have supportive nutrients for detox and hormone production.

**Dr Anna Cabeca**

So cruciferous vegetables, for instance, garlic and onions for sulfation properties, cabbage and cauliflower and broccoli sprouts. I mean, those are really powerful foods that we can use in so many ways and as substitutes for some of our common foods, like cauliflower rice, or cauliflower mash instead of mashed potatoes or rice.

So really healthy substitutions and intermittent fasting and no more snacking. That is key. Two to three meals a day, especially in perimenopause and beyond, to keep that insulin sensitivity. So that is part of balancing our hormones, is how we're nourishing our body, not just with what food, but when we eat, the timing of when we eat when we drink in between our meals versus with our meals. All of these pieces come together in a good hormonal detox. And then I will supplement to support phase one and phase two detoxification.

Because we need a shower every day, we take our car in for oil changes. We need to support detoxification in our body. We are exposed to, on a daily basis, hundreds of chemicals that act as hormone disruptors. So adding additional support when symptomatic is really powerful.

**Dr Anu Arasu**

Right? So you've mentioned detoxification and you've mentioned an alkaline diet. Why is that so important when our hormones are transitioning?

**Dr Anna Cabeca**

Because alkalinity correlates with cortisol. So when I look at hormones, I look at all the hormones in our body and we have hundreds of hormones. And so I equate that with, for example, a university analogy. So say students at a university. Like every student has their own goal, their own mission, their own way of doing things, their own purpose in life, right? Our hormones are the same way. And now when you have a university, you have teachers, professors, the heads of the classroom. Well, if the head of the classroom comes in hungover or high and just turns down the light, plays a movie and sits in the back of the room, you know, those students in the classroom are going to be a little bit chaotic and disorderly as well.

The same is true with our body. And for us in our body, where our student body is like estrogen and progesterone and testosterone, DHEA, melatonin, vitamin D, all very important. But the governors of those hormones are insulin and cortisol. So the ketosis part increases insulin sensitivity and the alkalinity part is key to managing cortisol. So if we're in a high cortisol state, doesn't matter how good we're eating, we're going to be in an acidic physiologic environment at the tissue level.

**[00:05:16] Dr Anna Cabeca**

The blood, not going to change so much, but at the tissue level. And that means we're going to catabolize our muscle, our bone, to bring those minerals into our system. And when we are stressed, so that's cortisol. So that's where meditation, practice, gratitude practice, really comes into play. And that's why it's not just about what we eat. And then if we continue that analogy to the dean of the university or the president of the school system, it's the most powerful hormone in our body that would equate to oxytocin.

Oxytocin, the hormone of love connection. It's like... If oxytocin is a priority in our life, if love, joy is a practice in our life. And then we reach for that, that trumps all the other hormones and they all play better. But when we are feeling depressed, isolated, we've had trauma. Cortisol has been fighting hand and foot in our lives, really. Or we have adverse childhood experiences, post traumatic stress, daily everyday stress, that plummets oxytocin. And then we have physiologic chaos. So the practices to increase oxytocin are really part of the healing process in my Keto-Green way.

**Dr Anu Arasu**

Wow. So what I'm seeing now is that the alkaline foundation and the detoxification pathway that is critical for us to have a solid base of the pyramid where at least the insulin and cortisol are working. And then all the hormones up from there, whether that be the sex hormones right up to the oxytocin, then they can play. But tell me, if someone's feeling really lousy, is it okay for them to try intermittent fasting, is it okay for them to be in ketosis?

**Dr Anna Cabeca**

You want to work up to it. Just like someone says, "okay, I want to run a marathon." You're not going to go and run a marathon. You have to work up to it. And part of a healing process is getting into ketosis and working on that alkalinity. I always have my clients who are feeling lousy work on alkalinity in general in all my books. I write this out because I want everyone to go to focus on alkalinity first. Focus on alkalinity first. Add additional minerals. I use my supplement Mighty Maca Plus, which is lots of greens and superfoods and anti-inflammatories. So add in minerals, add in support to your body's nutritional level and detoxification alkalizers into your body. Add those in and then increase your intermittent fasting interval and work that up like we can all do 12 hours. So then work up to 13, 14, 15, 16. And pretty much everyone I've worked with has been able to do that pretty quickly.

**Dr Anu Arasu**

And I mean, what you're saying makes so much instinctive sense to me because obviously the dark green leafy vegetables are very powerful and we feel so good when we eat them. But what would you say to the old school that says, oh, we don't need to eat an alkaline diet because our body does it for us or we don't need to detoxify because our body does it for us?

**Dr Anna Cabeca**

I love this area of discussion because in 2014 when I brought my Keto-Green way into my clinical practice and then online in 2015, I had a lot of criticisms. Like... "What are you talking about?" I'm

like, check your urine pH. It is game changing. You've got to intermittent fast. That's going to make an acidic urine pH. Men have ten times as much testosterone. They're not going to get the catabolic side effect of that for a while. But women will. They'll get osteoporosis, they'll lose muscle. And it's a huge difference. You have to focus on. Just check your urine pH. It's so important to your overall body intelligence. And so, now you'll see that many of the keto and fasting folks are all like, oh, yes, use minerals, add in tri-salts, add in minerals. I'm like, exactly right. That is so important because otherwise your blood pH may not be changing. Blood arterial pH may not be changing, but at the tissue level it is. And check your urine pH because that is a biomarker that makes a huge difference.

### **[00:09:56]**

It is eye opening because I've had, for example, vegan, vegetarians that eat all these greens and are macrobiotic diet and all this good stuff, and they'd be, "Dr Anna, I can't get my urine... My urine pH is like a six. I can't get it above a 6 - 6.5 and I'm eating all these greens" and I'm like, well, what's your thought process? I'm going through this stressful relationship, having trouble at work. Like cortisol will trump that.

I mean, you are going to pull all your resources to make that survival hormone so we can only control our response and so really work on shifting mindset in that situation. And I always think of my urology professor back in med school, and he would say, "Anna, you're the only one who can upset yourself." And I would say, "Oh, no, doc, my ex, my boyfriend can really piss me off." And he'd say, you choose how to respond. You get to choose how to respond. And that is so true.

### **Dr Anu Arasu**

Beautiful. So our emotions actually create a hormonal or chemical cascade that we have to detoxify as well.

### **Dr Anna Cabeça**

Yes. Huge. Huge. And so that's something I teach, too, and I write this in my book, *The Hormone Fix*. It takes more than hormones to fix our hormones. And this thought process is so powerful, and it's not soft science. We have so much research from heart math, from the work of Joe Dispenza, from quantum physics, from neuroscience researchers looking at meditation, positive thinking. I mean, just the effect a smile has on our physiology.

All of these things play into healing and play into hormonal balance that we cannot take for granted. Sometimes it's just that piece that is enough to shift your physiology. So when I have a patient and they're like, "oh, I have this adrenal fatigue and I have to eat small meals." Someone called, it 'smeals' "all throughout the day, small meals, and haven't been able to lose weight. I'm steadily gaining weight. I'm eating only 1200 or 1400 calories a day." And all this stuff, and I'm like, yeah, it's not going to get you well. You cannot get well in the same environment you got sick in. We have to shift it up. And especially as our progesterone and our natural hormone levels start to decline, insulin and cortisol increase, so we have to do just that much more.

**[00:12:30]**

We have to stack on additional habits that make a difference. So focusing on alkalinity and hydration between meals, making sure we're getting those minerals, the alkalinizers to feed our gut, supporting our liver detoxification, reducing our exposure to chemicals and hormone disruptors, and controlling our mind, constantly renewing our thoughts and our mind in a positive direction.

**Dr Anu Arasu**

And you said something very interesting. You said that men have their anabolic hormones, their testosterone levels, much higher for much longer. So that made me think, okay, so it's not just a political thing or a bias that we hear so much about women's hormones and we hear less about men's hormones, but there is something physically very different going on. And can you talk a bit about this catabolic process that women go into?

**Dr Anna Cabeca**

Yeah. Well, in our mid to late 20s, both women and men, our DHEA levels start to decline. And typically for women, we want to see DHEA levels around 125 to 300. In men, we want to see it about 250 to 400. So those start to decline. In our 30s, our progesterone starts to decline. Now, as you know, progesterone is the mother hormone, like from cholesterol we have pregnant alone, and progesterone, powerful neuroendocrine hormones. With progesterone, we make GABA, the hormone of chill. Really? I always think of the rock group ABBA and the musical Mama Mia, and I'm like, oh, that good feeling. That's the neurotransmitter GABA. When progesterone starts to plummet, GABA can also plummet. So what happens? More anxiety symptoms and add in a decrease in estrogen, which affects our serotonin receptors. And so now there's less serotonin, so you have anxiety and depression as a result of this, and that's a huge shift we have to make.

**Dr Anu Arasu**

Wow. So there's a real physical link between our hormone levels and our neurotransmitter levels. And then if we are stressed or depressed, we can kind of get in a vicious circle. Because what you're saying is we then have to detoxify all of that.

**Dr Anna Cabeca**

Yes, absolutely.

**Dr Anu Arasu**

Yeah. I mean, you mentioned oxytocin, the love hormone, earlier, and I know that you also have a talent for *Sexual CPR*. Tell us about that. What is sexual CPR?

**Dr Anna Cabeca**

*Sexual CPR* is a program I created to help my patients with their sex drive, whether it's desire or function, from a sexual health perspective. And so I always say, like, in CPR, we learn

cardiopulmonary resuscitation. CPR, there are the ABCs, airway, breathing, and circulation. In *Sexual CPR*, there are also the ABCs.

### **[00:15:40]**

Really first, before I tell you ABCs of *Sexual CPR*, let me just tell you, when it comes to desire, and that is one of the most complex areas that I deal with as a physician, there are many factors that affect our desire. And first, the most, three most common are issues like, as far as libido, issues of desire, issues of disconnect. Is there a disconnect in the relationship, and if so, from what source?

Is it chronic, everyday stress that's creating that cortisol oxytocin rub and a disconnect? When cortisol is high, when we're stressed, oxytocin is low. We can love the heck out of partner, but not feel it, because we're not making oxytocin. And so there's that disconnect, and then there's discomfort. If we have discomfort or pain every time we do something, why would we want to? And so with vaginal dryness, with painful sex, with bladder infections after sex, these are very common issues as we get older, unless we do something about it, we have to address the reasons, what's affecting the libido? And then the issues of orgasm?

So, with A, B, and C for *Sexual CPR*, A is accept where you are right now. Just like, accept where you are. When you look back on yourself ten years from now, you're going to say, God, I just love that woman. I just love her. So let's be... Self love is the highest frequency. So accept where you are right now. Also, we have mirror neurons. So if I'm making love to my partner and I'm thinking, oh, God, I don't want him to see this roll and whatever from this angle or whatever it may be, those mirror neurons are like, well, she's turned off. Then they will sense that. And that's so true and so accept where you are right now and just love it. Believe me, our partners are looking at what they love, not what they don't.

And B is be present. I have done one or two, maybe one hundred shopping list or to do list in my head during sex. That is not a good thing. And being present, focusing on that or sensate focus is very beneficial to reviving your sensuality and your receptivity in the moment. Because even as we experience more secondary desire versus primary desire, that presence is so important to get the physiologic shifts that create that secondary desire.

And then the third, C is communication. So communicating what you like, communicating what feels good, our bodies are designed for pleasure. Exploring that, it will never get old. And that's why I feel very... Working with clients and realizing that there's no issue in our lives that we are more vulnerable about than our sexual intimacy and our sexual relationship. And I think that's making it comfortable, making it fun, making you feel like you're not broken, and giving you really good strategies and knowledge to feel empowered. That's my mission in *Sexual CPR*.

### **Dr Anu Arasu**

So what I've heard from that is that hormone transitions could be such a two pronged attack because the lack of hormones causes physical symptoms like dryness, but it also affects our neurotransmitters, so we can lose our confidence and desire from that end. But what you said was so beautiful, because you said that actually with presence, we can change our physiology. Could you explain a bit more about that?

### **[00:19:24] Dr Anna Cabeca**

Yes, absolutely. So we can give you a scenario, say, for example, you're starting getting intimate with your partner, and you are thinking, oh, my gosh, I've got carpool tomorrow. I've got three kids to pick up in the morning. I have to be in bed at this time. I still have to figure out what I'm packing the kids for lunch or what I'm doing for work tomorrow, presenting, et cetera. I mean, you are not there. You're not in your body. You're in that case, making stress hormones, making cortisol, that's going to shift physiologically. Cortisol goes up, oxytocin goes down, and you're not present. And so you've shifted versus focusing on communicating. I love when you touch me here. Will you kiss me here? This feels amazing.

Whatever the situation is, then you're increasing your dopamine. You're getting more turned on. So that's got to increase testosterone. Dopamine and testosterone run hand in hand together, as far as neurotransmitter and hormones. You're increasing your testosterone. Your oxytocin is going up as you're feeling and experiencing pleasure. So you've just shifted your physiology.

### **Dr Anu Arasu**

There's no point us being the good girl perfectionist saying, hey, well, I did my Keto-Greens perfectly today, and now I'm going to be thinking about all the things I need to do and be productive tonight, because actually it works against us and we really, really need to tune in.

Okay, at what point, Anna, would you say that someone should consider hormones or therapy? At what point? Maybe they need a bit of extra help.

### **Dr Anna Cabeca**

Sometimes I would say never too soon. Don't do it as the first step. Don't do it as the first step. First detox the system. First empower the body's own natural production of hormones and remove the disruptors that are keeping our bodies from producing the hormones or affecting the receptor sites. So you've got to do this detox. And I always like to say I do hormone replenishment, not replacement. And the reason is because I want to support your body's natural production of hormones to do what it does naturally.

And I started this back when I had early menopause at 39, reversed that and infertility, reversed that and went on to naturally conceive my youngest baby girl at age I was 41 at the time, so now she's 15 and I'm 57. And, yeah, got to stay healthy. So I went on to reverse that, and then at 48, I was cycling down into this negative spiral again, and I really focused on my nutrition. Again, hormones were dialed in. So this lifestyle process, the Keto-Green, creating insulin sensitivity, decreasing cortisol, resetting the circadian rhythm, using adaptogens like maca and turmeric and quercetin and resveratrol, cat's claw herb, greens, chlorellas, berylina, enzymes.

These ingredients, and they're all in my Mighty Maca, so it's not like ten different products, but using these ingredients, we see a natural increase in DHEA and a natural increase in progesterone. My patients would come in and say, "Dr Anna, my day 21 progesterone was 6 continuously. I started your product and have been doing your detox, and now my day progesterone is 16, and it was day 21 progesterone is now 16." That was eye opening to me because I hadn't given her any progesterone. So that's the power of it. And so these lifestyle shifts and using the nutrition, the proper nutrition, makes all the difference in the world.

**[00:23:29] Dr Anu Arasu**

And this is something. You have walked this path, and your own story is just amazing. What would you say to people who feel that they have tried that, and then they feel like, oh, maybe I've failed because I've tried the nutrition, but it hasn't worked enough. I'm still having hot flashes. What would you say to that woman?

**Dr Anna Cabeca**

You know, let's try this. Let's follow the hormone fix. I was like, come see me. Let's get to the bottom of this. I always like to say, let's get our Nancy Drew on. Nancy Drew hat. I read all Nancy Drew. Great mystery solver, detective. So we have to do some detective work and see what it is. There are many spokes to the wheel of health. So where is it that we need to fine tune? And sometimes we've been doing the same thing so long that we just need to shift. We just need to make some changes. And that's why I actually wrote my third book, *MenuPause*. Because it's five different menu plans that each pause something different.

Sometimes you're doing the same thing too much. And for me, it was, I was fasting too much, and that was causing a physiologic shift. I was building up uric acid levels, which if you are doing too much fasting, especially if you have a propensity for that, so many of our survival genes come into play here. Those of us with PCOS or heart disease, diabetes, you may form more uric acid, so you have to check that.

I was forming so much uric acid, I was getting gout symptoms, and I was gaining weight, even though I wasn't doing anything different. I was very low-carb, too restricted, and too much fasting. And so that was eye opening. And that's why I was like, okay, sometimes we just have to shift things up. And it could be that it could just be taking a pause, and six days can make a lot of good happen.

**Dr Anu Arasu**

So, giving ourselves time?

**Dr Anna Cabeca**

Yeah.

**Dr Anu Arasu**

What are the key take home messages that you would want every woman or all your girlfriends to know about hormones?

**Dr Anna Cabeca**

Well, definitely. It takes more than hormones to fix your hormones. Your body is powerful, and you're the CEO of your body. CEO, CMO, chief medical officer. Don't give that power away. And believe me, insurance companies, big pharma, don't necessarily have your best interest. So figure out what your next right step is, it's often the free next right step. It can be the mind shift and it



can be the perspective on yourself. Thinking ahead to what will your 80-year-old person, your 80-year-old self tell you about today? You in this moment and the changes you make now are going to completely transform that 80 year old self. So be kind to yourself. Love yourself more. Accept where you are, be present and communicate.

**[00:26:34] Dr Anu Arasu**

That's so beautiful. And where can people find out more about you and your work?

**Dr Anna Cabeca**

Thank you. So easy to find my website, [DrAnna.com](https://DrAnna.com). I have thousands of articles I've written on there, lots of great resources and on social media @TheGirlfriendDoctor.

**Dr Anu Arasu**

And any new projects you're working on at the moment?

**Dr Anna Cabeca**

I am working on another book and I'm excited. It'll be more on oxytocin so stay tuned for that one. Definitely get on my email list. I love that and I just love helping and coaching other people. And I've created a hormone replenishment certification program so that'll be launched in 2024. And yeah, I just want everyone to feel empowered.

**Dr Anu Arasu**

Anna, thank you so much. It's been really enlightening today. Thank you.

**Dr Anna Cabeca**

Thanks for having me.