



Conscious Life presents

Harmonize Nutrition, Exercise & Metabolic Balance

Guest: Jenn Pike

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[00:00:09] Dr Anu Arasu

Welcome everybody! I'm Dr Anu, co-host of the Hormone Super Conference. And today I'm joined by Jenn Pike. Jenn is a medical exercise specialist. She's also a functional nutritionist as well as being a best selling author, the host of the Simplicity Sessions podcast, and she sits on the advisory board for Strong Fitness magazine. Welcome, Jenn.

Jenn Pike

Thank you. So excited to be here.

Dr Anu Arasu

So Jenn, tell us, what is your personal journey? How did you come into this world of hormones?

Jenn Pike

Well, I've been in the world of movement and exercise for a very long time. I actually started teaching my first classes when I was nine years old at a facility where I was with my family. I was part of this kids cardio program and they were like, "You really get this and you're a great leader and you help the other kids. Would you like to teach the junior class?".

So I was teaching the two, three and four year olds when I was nine years old. And by the time I was seventeen, I was teaching the adult classes and knew at that point, like, I was going into something to do with movement and health and physiology.

And so I started off my career as a strength and conditioning coach and medical exercise specialist. I worked primarily with athletes, a lot of professional hockey teams, and it was super fun. But I was also part-time training women at a gym where I grew up.

And I really started to recognize that while the athletes - it was incredible to train them at the level that we were - they had a whole team supporting that. So they had the nutritionist, they had the

chiropractor, they had all the other elements that it took for them to not only perform to a certain level, but to recover and to support their life.

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When I was training these women in the gym, these women - a lot of them were mums - just had like an hour of time that they were trying to squeeze in for themselves and they were showing up tired, not well nourished and well fed, then trying to create the most impact for their health and body inside of these training sessions, leaving not being very well recovered because when they got home, life would take over. Sleep wasn't fantastic.

And so I started to become more and more excited about empowering and educating these women about how they could create these small shifts in their life that could have massive impact on how they felt. I didn't have my children at that point yet, I was in my early twenties. But I just knew like, I was like, "Oh, this is where I'm going to start to move towards".

So I actually resigned from working with professional athletes. I went all in on working with everyday athletes, which to me were the women and the moms that were coming into my space. And that work really lit me up. I learned very quickly, probably within my first 12 to 18 months, of diving deep into that, that exercise is fantastic, but it's not going to be the only metric that we need to focus on.

In 2001, I went back to school and dove very deep into holistic and functional medicine-based nutrition, which back then, everyone thought it was crazy. They were like, "Why don't you just go to be a dietitian? Why are you doing this holistic, quacky, granola, crunchy type thing?". And I was like, "I'm just being called here".

And so did that now had the combination of understanding from the nourishment side of it and performance side. But now hormones started to come to the forefront, where I was getting great results with women based on how they ate and how they moved.

But they were coming to me with certain symptoms where I was like, "I don't feel like the exercise and the food are going to be enough for us to actually create the stimulus that we're looking for or heal this area of the body".

So I went back to school again and studied more about integrative endocrinology and understanding, really, what was going on with our hormones and our nervous system and our gut, because those three are deeply connected.

And so then I started to layer in more of the hormone approach. And so for the last 18 years, that has really been where I've spent the majority of my career. And 18 years ago is when I became a mother for the first time. And when I had my first child, I was hearing the women I was working with tell me how they were feeling and what was going on, but hearing it and living it are two very different things.

And so when I had my first child, I was just like, "Whoa, okay. The book did not tell me that I wasn't prepared for this". And I really had to change the way I was running my life. I was always doing it from a very masculine hustle, grind, build it, crush it energy. I love business. I love doing what I was doing. And I was majorly burning the candle at both ends.

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Then I gave birth to my daughter, and I was like, "Oh, I don't have the capacity for this anymore". And not only that, but I actually realized really quickly, "I also don't want to do this anymore". That was the birthplace for me of simplicity, where I just kept hearing myself go from this energy of all or nothing to simplicity and ease, simplicity and ease.

and it became like this mantra in my body every day. And literally, it was a question I would ask myself, like, "How can I create more simplicity, while still being the mother I want to be and the wife and the business and all of that, but I don't want to sacrifice myself in the process".

I had another child. I realized at that point, two was definitely harder than one. And I was really running around after my paycheck at that point. Like, I was teaching in multiple places, I was doing work I love, but it was not sustainable. And so I thought that the best thing to do at that point would be to open my own business, have a brick and mortar. And it was just like, "Okay, universe. I now have one address and one location. Bring the abundance here. This is where you can find me".

It was the hardest and most beautiful thing that I had ever done and went through lots of ups and downs, which I talk about on my own podcast, and ended up building it into a very successful multiple six figure company that I then sold five years later. Sold it, transitioned everything online to embrace more simplicity and ease, and that was back in 2016.

And now here we are, seven, almost eight years later, coming from this place of now the work I do in the world is really helping women to understand about their body. What I really believe we should have started to be taught when we were young, like ages of nine, ten, eleven and twelve.

Not in a frightening way, but in a, "Hey, these are some of the changes you're going to start to feel physically, mentally and emotionally. This is why it's happening. This is what's going on. These are some of the ways you can start to support your body".

And then into our years as a team and our spend majority of my days now educating on perimenopause, whether it's through exercise physiology, nutrition, functional testing, majority of these women who are starting perimenopause have no idea what that means, other than "I feel like crap, I'm gaining weight, I don't sleep, I have no patience, my hair is falling out".

All these things changing, and constantly trying to go to something that very quickly will change that without understanding the process of what it is that's going on and that there's a lot of changes happening. Ovarian aging is just one of those changes happening.

And so majority of the work I do now is educating women, empowering them, and then connecting them to themselves. And I think what we tend to do a lot, especially in our industry and because of social media, is we influence others to connect to products, stuff and things. But I think we've been missing the mark on connecting women back to themselves.

Because I have found in my line of work that the majority of the answers that we seek don't live out there, they live in here. But we've not been taught to trust that. And every time we say, "I don't know", we actually do know. But it doesn't feel safe enough to honor that because it's not what

we've been taught, it's not what we've been modeled. And so that's a little bit about what I have done and what I do now.

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Dr Anu Arasu

I love it. I think it's such a common story that you're talking about whereby women start off just conquering all and being in that very high energy and, as you say, not necessarily seeing a problem with just fitting in one hour of intense exercise in the evening and then going back and running their household and all the rest of it.

But tell me, the problem is, this can be quite self-perpetuating. How, if somebody is in this spiral, how do they start to embrace simplicity in their life? What would you say?

Jenn Pike

I think it first comes back to recognizing, like, does this feel good? Are you enjoying the pace of your life? Do you wake up and feel amazing? Are you super excited about everything on your calendar and everything that you've created for yourself to have to do? Or are you starting to feel resentful, angry? Are you praying for a cancellation? Are you trying to figure out how you can get out of a certain agreement, meeting, situation, whatever it is?

Those are all big cues to you that something actually does need to shift. The second thing to pay attention to is your own body. So when we start to manifest symptoms, produce symptoms, whether it is physical symptoms, like, you have a lot of digestive things going on. You have joint pain, inflammation, brain fog, your mood doesn't feel as stable. Little things that used to just kind of fly past you now irritate you to a level of like having a toddler tantrum.

These are the kinds of things that you have got to start to pay attention to, because these are what we refer to as, like, the little nudges, the whisper. Your body is trying to get your attention in a suboptimal state, which means you actually have an opportunity now to acknowledge it, get in front of it before this becomes an illness, a diagnosis, a situation that is now going from being acute to more chronic.

So I think the first step is you have to be honest with yourself. When I look back, for me, ever since I was a young child, I was always told "You're a great leader, you're an excellent communicator. You're going to do this, you're going to do that. Like, you got this. We don't even have to worry about you. Off you go".

And I was always rewarded with accolades and recognition. And how we're hardwired is then, if we are recognized to be the leader, the boss, the achiever, all of those things, this is now how you associate being loved and being recognized. And so you don't even realize that you start to just take on this identity in everything you do, including when you, or if you decide to become a mother.

And we can do a lot of these things for a period of time, for a season, and then we need to pull back and actually recover and rest.

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And when we talk about female physiology and we talk about the phases of our cycle, and we talk about, even if you no longer have a cycle or if you're on a level of hormone replacement therapy like the birth control pill where you are no longer ovulating and you therefore do not have phases of your cycle, you still have a knowing in your body of when you feel good versus you don't feel good; of when you feel attuned and connected versus when you feel overwhelmed, anxious, scattered all over the place.

So when we're initially coming from this place of where...I didn't just wake up one morning and go, "Oh, I need more simplicity", and then the next day I was living it. It has been a continual journey for 18 years. The seed arrived, was planted 18 years ago where my body was like, "enough. This doesn't even feel good anymore. And what's worth it?"

When I sold my company, that studio, and I transitioned online, I was so excited because it was new and it was fun and it was just this vibrant energy and the work we were doing was just so incredible in the world. And we built to become a multiple million dollar company.

And when I hit that and on the journey to that, I was like, "Oh, when I arrive here, I will feel like this, and then life will be like this". That's just a simple formula, the equation. And the reality is, when we hit the million, I was like, "Huh, this doesn't actually feel how I thought it was going to feel. I'm not having more joy. It's not any more simplicity-filled, and what does this actually matter if I'm still feeling like an octopus in life, being pulled by my eight limbs instead of just a human showing up as I am?".

So I don't know if that answers it specifically for you. But I just know I spend a lot of time in conversation with women, is that the first response we will have when someone says, "You need to create more simplicity" is "How? You don't understand my life. That's impossible".

And it's understanding what's impossible is waking up tomorrow doing that. What's very possible is little by little, making different decisions that start to line things up in a way that feel more simplistic at the end of next year than they do today.

Dr Anu Arasu

Yes. And often what I see is that in order to have that permission to slow down, people wouldn't push themselves so hard that they're actually quite unwell by the time they give themselves permission. And if we were to try to do that early and give ourselves permission earlier, I guess it's about understanding our physiology more.

Can you speak to that a bit? About..you mentioned the cycles, the different phases we have. What about the times we don't feel good?

Jenn Pike

Well, okay, so I'll start off by explaining what those four different phases are in our bodies, and then when our body is begging for rest, because that's actually what happens if we don't make the

time. It's like the body's like, "Warning, warning, warning. Now, I'm not giving you an option. Down you go. Now you have burnout. Now you're out for the count".

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And the reality is, because I've hit burnout a couple of times over the course of my career, trying to do all the things. The reality is, when that happens, it does not take a rocket scientist to understand why it happened. All you have to do is look at your last x amount and be like, "Yep, that makes sense. That tracks. There's the evidence right there as to how I ended up over here".

Now, when we talk about our body as a whole, so...I had said in there that if you are a woman that is having a regular menstrual cycle, you're having a regular bleed, you're ovulating, you're going to go through four different phases every single cyclical period of time. But if you are on something like the birth control pill, where that pituitary function of sending the signal for ovulation is no longer happening, you are going to be more so on what I'm going to talk about for a woman who no longer has a true actual bleed.

So coming back to these four phases, that period of time when a woman finishes her period, so that bleed period of time. When we finish the period now, we actually move into what is the first phase, which is the follicular phase. And so a lot of women are very confused and think that their cycle and their period are the same thing, which they're not.

Your cycle is the period of time from the first day of your bleed all the way through until you get your very next bleed. That's your cycle. So when we talk about that, it could be like a 25 day cycle, a 29 day cycle, a 32 day cycle. That's your cycle.

Your period is when you bleed, when the endometrial lining is actually shedding and you are having your period. Okay? So let's talk about it going forward. So most women are feeling the best when the period has ended. And this is starting that phase one, which is that follicular phase. This is when estrogen is really starting to come back on the scene.

It is more robust. Estradiol is coming in higher levels from the ovaries. We are starting to feel more energy, more connected physically, mentally, and emotionally to our body. Oftentimes they'll say, "It's like we feel like our head has now reconnected back to our body". Like, we're like, "okay, I am back in the building".

Testosterone is starting to come up then, as well, too. And at this point, this is when those signals from our pituitary are starting that communication to the follicles on our ovaries. Like, "It is time to ripen. We need stimulation to happen", because the next phase, phase two, is ovulation, where we need to actually release an egg.

And this is the birthplace of a healthy cycle, is healthy ovulation. We cannot produce a healthy, robust amount of progesterone if we are not ovulating regularly every single month. And that's not just as simple as how some people describe it. Like, we just pop and an egg is released and moves through.

Our body requires certain nutrients and a healthy, safe environment for this to happen. Granulosa cells and theca cells. And the body utilizes the leftover material from that process of ovulation to

create the progesterone for us, which supports our parasympathetic nervous system. It is our calming. It's a very like, 'rest and digest' type hormone in the body.

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And so that's phase two. After ovulation, we move into the longest of the four phases, which is the luteal phase. And this is post-ovulation and pre-menstruation. And that period of time is typically for most women, where if they have any type of inflammation that's going to show up in relation to their period, it will be in this window between ovulation and when they start to bleed again, which we refer to as PMS, premenstrual syndrome. Some women actually suffer from PMDD, premenstrual dysmorphic, which is so much greater than actual PMS.

And for some women, it will just be some breast tenderness, a little bit of cramping, mood swings, water retention, and then the bleed starts. And then you have your period, which is your phase four. The period is the culmination. It is the end product of all three of those phases, follicular, ovulatory, and luteal, that lead into your actual menstrual phase.

So those are the four phases. Now, if you don't have these four phases, so, again, with the birth control pill, and I'm sure at some point you've talked about this in the conference (or will) is that when we bleed on the pill, it's actually a chemical withdraw.

So, for people to understand that, how you would know this, it's like if you were ever on the pill and you didn't want to get your period, you just kept taking the pill and you didn't get your period. When you stop taking the pill, that's when the bleed happens.

And there can be a lot of reasons that women don't have an actual regular cycle or bleed to be able to use the four phase approach. You could be postpartum and not have your period back. You could be breastfeeding, and prolactin is still really high, and you are no longer bleeding right now. You could be menopausal or post-menopause.

In this case, we as women, are very rhythmic beings. So, we love to follow a pulse and a rhythm. It's how we are hardwired. So you can follow the lunar rhythm, which is very interconnected into our bodies. Every phase of our cycle, follicular, ovulatory, luteal, and menstrual, also coincides with the moon. So we have just had the new moon yesterday.

That new moon is like your bleed week. That is like your menstrual phase, the waxing moon, when you start to see it grow and get big, and we see that beautiful front end of the crescent that is similar to your follicular; stimulation, getting the follicles ready on the ovaries. Full moon, full bloom. Like, "Everybody look at me".

As a woman, this is typically when most of us can actually feel really good and really in tune. That's ovulation, the waning, where everything is shrinking down, this is luteal. It is preparing you to go inside. It's like bear medicine, "Go inside, hibernate, and do the work".

And so, for us, as women, if you go back in the day, a lot of our life was actually kind of hardwired to support this. But since the industrial era, and most definitely in our generation, your period and your health have nothing to do with your schedule, have no bearing in how you show up in the world.

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Most people right now have traded a nine to five energy for, like, an eight to eight energy, right? Entrepreneurship, 100%. People go into business working for themselves, thinking they're signing up for freedom. You're actually signing up for more work.

And so all of these different things can really pull on the tethers and the health of our body. Now, when we talk about nourishing our bodies, like what to eat in each phase, how to move and exercise in each phase, all of those different things, this is where we can actually step into a lot of innate power and wisdom in our bodies.

Dr Anu Arasu

Because this is what actually gives us permission to make changes, in a way. If we're armed with the knowledge, if we understand that there are times when we feel better and times when we feel worse. If we understand that life is actually not going to be the same after giving birth to a child, which I sort of say flippantly, but often we're not told right. You see everyone just getting on with it, living, and it's normalized.

And often we're not really aware of how much things change. So if we have this knowledge, if we're armed with this knowledge, we can then give ourselves permission before we burn out to make changes. What would you advise nutrition wise, exercise wise, for women in different phases?

Jenn Pike

So, in that follicular phase, when we have more estrogen and then testosterone that is coming on the scene, we are much more insulin sensitive. So our body does really well with having more root vegetables and different sources of carbohydrates. And for women, most definitely, the macronutrient that they struggle with the most is protein.

So I'm always trying to get the women I work with to consume anywhere from about 25 to 40 grams of protein per meal over the course of the day to try to aim for no lower than about that 100 grams threshold. And that can make a tremendous difference in their energy, their cognition, their cravings, their body composition, their blood glucose, and insulin overall. But it is making sure in that follicular phase, that you are actually eating enough.

And here's the thing I want to say on that, is we are living in a time right now, and probably for the last three to four years, where fasting has gained a lot of popularity for generations as a whole. And fasting is something that has been used forever. It has a lot of positivity, a lot of therapeutic benefits. However, I see a lot of women abuse fasting time and time again because fasting - and they're not abusing it because they're like, "I want to increase better autophagy and cell cleanup in my body".

They're over-fasting because they want to be smaller and to weigh less. And they're trying to use it as a metric, to control their composition. You have to be very careful, the timing in which you do that. That first phase, that follicular phase, if you're someone that enjoys a longer fast, like 16

hours fast regularly, that would be a better time to do that for your body because you're more insulin sensitive.

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It is not going to be as advantageous to do that post-ovulation and especially in that luteal phase, critically, the five to seven days before you are starting to bleed because your hormones are already on the decline. And a lot of people don't fast properly. So they're doing nutrient depleting fasting, not enough calories in those windows, and eating times. You're setting yourself up for probably more inflammation leading into your cycle, a worse period, hair loss, other issues, and so on and so forth.

So that follicular phase, eat well, nourish your body. And in terms of training, the follicular phase is when - because estrogen is coming back at a higher level - you have estrogen receptor sites in the cells of your muscles and in your tendons and in your ligaments.

So the follicular phase is the time where you want to be lifting heavier. So you probably want to increase your load, but decrease your rep range. So it could be something like, if you're doing like bent over barbell rows for your back and posterior chain, instead of doing like three sets of 15, you're doing four or five sets, but like six to eight repetitions. And you're going strong at that because you have the tensile and ligamental hormone structure to support that.

Coming into ovulation, this is a short window. We only ovulate over about a 24 hours, but most people will teach it that, it's like a two to four day phase because you have the lead up to an ovulation happens, you have ovulation, and then you have this window of post-ovulatory energy that is happening in hormones behind the scenes.

It's not like a sharp rise and a sharp fall, we see it in our temperature where it can appear that way. This is a great time for hiit, high intensity interval training. If you like some plyometrics you like burst training, your boot camp class, your F45, whatever it is, that's great period of time to do that.

Coming into the luteal phase where now we have lower estrogen and progesterone is going to eventually start to decline, you're more prone to injury. You also typically just don't have the same stamina, endurance and capacity to perform.

Because again, you have to remember your body is getting ready to shed an organ. That is what happens when you have your bleed. You are shedding the lining of the endometrium. The cramps you feel, the lower back achiness, there is contraction happening inside of your body in order to help to shed that lining. The achiness you might feel, the water retention, the mood swings, our prostaglandin levels go up. We are pro-inflammatory going into our period, so you need to be careful.

I wouldn't suggest this is when you're doing your heaviest lifts, your hardest peloton class, your most intense sprint training. I would dial that back and put that more in the first half of your cycle and in the luteal phase, still be doing strength training. But maybe now you are lowering the load. You're focusing more on progressive overload with volume.

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So now maybe it's higher repetitions, more focus on slowing down, doing eccentric work, tempo based work, really dialing in and focusing on your form and your function versus your load, bringing in yoga, pilates, barre.

And I think walking for women is one of the most foundational things that we can do for our health in every phase because it is beautiful for your nervous system, it is incredible for your vitamin D exposure. Fresh air. It is medicine in motion, I believe, for us to just get out...It's low impact, but it's supportive for your bone health and it's not going to stress out your nervous system.

So that would be kind of in a nutshell, moving through those four phases. And then nutritionally in that luteal phase, you really need to focus on your healthy fats, your fiber and your protein. Because that fiber is going to help with the detoxification, specifically phase two and removal of some of those estrogens coming into your period. And a lot of women will have bowel dysregulation, either get constipated coming into the period, looser bowels, those types of things.

Dr Anu Arasu

That's so helpful. You mentioned that most women or a lot of women don't eat enough protein. And again, that's something I've commonly heard. What would you say to the vegetarians, to the vegans out there? Is there a role for protein powders, for example?

Jenn Pike

There is. And listen, you don't have to be consuming only animal-based products to get in your protein. You can do it plant-based, but you have to understand the relationship, because majority of plant-based proteins are also higher in carbohydrates and starches.

And so this is where it's like how you are able to modulate this so that as you're trying to increase, like, if all you were doing is having tons of beans and legumes and lentils, I mean, yes, you're getting fiber, you're getting some protein, but lots of carbohydrate, you're probably also going to be more full and digestively, have some issues going on.

Bringing in protein powders are great for a few reasons. Number one, to me, that's fast food. That is fast food on the go. There are so many things that you can put into a blender and whip up where you're getting minerals, vitamins, all your macros, your protein, your carbs, your fiber and your healthy fats. Plus you're getting hydration.

So for most women I work with, I get them to make a liter worth of a smoothie and adding filtered, good quality water in there. But we can add creatine in here as well. You can be adding in electrolytes in here and then getting a good quality plant-based protein powder. You want to look for a minimum of 20 grams of protein, 20 to 30 grams per scoop that you are using. And that can be a really easy way to bridge that gap.

You also have an easier time typically digesting the liquid based proteins than you do having to chew and masticate all of your protein. So if you've got people you're working with who have a lot of gas and a lot of bloating, which oftentimes will mean they probably don't have enough stomach

acid. So hydrochloric acid is low, their commensal, which is their healthy gut bacteria, may be struggling a little bit.

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We do see that a little less often with people who have a more plant-based diet, but there's a difference. There are plant-based diets that are actually all grain and bean based, and then there are plant-based diets that are vegetable, fruit, grain, and bean and legume based.

So you do want to make sure for those of you listening who are vegetarian and vegan, that it's not just a grain and a legume to get your protein in. If you're doing things like tofu, tempeh, Seitan, those types of things, just making sure you're choosing really good quality and building out that variety.

So I do recommend for most people, if they feel like it's so overwhelming, is take a couple of weeks, download a free app like My Fitness Pal, and start to actually track and measure what you're eating so that you can understand how much are you're actually getting in. I'll do this with women and they're like, "I think I'm getting the 100 grams of protein". And then it ends up they're getting like 50 to 60 grams.

Why that matters is not because you're trying to go and be like Arnold Schwarzenegger and build all of this big muscle. It's that that protein supports healthy glucose, mitochondrial health, cellular health, and metabolic health as a whole. It is also what is going to help you preserve that muscle, which is a metabolic currency in your body in perimenopause, menopause and beyond.

The more muscle that you have, the healthier neurologically you're going to be. We know type three diabetes is now dementia. We know that women are at a higher risk of dementia and Alzheimer's. And so when we can increase our protein - which helps to build muscle, support glucose, reduce inflammation and help our metabolic health overall - the downstream effect of all of those things is massive.

Also, when women are struggling with their body composition, and so often what we've been trained to say is to "lose weight, lose weight". This is really about losing fat and increasing muscle. That's the composition piece of our bodies. It's going to be very difficult to do that if you are not consuming enough protein.

Dr Anu Arasu

Yeah, body composition is a huge one, isn't it? That is a huge topic, because, as you say, muscle sarcopenia is, loss of muscle mass is a key factor in aging...

Jenn Pike

And what I will say on that too, is that the approaches that most women are taking specifically to lose weight, they may weigh less on the scale, but they're actually losing a lot of muscle in the process. And that's why I say it's not about what you weigh on the scale, it's about your composition, how much muscle you have and how much fat.

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Because that muscle impacts your BMR, which is your basal metabolic rate, which is the bare minimum amount of calories your body requires for you specifically. And this is different for every individual, even if you're just to wake up, lie in your bed and breathe and have your heart beat and your brain function, you require that basal metabolic rate, that minimum amount of calories.

Most women aren't even getting in their minimum base amount of food. And so this will lower and slow down your metabolism, not increase it. And it sends signals to your body that this is not a safe environment. So it's not just about what we weigh and how small we are.

If your body is, like, constantly feeling like it's in a state of fight or flight, doesn't know where its next meal is coming from, isn't getting the right nutrients that it needs. This is very difficult to have a healthy reproductive system.

You don't need to have a period to live. You don't need to ovulate to live. We need this for a factor of vitality, but your body will literally be like, "That's not important this month. That healthy, luscious hair you want to have on your head? Not important. I need to keep these functions going on over here". And so for most women, it's like we have to look at these factors also, the impact not eating enough has on your thyroid.

Dr Anu Arasu

Yeah. The fasting state. I mean, just to speak specifically to body composition, what percentage would you say is related to diet and what percentage to exercise?

Jenn Pike

Oh, gosh. I mean, we have so much clinical data in doing this for so long that I have found specifically that when we can get women to embrace more strength training, less cardio, replace the cardio with walking, but get them lifting weights even three times a week for 25 to 40 minutes. It is unbelievable because we run labs as well.

So we run complete serum, so we're running their lipids, we're running all of their thyroid panel. We're doing all of those different metrics. We run urinary tests, salivary tests for cortisol, awakening response. We'll run stool tests as well, too. It's massive.

Now, when you pair the exercise with appropriate dosing of eating enough and having three really good quality, true meals throughout the day, (and then for most women, I find they do need a snack somewhere around that 3-4 o'clock window, that's when a smoothie can be excellent to bring in), it is astronomical.

And we see it in white papers and studies now that show that getting enough protein, stabilizing your insulin levels, and lifting weights have better responses on our bodies metabolically than drugs like metformin.

[00:34:57] Dr Anu Arasu

Pretty powerful. Yeah. I mean, many women don't want to lift weights. It could be a kind of a hard step in if you haven't started. But what would you say to people listening out there?

Jenn Pike

There are so many different resources now. I mean, we run a studio that is completely online that's called Synced. Most of our classes are about 35 minutes because that is the feedback from...The story is like, "I don't have time. I feel intimidated. I don't know where to start". We teach you this out of your home. So you need to have very little equipment to get going.

And oftentimes the beginning for women, the only equipment you need is your own body. Squats, lunges, push ups, dips, planks, all different types of things. Then build to bands, then from bands get into dumbbells, kettlebells, barbells, those kind of things. But you don't want to be in this mindset where you're simply choosing to work out because of how you want to look. This is about your health and longevity moving forward.

So for us as women, the other thing we have to remember is that when we go into menopause, this is not just about the cessation, the stopping of bleeding. This is now we are at a higher propensity for...I talked about the neurological impacts. We're at a higher propensity for heart and cardiovascular disease, for inflammation as a whole, and you mentioned it, sarcopenia, muscle wasting.

And so this isn't about like, "Oh, you're in menopause, just take some calcium now and some vitamin D and you're good to go". It's deeper than that. And you also, ladies, you want to be able to move your body to get up and out of a chair on your own, get out of the car without holding the holy shit handle, be able to put your carry on bag up in the plane, play with your grandchildren. This isn't about just how you look. This is how you function. And if you focus on better functionality in your body, you will feel better as a result.

Dr Anu Arasu

There's one other thing that you mentioned that I know a lot of people will be wondering about. You said that a lot of women aren't eating enough, aren't getting enough nourishment, aren't getting enough calories as well. Can you tell us a bit about that?

Jenn Pike

Well, I mean, most of the women that we work with, again, we're running a clinic where we specify that we work with women with health and hormones in that most of them are trying to lose weight. And what we've been taught is in order to lose weight, you need to be in a caloric deficit. So eat less and move more. That's what the standard education has been.

Now when we look at the way that women eat over the course of, say, a week or a month, they will have days where they are trying to eat as little as possible because they're like, "I'm dialed in. I'm focusing. I'm going to do it". And then they'll have days where they're like, "Screw it" and they binge and they eat whatever and drink whatever. So it's kind of like you're looking at it over the course of the end of the week, right.

[00:37:46]

But for most individuals, if you're getting up in the morning and your day is starting with coffee and you're extending your fast and then you're having a lunch, but it's maybe not a complete lunch. Like, it's just like a green salad with a little bit of protein that's on it. And then you're kind of munching on whatever in the afternoon because you feel your energy drop and you're like, "I need sugar. I need another coffee. I need something to kind of pick me back up and give me a boost".

And then dinner might be the only complete meal of the day that you get. And oftentimes this will happen because you have to make that meal because you have a partner or children or other people. And then it comes to late night snacking in the evening. And those may not be the best choices. There's wine that's happening and being poured. Right, those kind of things.

This is where it's like you can also be in a state, ladies, where you're overfed, but you're actually starving. So calorically, you can be in a surplus where you're getting a lot of calories. But if we look at the nutrition in what you're eating, there's very little.

Dr Anu Arasu

Yes. So actually, what you're speaking to, there is some days of very low calories. And you're also speaking to this pattern that I think is so common, where if we don't eat enough calories during the day, this can tip over into eating late into the night and then tipping into over...

Jenn Pike

Yeah, because you're hungry. Like a lot of people don't realize. You might be like, "I don't really have an active life. I get up, I do whatever, and then I sit for majority of the day, and maybe I move around a little in the evening, and then that's it". And that could be true.

So physically, you may not be getting a lot of activity, but mentally and emotionally, you could be running a marathon every day depending on the stress in your life, the pressure that is put on you, the non-stop list that has to get done, what everyone else needs from you.

So there is this nervous system marathon that's running in your body, and so you might think, "Why do I need lots of calories? I'm sitting all day. I'm sedentary. I don't need to eat a lot". But your body is like, "Excuse me, we are not doing well inside here, and we are going to require more magnesium, more potassium, more sodium, more whatever. I need protein. Where's my fat? I haven't pooped in a few days. Could you please bring me some fiber in here?".

And your body will start to give you these cues now how we receive the cue - and there's also leptin and ghrelin that play a role in this, like, our hunger and our satiation hormones. When we receive this cue, most people aren't like, "Oh, I'm hungry. I should go and have this beautiful plate of steamed rice and sweet potatoes and chicken and all of that". It's like, "Where's the potato chips? Where's the sugar? Where's the quick thing that I can go and grab?".

And we are emotional beings, and we go and do that, and for a moment, it feels good. We get a hit of dopamine, we get a hit of oxytocin, which are drugs that these neurotransmitters to our brain

that are like, "Good job", you feel amazing. Until we don't. And then we start the shame spiral. And the moment we get into the shame spiral, which is like, "Why did I do this again? Like, here I am. I have no self-control, no discipline. I have failed". Now we're just like, "Screw it". And most people will just double down and actually go deeper on that.

[00:41:00] Dr Anu Arasu

So would you actually advise people to eat regularly, even if they're not...

Jenn Pike

Oh, my gosh, yeah. Well, here's the thing. I think it's like, when people tell me "I'm not hungry", that's not a good sign. When people are like, "I wake up, and I'm just not hungry. I'm not hungry for, like, ever. I could go until 1 o'clock", that is a massive sign of metabolic dysfunction.

So people will use layman terms like broken metabolism, damaged metabolism. That is a dysregulated metabolic system. That is actually not a healthy sign when you say, "I don't get hungry".

So now we have to train your body. This is also part of your circadian rhythm. So if you don't have, like, every single organ, every system, every cell in our body, has a circadian rhythm and pattern. Some are on 24 hours cycles, some are on slightly shorter cycles. So again, if your lifestyle is out of alignment and out of calibration, this can impact your appetite.

If you have also just been so used to starting your day with coffee, not having food, and that's just your norm now you start to condition and teach your body that that's what it expects. So you have to start to train yourself. So I like women that I'm working with, especially if there's a lot of hormonal inflammation going on, we're concerned about thyroid, metabolism is just like... They're not shifting their body at all.

I would like them to eat within the first 60 to 90 minutes of waking, get that really strong healthy bolus of protein and some healthy carbohydrate in there and a little bit of fat, get your hydration in motion and let's get going. Within about 4 hours at most, I would like you to eat again.

So let's say you're waking up and you're eating around 7:30 in the morning, then somewhere in the neighborhood of around like 11:30, 12:00 at the latest, we want to make sure that you're getting another healthy meal in. Then you go forward again. Somewhere in that neighborhood, around 3:30-4 o'clock. This is that time where I think a good, supportive, blood sugar balancing snack - I know a lot of people are saying "no snacks, three meals" - okay, that's great.

But no one's schedule is the same as the next person. So if you have someone who's eating at like 9:30 in the morning, 1 o'clock and then can make it to dinner, fine. But for the person who's up at 5 in the morning, their day starts at 6 to tell them just to have breakfast...The span of time between breakfast and lunch will probably be 5 hours.

The span between lunch and dinner could be 7 hours, depending on if they're picking up children from daycare, getting home, making the food, stopping at the grocery store on the way. I don't think it is really good general advice. I think we have to remind people that we're individuals.

[00:43:34]

And if you are somebody who has got the dizziness, the hypoglycemia, the hair loss, the thyroid issues, all of those things. I would ask you, implicitly ask you that you start to consider having something in that neighborhood of like 3-4 o'clock - doesn't have to be a lot - but again, protein, carb and fat in there and then have your healthy dinner and then that's it.

Try to have a couple of hours between dinner and bedtime. We know, by studies that have been run by companies like WHOOP and Oura and different wearables and even different sleep clinics, the closer you eat to bed, the higher your heart rate will be when you go to bed, the less optimal your heart rate variability will be. The more likely you are to wake in the middle of the night with an insulin crash, which will then signal cortisol to rise. So for those who wake between like one and four in the morning, pay attention.

So that's how I would cycle a day.

Dr Anu Arasu

Fab. Jenn, where can people find out more about you and your work?

Jenn Pike

I spend the most time probably on Instagram [@jennpike](#) and then I have The Simplicity Women's Wellness Clinic where we work with women all over the world and you can head over to jennpike.com/wellnessclinic/ to learn more there.

Dr Anu Arasu

You've helped us with so many foundations here today. Thank you so much.

Jenn Pike

Thank you for having me.

