

Functional Medicine Hormonal Support

Guest: Dr Anu Arasu

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[00:00:09] Meagan Gibson

Welcome to this interview. I'm Meagan Gibson, co-host of this conference. Today I'm speaking with our co-host, Dr Anu Arasu, who's the founder of London Bioidentical Hormones. She's been a spokesperson for cancer research, had a regular column in Natural Health magazine, and has previously commented on health news mainstream media outlets. Dr Anu Arasu, thank you so much for being with us today.

Dr Anu Arasu

Thank you so much for having me.

Meagan Gibson

So, Anu, I want to start by asking you how you got into this field of hormone support.

Dr Anu Arasu

Yeah, it's a funny one. I mean, I remember the first gynecology consultant that taught me, and he said, it's simples! All they do is cry and bleed. And I remember that statement. It was a joke. He was great. But it was also pathognomonic of a very reactive system, and that line stayed with me. And a couple of years later, actually, I heard about this Functional Medicine Training.

It was the first one to come to the UK. This was well over a decade ago. And I thought, "Okay, I'll just turn up, see what it's like." And that really shifted things for me. It was such a different paradigm, and it was basically permission to say, "Hang on, you don't need to come up with a diagnosis and management plan in three seconds. Let's just slow down and let's find out what's going on for this person and what's going on in normal physiology, and also what the science says, even if it hasn't yet got to randomized control, double-blind trial.

And for me, that was a huge mind shift at that time, because I think it allowed us to see, of course, hormones aren't all about people just crying or bleeding. We know that hormones really govern our

entire lives. So in our first half of our life, we're in an anabolic hormonal state. In the second half of our life, we're in a catabolic hormonal state. And that affects everything.

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I mean, that just means that even with the best will in the world, we hit middle age and our blood glucoses are going up, we're putting on visceral fat, we are now brewing the risk factors for cardiometabolic disease, for osteoporosis, for diabetes, dementia, certain cancers. So what does one do about that? And I think the course also helped me to really see the usefulness of it.

Just to take the first example, let's say we have a woman come in and she was on the pill, and then she stops the pill and her periods don't come back. And mainstream medicine might just say, "Well, we'll do a test, we'll check she's not in menopause, and if she's not, we'll just wait." And you just wait six months, and then at the end of those six months, if her periods still haven't come back, what do you do? You put her back on the pill. And that, we know, can't possibly be the only way, the best way.

But we didn't really have any other tools in our kit at that time. And what Functional Medicine was telling us was, "Well, actually, we can do tests. We can look at her estrogen and progesterone levels, even if she's not in menopause. Maybe she's low in progesterone or low in estrogen and progesterone. Maybe she's low in some nutrients that are stopping her from ovulating.

Actually, the goal is to get her to ovulate again. And we're never going to do that if we just put her back on the pill. That's never going to help this woman know whether or not her periods have normalized, whether or not she can fall pregnant naturally, whether or not she can ever come off the pill. And it's also not even the best thing for her bones to be on the pill for that specific reason.

So I think I suddenly saw, with that course, the incredible usefulness of another way of doing it. And, yeah, those were really the intellectual reasons why I got into it. And then, as life would happen, I ended up going on my own health journey.

Meagan Gibson

I want to go back to a couple of things that you said, for sure, because obviously you shared a lot there, and there's so many things. I'm like, "I have to go back to that." So for people who are listening, and this is their first... They know hormones are important, they're trying to learn more. You said anabolic and catabolic. So explain what those two things are real briefly.

Dr Anu Arasu

Well, I guess that the first half of our life is really about building us up, anabolic kind of building us up, and catabolic more breaking us down. And what that means in reality is that for the first half of our life, we don't really worry too much about how metabolically flexible we are. I mean, you see this with kids and teenagers. They can almost eat whatever they want. They don't put on weight, and they're just making muscle and they're burning that fuel.

After 40, very different picture. We're not very metabolically flexible. And we tend to fall into the habit of loss. So it's loss of muscle mass, loss of bone density. So that's really how I would think

about the anabolic and the catabolic state. And I think the idea is that actually, with all of us, as we age, health becomes more valuable. We just have to have that focus.

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And I do think that education is the answer. Learning, just knowing these things immediately changes one's awareness. So immediately you start to think about your muscle mass. And even if you hate the gym, you hate resistance exercise, you're kind of aware of, "Okay, how might it be if I can't open a jar in ten years time?" That's why I think this stuff is so important.

Meagan Gibson

Absolutely. And just listening to what you were saying, it's so funny because our lives can be, with the right support, so much longer, healthier, and more vital than they've ever been before in human history. And yet, at the same time, I think we still hold this view or this perspective sometimes that people who suffer with weight gain or suffer with pain or suffer with a lack of mobility after 40, it's just because they didn't try hard enough or they had bad genetics. Or we look at the natural aging process and this catabolic process as something we judge people for when it happens to everyone. No one goes through life unscathed by this. It's just the scale that might differ person to person, right?

Dr Anu Arasu

Totally. I mean, we are all in this together. Everyone's getting out alive, as they say. So we're all in it together. And I think the idea is to be curious. It's to learn all of this stuff and see what works for you. And, I mean, even with the best rule in the world, you might be doing 100 different things, and you might still have a health problem. And that's not in any way a failing or something you haven't done. It's finding that balance between what we can control and what we can't.

And I remember there's one analogy that I absolutely love which says, "Imagine that in life, you're on a chariot in the middle of a war zone, and you've got a bow and arrow, and you got to shoot your target. Thing is, you can't decide the speed of the chariot, you can't decide the direction, so you got no control over that. But you do have the control over your own mastery of your bow and arrow, of your aim, of your technique. And that's really what it's about, and I do think that there's such a rich amount that we can learn that will change our lives.

Meagan Gibson

Absolutely. And this is the part that no one really teaches you, which is why we built this whole conference, because no one tells you about this stuff. And we learned that we're supposed to go to our primary care physician and kind of get some blood work done every year and kind of check in on things. But that's really like, is the car moving forward down the road as expected?

It's not like... To go with the car analogy, have we checked the transmission fluid? Are we regularly changing the oil? How much life is left on the tires? There's a little bit deeper diving and inspection and investigation and curiosity, as you said, that can really help us enjoy the ride a lot more, if you will.

[00:08:55] Dr Anu Arasu

Absolutely. And it's also about the paradigm of the practitioner who is in front of us, their paradigm of thinking, because we may have a screening blood test, but if the person looking at the results is just screening for disease, they're going to come away and they say, "Well, you don't yet have diabetes." You might be well on your way or you might have some other things. And that's really what this is about as well, shifting that paradigm so that we really start to invest in ourselves.

Meagan Gibson

I'm glad that you mentioned that, because in no way, shape or form are we demonizing physicians in any way, as you are one. But I have personally had that experience where both my primary care physician and my gynecologist obstetrician were both like, "There's no point in checking, we don't need to check your hormones."

All of the symptoms that I went in to describe were very much perimenopause textbook. They were like, "No, you have anxiety and depression." And I was like, "I don't think I do." But either way, hormone shifts definitely impact our mental health. And so by supporting somebody's mental health, kind of the easy pharmaceutical route, not that that's an easy route, but you know what I'm saying. It's very easy to write someone a script for that. That might improve their mental health, but won't address the underlying issue that was contributing to a mental health less than optimal function.

Dr Anu Arasu

Yeah, totally.

Meagan Gibson

All right, so tell me a little bit about your health journey toward this work.

Dr Anu Arasu

Yeah. Well, as things often have a funny way of working out, I had my own hormone journey. After I gave birth to my first son, my only son, I fell into extreme postnatal mental health issues. And I had extreme postnatal anxiety. It is really quite a blur. But that first year ended in divorce, which then compounded burnout on top of that. And that journey actually made me go very total into my health.

I worked with everybody and I did the functional medicine tests, I did everything, really. And I also did a lot of inner work, and that changed my life. But that was certainly a wake-up call. It was certainly a moment. And what I would say that I learned from that is, number one, when you're in it, you don't necessarily know you're in it, you don't know how bad it is, you don't know how long it will last, you don't know what the consequences will be. You don't necessarily know that it will ever end. And that's quite something.

And I think that people, other people act as a mirror to us. And they could be so useful because it's other people that may be the ones to say, "Hey, you're not yourself, you need help." That might be where their help can end. I mean, they may not necessarily have the answers for us. Even if

something worked for them, it may not work for us. They may not be able to help us more than that. But that is an incredibly powerful thing.

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I personally also found going into it and testing like a mirror, because it just shows you what's going on. And I think we all have perceptions about ourselves, about our habits that, quite frankly, aren't always right. And I think it's very helpful to get that feedback and just see what's actually going on. And I think the second thing that that journey taught me was the incredible power of just taking responsibility for your own health, but taking responsibility more than that, for everything you are not conscious of, for everything you're not aware of. And I think that's quite a surprising statement.

How can we be responsible for what we're not conscious of? But the reality is that most of us, if we screw up our lives, if we make mistakes, we do it from a place of unconsciousness. And so actually sort of stepping into that to say, "I'm going to take responsibility for my healing, for all of the things that I'm not yet aware of." I found that, as soon as I stepped into that, that changed the course of my life.

And in that way, it also didn't matter. It didn't matter so much. Is this just my hormones after giving birth? Is it my nutritional status? I had obstetric cholestasis during pregnancy. Has that done something to my nutrients that has then affected my neurotransmitters. Is it my lack of self-awareness? I hadn't taken enough time, perhaps, before the birth, to think about this huge identity change that was going to happen to me. And it didn't really matter which one of those it was. There was an awareness that I just needed to look at all of it.

And I think that's a huge difference as well. Of course, if we're just thinking about disease and diagnosis, that healing aspect doesn't come in. But the reality is that when we get ill, and the consequences, the devastating consequences that can have on our actual lives, all of these other factors are relevant. And ultimately, you just need to get from where you are to where you need to be. And how you do that may require many different prongs. So it's sort of opening, I would call it opening to this whole paradigm of healing. But the rewards of that are huge.

Meagan Gibson

Absolutely. And I'd love if you could share just for a second of, if you can remember back to then, what specifically feels so much different for you now as a result of all of this work, because it doesn't happen overnight. It's not like you go in and you have a bunch of tests done and you get your answers, and then you're sailing freely out onto the horizon. It takes a little bit of time, doesn't it?

Dr Anu Arasu

Totally. I think the biggest thing was just a huge leap in consciousness about my habits, my choices, what was going on with me emotionally, which part of me decisions were coming from. So that was huge. I think many of us have splits inside, and there might be one part that wants to do this and one part that wants to do that. And it's not always easy to know which part of you something is coming from. But that happens, actually, that becomes very clear, or that became very clear, much clearer for me after I started this journey.

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And what I found is that many things just fell away. So I think the small habit change is what takes a long time, surprisingly long. You can hear about something one, two, three times. And then to really consistently be doing it can take absolutely ages. But I think if it does take absolutely ages, typically when it's in place, you don't go back. That is your new normal. So I think for me, it affected everything. It was really questioning your social life. It's questioning how you gain energy and where you lose energy.

Energy is about so much more than food and sleep. The amount of places where we can get energy from or lose energy is really quite wide. And when you start to be aware of those things, it has a huge, huge impact. And I think I just got closer to living the life that you actually want to be living. That was the last thing I wanted to say.

Meagan Gibson

Yeah. And that was actually exactly where I was hoping you would end up. And that would be your answer, which is a life that you're living that feels in conjunction with your vision that you have for your life and not just what you do and who you identify as. And you mentioned all these splits in ourselves. And I think part of why we talk about this stuff so much and part of why we want to give people access to all of this information is because most people don't know that we do all live with various selves inside of ourselves.

That friction and the lack of awareness around that and the lack of normalization of that causes stress. It causes stress within us because we're judging all of those conflicting parts of us that want different things. And our belief system about who we're supposed to be and who we feel like we should be and who we actually are in the world are conflicted.

I only bring that up because stress has such a huge role in the way that our hormones function and the health of our overall system. And I can't overlook the fact that this educational component and helping people become more aware lowers your stress. When we kind of normalize these experiences and we give people the agency to go, "Oh, gosh, that is normal. I'm going through that, too. And this is something everybody is dealing with."

Dr Anu Arasu

Yeah. I mean, "normal" is such a tricky one. And I know in this conference we talk about the difference between common and normal because... One of the issues with normal is that we can stop there. It can actually be a deterrent to go deeper into the healing. For me, it could have been a case of saying, "Look, it's normal. You've gone from high-functioning professional to being up half the night as a breastfeeding mammal. I mean, it's totally normal to feel completely mad."

It might be very common, and to some degree it might be normal. But the point is, is it affecting you in a way that is actually very detrimental to your life and that needs fixing? And I think that's the question, and that's what people need to be asking themselves.

[00:19:33] Meagan Gibson

Yeah. I guess as a follow-up question I would ask then, how can you best discern the difference between a normal progression of life and something that can be better supported? It's like normalized but not accepted.

Dr Anu Arasu

Yeah, one of the things is that we don't need to make so many distinctions. Ultimately, if we see our life as a work of art and that we are trying to finesse this and to be more fully whole in ourselves... Now, if you think it's either pathology or not... I mean, the previous paradigm has very much divided things into pathology or not pathology. So either it's disease or it's normal. And the problem with that is that this actually encourages fragmentation to some degree. Of course that's helpful for acute situations, for emergencies. Very helpful.

If you've got something like I had, and we're saying, "Well, either you've got mental health issues or you've got nothing," it's actually not necessarily going to be the route that gets you to where you need to be. Whereas if you say, "Actually, I'm not able to live the life that I feel I'm supposed to be living, want to be living, and I want to go on a journey to find out how to get there." Whether that journey is looking at nutrition, whether that journey is doing inner work to understand, this is a huge life change. How's that affected me?

Dr Anu Arasu

Whether that journey is looking at hormones, whether that journey is taking psychiatric medications, if you're looking at all of those pieces, one stops just trying to divide and say, "It's either this or that." One moves away from the binary. I think if you go to a practitioner and you're handing the responsibility to them, to some degree they are always going to try to say, "Well, hang on, this part's in my roommate and this is your own life."

And that's where I think working with someone a bit more holistic who's just basically saying, "Look, this is where you are, this is where you need to get. These are some of the things that are important. Let's have a look at how we can do this. I can help you with so many. These are the others. Maybe I can help you with all of them, or work with other people," but that's really the shift. And I think that's actually what nowadays we want.

Meagan Gibson

Yeah, and you speak to such a subjective experience, right? Because I think sometimes we can look at this level of support, whether it be functional medicine or hormone testing or something like that, and we can see it as just being something for people with incredibly complex or chronic conditions, when what I hear you saying is that in the artwork and tapestry that is our lives, if we want to make a shift purely because of our own life satisfaction, purely so that our experience of our lives can be possibly better and more high-functioning, that's also a valid reason to approach this kind of support, right?

[00:22:44] Dr Anu Arasu

Totally, yeah. I think we see... For sure, we see everything. I've had one patient that comes to mind now, a guy that came in with very low testosterone. Underneath it, he had undiagnosed celiac disease and osteoporosis. And actually that probably got picked up earlier because he was being proactive and checking his testosterone. We've got the chronic complex conditions, the chronic fatigue, the PoTS, the fibromyalgia.

Or then there are people who are not having so many problems, but are actually saying, "Look, I want to live a long, independent life." And for all of us, I think that there is so much to be gained from just digging deeper. And I think we have to be aware nowadays that also, the more we know, the more we are going to attract or vibrate the right practitioner. Because even if you take something like Hormone Replacement Therapy, there are layers, there are different details.

It might be that one person, they have straightforward menopause, they go to their GP, "Can I have some HRT?" They get some HRT, they're fine. They're happy on it, it works. It might be somebody else that goes to their GP and they say, "Well, actually..." They try one HRT, it doesn't work. Then they hear that there's some evidence that bioidentical progesterone is better than synthetic progesterone, it's safer. And they say, "Well, I want someone that talks to me about that."

So they go and see someone else, and this someone else gives them bioidentical estrogen and bioidentical progesterone, and that works for that person. And then you have a third person who might be on the bioidentical estrogen and progesterone, and then they're still having side effects. And they say, "Well, I need something else." And then they go and find a practitioner that individualizes the doses and also looks at other things like nutrition and the emotional side, detoxification.

So for all of those different levels, you're going to basically have different people operating at different levels depending on what you need. So I think what's very helpful is that the more we know, the more likely we are to attract and vibrate what we actually need to receive, if that makes sense.

Meagan Gibson

It does. But I was also just going to ask you, let's assume we have our vibrations in check. We've come to the conference, we've read and heard a lot from the contributors and things like that. What's our next first step towards seeking support? What do you recommend for people?

Dr Anu Arasu

Seeking support?

Meagan Gibson

Finding a practitioner. What should we know about ourselves? What should we know about our intentions and our goals before we even start seeking support? And then how do we go about finding somebody that's going to be aligned in those goals?

[00:25:53] Dr Anu Arasu

Yeah, great question. One thing is, do we have the time and space to invest in it right now, to go total, to go into it? How much do we want to go into something? I think that's a really good question, because the more we put in, the more we're going to get out. And if it's not the right time in life, it's not the right time.

But if you want to really take the moment to say, "Actually, I want to take stock of my health. I really want to learn. I really want to know. I've watched these conferences. I know the theory, but I want to know how it applies to me. I want to understand how all of that theory, if I try it, how it works on my body, how it works on my system, how I'm doing so far."

To go into that, I think that one needs to be in the right frame. Probably that's the biggest one. I think the second thing I would say is that often we can need what we least expect. So sometimes we feel resistance towards the thing that we most need. There might be people that have gone really deep into the nutrition side, but actually have quite a lot of unconscious drivers to their behaviors. So they get to a certain limit and then they're not getting beyond that.

Conversely, there could be people who have done some emotional work but have not ever looked at their nutritional blood test or done a functional medicine test or tested their hormones, and they are also feeling blocked. So I think that would be the main points, having time and space and basically staying curious to the things that may not appeal first time around.

Meagan Gibson

Yeah, I love that framing because I can really relate to that. And I think a lot of other people can too. Often, just because of the stressors and demands on our everyday life, we consider everything all at once and we're like, "No, that's too much. Right now I can deal with my nutrition. Tomorrow or future me's problem is to deal with my physical health and exercise. And we take it kind of piecemeal as we can. And so I think it's a good context to set to be like, "All right, if you're going to do this, let's clear some space and go all in."

Dr Anu Arasu

I find that all of these things are linked, actually. So doing it all at once or just really diving in, it's just an investment I think everyone should do at some point. Ultimately, we are all living longer. And there is that question, "When in life do you take stock?" It's a bit like having to do your tax returns or you have to learn about your car. There's a certain level of mastery, I think, that we have to get to in some subjects.

And I think with health, there's a certain level of mastery that we absolutely all should make the time and space for, because it's going to have such an impact. And so I think that just making that decision and saying, "Yeah, I'm going to learn a bit," I think it can open up a lot.

Meagan Gibson

Absolutely. And in that adventure and investigation into our lives and our health, how can people find out more about you and your work?

[00:29:35] Dr Anu Arasu

The main place would probably be my website. So that's <u>www.londonbioidenticalhormones.com</u> or on Instagram. So that's <u>Dr Anu Arasu</u>.

Meagan Gibson

Fantastic. Dr Anu, thank you so much for being with us today.

Dr Anu Arasu

Thanks a lot.