



Episode 26: Not Black and White, But Red All Over: Nutritional implications of Eczema

Evan H. Hirsch, MD 0:00

Hello and welcome to the fix your fatigue podcast. Whether you can't get out of bed in the morning, your energy crashes throughout the day, or you're a bio hacker looking to optimize your energy, productivity and focus. This podcast is for you. I am Dr. Evan Hirsch. And I will be your host on your journey to resolving fatigue and optimizing your energy. And we'll be interviewing some of the top leaders in the world on resolution. Welcome. Hey everybody, welcome back to the fixture fatigue podcast. Thank you for joining me here today. So today we're gonna be talking with my friend Christa Biegler. So let's learn a little bit about her. So Christa Biegler is an award winning dietician, nutritionist, host of the less stress life podcast, which I was on recently, so go check out that episode, and author of the eczema relief diet and cookbook. She helps health savvy women beat bloat, burnout and eczema breakouts with her podcast programs and private practice. She lives with her unicycling husband and kids in the Midwest. Christa, thanks so much for hanging out with me today.

Christa Biegler, RD 1:10

Yeah, and let's not let Dr. Hirsch be too humble. He has two episodes of my podcast. One is about fatigue, which I know you hear from him all the time. And the other one is about post COVID syndrome. And I don't know if we've split it into two parts. But it was really good. And later after this talk was to talk about some other another study I just picked up today about COVID stuff. So which is great, because we're always still learning about things. And we'd like to know how that affects different systems. So it's just an awareness thing. Thanks for having me

Evan H. Hirsch, MD 1:36

on here. You're so sweet. So we're going to be talking today about eczema. Right? And I love this title, not black and white, but read all over nutritional implications of eczema. And, you know, interestingly, in my practice, I recently had some challenges with eczema. I actually sent you somebody, right, who you talk to, and you guys kind of helped to figure things out a little bit. But eczema is a big problem. Right. So and let's talk what is eczema so that we can all get on the same page?

Christa Biegler, RD 2:04

Yeah, eczema is part of the atopic March. So often, we think it's a type of skin rash, the most common skin manifestations in general, right things that show up on the skin, there's eczema, psoriasis, these are a little bit different. psoriasis is a little bit more, it responds a little bit differently. So we can talk about that later, a little bit. So there's eczema, psoriasis, acne, and then like hives are under like random hives, who to carry etc. So eczema is essentially just an inflammatory reaction. We don't even have an amazing definition for it. But it affects a ton of people. It affects 10 to 20% of kids, and one to 3% of adults. And what it often does is it presents as a kid and then you kind of grow out of it quote unquote, but not really. It grows into this. This is why it's part of the atopic March or the allergic March, it becomes asthma or allergy essentially, are these things really coexist kind of inflammatory skin reaction on the outside. But that's like, a sad, a sad, not good enough. statement. Really.

Evan H. Hirsch, MD 3:03

Gotcha. You were cutting out a little bit there. So we may want to snatch your videos. Yeah, stop the video, unfortunately. But I think we got most of it. So it's the it's that allergic March. And that as you get older, it changes its spots. So it goes from you know, that 10 to 20% as a kid, but then oftentimes, then it's manifesting as asthma and some of these other conditions. Was that the just, yep, totally. Okay, great. And so then, let's get down kind of into you talked a little bit about eczema versus psoriasis, some of these different skin issues, how do you different differentiate those what is what is the difference down kind of at the cellular level, or wherever you want to go with that?

Christa Biegler, RD 3:48

Well, usually you get a diagnosis at the doctor's office and what you're supposed to get for for psoriasis is really a biopsy. And to be honest, I'm not sure what they see in the biopsy compared to eczema, but he is what we universally accept as eczema now, whether it shows up like this, and actually I want to talk about what, what we universally accept, and then how it might be different if you go into your clinician office. So we know that eczema on the skin is kind of Staphylococcus aureus overgrowth. And so it's important. So one of the problems with eczema is when we scratch we translocate bacteria, so we translocate it from the arm, you know where it shows up so commonly as the inside of the crease of the elbow and behind the knees. And those are kind of like very consistent places. You see it as a kiddo where it's bright and red. And we could maybe talk about commonly what we see that being related to, but when you scratch, you're gonna move bacteria under your nail to a different place. And I do want to mention the importance, like that's an important conversation. And I want to mention that, okay, if we have topical staph overgrowth, the skin grows from the inside out, right. So I think that that's important to mention, but also if you try to go Get, there are fungals kinds of looks to skin or if you go to get this cultured topically, it doesn't always come out quite like that. So I think the staff culture is a little more I mean, I'm not the Derm. But I've talked to a lot of terms about this, because I've run into it in practice. So the staff culture to my understanding comes out a little more accurately, the fungal culture is not super accurate. And I've had like some very significant situations where we're pretty sure it's fungal, a response to antifungals in response, so that's a big one, if it responds to antifungals, that's a big deal. But if you if you culture it, and it's not a fungus, in

response to antifungals, then I'm probably going to go with how our response, right, because we really care about how things improve overall. So I think that's maybe good for someone to know, because otherwise, we get disappointed when like a lab test is negative. And I think that lab tests are only skin deep, just kidding. They're only like, they're, they're only relevant to a certain extent, and how your symptoms are more relevant overall. So fungus can be a big thing, but I wanted to say here is that from the shoulders up, there's an increase in a fungal like family called malassezia. And so that's why so often with even if we can be talking about dandruff right now, often we think about dandruff being pretty fungal, or cradle cap as a kid, right. And so all these people will use coconut oil on cradle cap as a baby, which is okay. But coconut oil has, you know, it has some caprylic acid in it. And caprylic acid is a very concentrated, concentrated that I suppose compound or extract from coconut oil. And that's a very specific antifungal. However, if you just like constantly use, I'm off on some tangents, you constantly use coconut oil in the skin. I have a microbiologist friend who says that really disrupts the skin microbiome to and so we could talk about topicals. Like, I think the bottom line I want to say about eczema in general is that we always want we want to go after something like it's an external problem when it looks external, but it's not always an external, external, internal. And that's why it's almost easier to address Crohn's or colitis because we know where it's at. Its internal. And then when it's a skin issue, it's internal and external. So I think we can get frustrated with that sometimes, some skin issues respond very quickly. And some respond slowly. Do you want to know what those look like? I do. Alright, great. Because this will kind of tell me and this is basically just clinical, when I am going to talk to them about their skin, I asked him for a picture, because you can tell a lot from a picture very quickly. So earlier, we were talking about how bright red eczema in the elbows, and behind the knees is very consistent with kiddos, well, what will happen, let's just talk about what a very common progression is. And we talked about a little I alluded to it just a touch earlier. But what we'll see all the time is kids, you have that particular presentation of eczema as a kid, and then you quote unquote, grow on red. So let's talk about bright red eczema. That is like when you're almost certain that there's a staph situation, you're almost certain that there's a staff situation. And I would say that nine times out of 10. There's a huge gut mediated component. So if you just start in the gut, and you work on overgrowth of staph, strep, and whatever else, and by the way, I was talking to a skin friend, a skin practitioner, friend of mine today, we were talking about research around, I'll just bring this right away. We were talking about literal research around parasites. And because I don't want to be the person to talk, I always say like, I work with a lot of health practitioners. And so I don't want to be the one to bring up parasites because it sounds crazy, right? It sounds crazy. But they're around and so we've got literature where it's like, I don't know, if it's blastocyst is hominis where there's a big incidence of blasto and I might be Miss Miss saying Which one? It is big incidents with like hives or chronic hives and a lot of people will go in and they'll just have hives randomly, like, Oh, you just have hives. Like No, no one just has hives. Why do you just have hives, right? And so anyway, anytime something is bright and red, and here's another one, if it is kind of we actually there's like nine different types of eczema. And I probably couldn't say them all. But nummular is where it's kind of around Nicole shaped one. And that one is almost always in like there is some kind of fungus, bacteria, etc. manifestation almost always like that's just what it looks like on the outside like every single time. Now I will

say psoriasis tries to look like that. And psoriasis doesn't respond exactly the same way as far as it's kind of like not my best friend because it doesn't respond exactly the same way as eczema. So this is why it's nice to get the diagnosis differential because sometimes you'll have both handy right you can have both the autoimmune manifestation of psoriasis, which is going to respond to you know, for example, there are you know, you can respond your skin can respond to dietary changes, but with psoriasis, it might respond to certain things and with eczema might respond and I careful when I say this because I often I also see it you probably see too, I see people who over restrict, and we're trying to come out of that. And this upcoming decade, I think it that was an old functional thing where, you know, you gave, you did elimination things and you cut down diets, and this becomes a really toxic bad thing. So we're looking for like expansion of diet long term, we want to I always say, we want to use our food, we want to be able to digest and use it. So what happens? I'm off on this tangent, but it's all related Dr. Hirsch, if you don't, if you don't use your food, so this is why it's like so tricky. I'm glad we're having this opportunity to talk about why this happens in skin. If you don't digest food properly, which is going to happen anytime there's gut imbalances, because they throw a wrench in the enzymatic process, if you don't digest properly, that undigested stuff feeds the bad stuff. And it proliferates on the skin, because the skin is a safe place for your body to get rid of crap. And so it's one of those mechanisms of elimination. You can sweat, you can urinate, you can have a bowel movement, or you know, into sweating and skin. Yes. So where you can breathe, these are all mechanisms of elimination, and the skin is just a safe one, if you can. And so we know this is the first question is I always love a skin case where someone's a little bit constipated, it's like cool, can't get rid of things. That way, you must be getting rid of things through your skin. So if it's bright and red, I always think gut manifestations first, that's where I actually start. Now what happens if you've had that as a kid, so you already started with stuff as a kid. And by the way, in the opportunities I if I'm seeing a little kid, which is, you know, a fairly common event, I am working with their parent, typically, right? Especially five and under. And I will say that the times I've gotten to see testing side by side of moms and babies, or you get to go through that whole history of mom and a mom and child. There's absolutely a relationship from mom's microbiome to baby microbiome. And there's a little bit of literature around that for sure. It's never anyone's fault. But we share microbiome in the family, as you know, right? Alright, that's got manifestation. I was a lot of stuff.

Evan H. Hirsch, MD 12:00

Lots and lots of good stuff. So you talked about in these infections being on the skin. And you talked about the infections being in the guidance. So just for people who are listening, Staph aureus is a bacteria, the fungus, could be yeast, could be Candida, other types of yeast, like you talked about, but could be on the skin could be in the gut. Now we know that autoimmunity is the immune system reacting to the scan, right? So it's causing some sort of breakdown or inflammation at the skin right from the immune system. Is the immune system reacting to the bug in the gut and then projecting it out onto the skin? Or is it actually reacting to the bug on the skin? What do you think?

Christa Biegler, RD 12:41

I think both happen. I don't think you can look at that as a silo. So again, at the skin

grows from the inside out. So what commonly happen, what do you want to see is like you want to see the the exacerbation of skin issue come down on the top on the on the outside, it just go away topically, and there are some there are some good, there are some good interventions. topically, we're happy to talk about them. But the unfortunate part is sometimes it'll just pop back if things are out of whack on the inside. Now, here's the other fun relapse curl, that you can clear up some gut stuff. But after you get like a cold, or you're having staph and strep overgrowth, you can have kind of low line levels of that. And if you're if you have the genetic predisposition to have things pop up on your skin, you lucky duck you, you and me both, if you have the genetic predisposition to have things pop up on your skin, because you can tell by if you look at your family history. Did anyone in your family history have like skin stuff at all? Or do they have allergies or asthma whatsoever? Because you you then know like, there, there are some genetic components. I do not like to blame things on genetics. I just like to use them as a teaching tool, give the predisposition or things show up on your skin, it may pop up again. So again, a cold you might have a little staph strep overgrowth on the inside, it looks really bad. This is my really dumb analogy for this. It's like you're in a gymnasium, and there's a bunch of red ping pong balls and white ones and the white ones are the good stuff. And the red ones are the bad stuff. And when you've got this sinus infection, you got a real overgrowth of the bad red ones, right? Well, you get those suppress to where you're not really super symptomatic anymore. You don't really have a cold, but it's gonna look there's no lawn with a perfect with no weeds. I mean, I'm looking at a lot of dandelions right now. And there is no, that's just me, I'm in the country. So like there's no lawn with no weeds Unless, you know, you've created that you've kind of created that situation naturally probably would not happen on its own. And the same thing happens in our own gut. But is it strong enough to overpower the bad stuff? So what I would say is think about this is a very common potential situation where someone it's like a month post, an infection or a cold, and you'll have a resurgence of skin stuff that was actually like a big, that was like a big epiphany for me when I started realizing that for people, because we just need to like I need people to know that so they can go back and correct Not in a crazy way necessarily, if you can, you know, you always want to listen to your body's whispers before it screams. So if you can start to catch like little bits of things, I'll tell you, I can tell you a little bit of my story and I'll help me it'll help me set you up for the next kind of eczema if you want it. Yeah. I'll go there. So if I am on vacation, and I am drinking a lot of coffee, which I like coffee, no one wants to ever say anything bad about coffee, but it is a dirty little bugger is not the cleanest crop, it is like, not like I could be a I could be a coffee. I could be a tester for mold. Would you like to know some some interesting things about coffee coffee is sold by wait at this coffee guy on one time, and he was telling you about visiting a coffee plantation or coffee place where you dry out the beans under the under the tree. And then after they were dried out, there was a guy like watering them down. And so this guy, this coffee guy I was interviewing said, Why are you watering those downs? He says, Oh, well we get paid by wheat. So we just you know, wet them down before we ship them in the barrels. So coffee is a notoriously moldy crop. And so I've seen this in myself in in clients. mold is a big old fungus. And I definitely have like family history of fungus stuff, talking about sharing microbiota. But if you're just like if you're brewing coffee and kind of burn yourself like a small fungal load, so crappy quality coffee, like cheap coffee cup has made me and my past and my clients like jittery and anxious and you probably seen this in

your clients too. We're like crappy coffee, we'll do that. And like a good quality coffee will not do that. And so if I'm on vacation, and I'm over indulging in my coffee, I had a pretty severe eczema flare. Several years ago, like at the very, maybe at the very beginning of my private practice, and which by the way, at the very beginning of your practice, when you're kind of coming out of what you're doing, there's more stress. So it exacerbates the whole situation. But it showed up around my I really, it was so handy. It was around my I was very like in conspicuous places, roll my eye and on my neck and no one ever asked about it was great. That's why that's why eczema sucks so much, because it's an emotional thing. It's like the skin. It's almost like weight loss. Dr. Hirsch, it's almost like weight loss people. It's a vanity thing I know it's not really a vanity thing. But it kind of is people will have an internal gi distress, and they won't do anything about it. And then they'll finally do something they will do. This is human nature, I am no different. We will do something when we feel like our our vanity is compromised, right, that's when we actually take take the action. So it's around my eye. And if you look at Chinese medicine stuff, they will say that it's liver around the I've never seen that disproven in a client that you shouldn't support liver. So if we think about mechanism is such an incredible powerhouse. It's such an incredible machine, and it has all these processes. And it's not the only it's not the only guy, you know, eliminating stuff. It's a big, it's a big guy trying to break waist down, I would say it's like break boxes, download them up on a truck and put them on out. But long story short, things showing up around the eye is lower. So remember, I was telling you the story about Hey, when you're little often you see bright red eczema, and then it might go away. And then as you're an adult, you get this dry skin or dry flakiness manifestation to the eczema, almost always I find that as a liver, then you're gonna find that in a textbook, but I find that that's where you should start. So bright red, you can start with gut stuff, good to go. But if you've got this dry presentation, and there's enough history there, you should probably support with the liver. And I think that really just boils down to life, that maybe you started with a little bit of imbalance as a kiddo. And maybe that has abdu flowed or whatever, or you just have the predisposition to have things show up on the skin. So all the things turn out just right maybe like your microbiome matured. at age three, five, it does do that. So it may be at matured and you kind of like were able to compensate or deal with those things, your body was able to take care of it on its own too, so to speak. And then you get older and stresses pile up. And toxin stress is always going to be just a reality and I'm not like some kind of weirdo about it's just, I mean we're just all exposed to toxins and I have an especially sad like genetic situation for my liver and so I should give it some love sometimes if I want to have great skin. That is the story like that is where learning my genetics made me feel better not that I think people should start there. I think it's a bit overwhelming. But if it looks like that, if it you know if it acts like that looks like that there's almost always guess what you know it of course it coexists with other liver signs and symptoms, like sensitivity to chemicals and smells and things like that. Right. And I was absolutely there. Absolutely that person as well. Like, oh my gosh, be careful with like this perfume you put on I still don't like love it, but it's much better than I was. So I would say that's my second kind. It's like you either start with the gut if it looks like one thing Or you can start with a liver if it looks like another way, and there is another way. But what what interjections Do you have from that, because I'm a big yapper. As you can tell, you're doing a great chance.

Evan H. Hirsch, MD 20:11

So then, in terms of, I'm a big causes guy. So we talked a little bit about infections being a cause. And a little bit about the pathophysiology. I'd love for you to kind of clarify some of that about like, what what's actually happening. But what are some of the other causes that are potentially triggering the immune system to cause the skin eruption?

Christa Biegler, RD 20:33

Hmm, I mean, I'm like, an oversimplification person, because you could make a big old list and say, it's our I mean, we can. So very commonly, allergies are a big thing. personal care products can be a thing, I would say, a very. And this is not everyone's situation. But there are there is a small percentage of skin cases where sodium lauryl sulfate or SLS is like a big driving factor. Right? Hmm. But that boils down to me to like, Hey, can you clear garbage? You know, so like, in what great state is your liver? I mean, I'm always gonna oversimplify, I'll keep going through this complicated list, hopefully, you know, so there's bacteria, and fungal imbalances, and protozoa, and poor digestion issues. I mean, I feel like those are all together, people would say food issues, which I feel like there's two types of food issues, a food reaction and a food digestion issue. The food digestion issue sometimes becomes a food reaction. We could we could break that down. So topical stuff, let me tell you a fun pearl also are like a fun I love I love like stories and case studies because I think they're so impactful for people I was doing. And I don't do this very commonly. But I was working with a client who was half eczema, half psoriasis, and psoriasis can be such a pain. And so and they were remodeling an old house, and when that we just decided to do kind of a, essentially an environmental tox panel. And so anyway, I was talking to the the friend of the consultants, who was actually a friend of mine, at the company, or at the lab, but more of a colleague, and we were just talking about what's new, like what they usually see, because that's what I want to know, like, what do you usually see crossing your desk, like, what kind of levels and she said, the worst toxin test she'd ever seen, was a teenage girl, who was an Instagram influencer, and received a lot of personal care products, beauty products for free. She had the worst test result that she'd ever seen. I just thought that was so cool, right? I'm like, I want to tell that story more often. So here I am telling someone else's story. Because I think it's kind of interesting, right? Like we don't we don't think about, you know, everything that touches your skin throughout the day. It's kind of important. And this is where people say, I've tried everything. I've changed my laundry detergent. I've done that since like, actually just did this like section of stuff. But there's still a whole lot of other things that you could, you could potentially do. So I probably did not fully answer your question, but I'll let you decide where you where you want me to elaborate?

Evan H. Hirsch, MD 22:55

No, that's great. And I think that, you know, you mentioned this before, how it's this build up over time of a lot of this stuff. So it might have been, you know, like when you were a kid or a teenager and you're wearing all these skin products or having exposures to whatever it is pesticides, herbicides, plastics, whatever you want to call it, heavy metals, chemicals, molds, and then over time, all of a sudden, it takes less toxicity that you're putting into your body to cause more of a reaction. Would you say that's accurate?

Christa Biegler, RD 23:23

I would say that's accurate. Um, and you cut out for a second, but I sounded good from everything I heard. Okay.

Evan H. Hirsch, MD 23:29

Okay, great. So then, the difference between eczema and psoriasis. Can you talk a little bit about that? Did you touch this?

Christa Biegler, RD 23:38

You asked me that. Yep. You asked me the difference between I love how like today at this moment. topic of our podcast is like, Internet's great today. No, just kidding. Not gonna be great today. Not gonna be great today. Alright, so I again, like psoriasis is not my jam. eczema is more of my jam, because it acts differently. So my if I would, again, oversimplify I would call psoriasis. I would lean more on an autoimmune manifestation. And it responds massively to stress. And anything that's autoimmune might respond more to diet than something else. So let me break that down a little bit more, because I don't think that's going to make, like I talked about food all the time. So for me, I'm like, Oh, this makes sense in my brain. Let me talk about common food things with eczema. There are common food triggers with eczema, but I think you can overcome a lot of them, because I think a lot of them break down to digestion issues. And if you correct gut imbalances, you can correct a lot of diet and your support digestion processes. You can correct digestion. And here's the challenging part. You don't really realize that you don't digest very well. You might see on digested things in your stool, but unless you've got X ray vision, it's not as clear as you'd like it to be sometimes. So there are some digestive or intestinal health markers like elastase, etc. And I still find those variable. I'm a huge bitters person. I will tell you I've seen massive before and after changes and testing results from looking at bitters versus enzymes. But if you can digest Well, you're going to help things kind of stay in shape, I guess, I guess, like, stay in balance a little better. Okay. So if I'm talking about psoriasis, it's more of an autoimmune component in there. And I think both stress is affected by both. And it's actually a stress as the last big component of like the last big bucket if I oversimplifies the eczema buckets, but more so with psoriasis, it seems that that really comes on, which is so consistent with autoimmune conditions. I feel like I don't know of an autoimmune condition that didn't have like the straw that broke the camel's back with stress, which no one really wants to hear that because it's like kind of tricky. And of course, stress, we could talk about all the physiological changes that happen in the body from stress. That's like one of my favorite topics. But I would just say, from what what does psoriasis respond to stress stuff, autoimmune, like more, more dietary things, because of the autoimmune thing. And here's the other thing I want you to know, if you do some diet changes, and you do, they're like the ones for autoimmune stuff, and you don't see a difference in like a month. And by the way, you shouldn't be over restricting, you don't see a change in a month, you're probably not gonna see that change. So I want to make sure I mentioned that since this is a public topic, and I want to make sure I don't ever send someone down a restriction rabbit hole. And I will also tell you, there's another pearl that works well for psoriasis, because I'm just a fan of telling you anything that will work for stuff. There's a product called skin, nessa not to give them you know, special airtime, but their skin

based probiotic. And they have research based strains for skin conditions. And it just works a heck of a lot better for psoriasis and eczema. So this so the research around it must really be dressing for psoriasis above almost anything else. So like, those are some things that come to mind that have worked well for psoriasis versus eczema, even if that's not what you wanted. This is like what I see from a clinical perspective of what works, which is more how my brain works. It's like what is the oversimplified version? And how, how does it actually help someone change? So I love this, because honestly, I don't know when you go to the dermatologist like it's actually a bit different. I did write some continuing ed for like, there's a big integrative dermatology website, it's actually kind of kind of great. There's some good stuff there. But I love talking to dermatologist because they know so much that I don't know. And I think they're interested to sometimes know what well what are you doing that works? Because, you know, often we don't think of that. I mean, we just kind of do different things, right? We have different toolboxes, you might say, so, like, there are some great topical stuff, things to address, right that people can go to their dermatologist for and some of them know about it. Like if someone has a severe, severe, severe severe eczema situation and especially a teenager. I will usually like tell that mom Hey, if this is like excessively red, and severe, I'm gonna I would have you looked at the Aeron regimen, which is very low dose. It's very low dose steroid. I mean, even though our goal is not to be on steroids, and a very low dose antibiotic, and it's gotta if you do it, right, it's got to try to titrate and scheduling should get off of it. Because let's review. You should not be on steroids forever. But people are just put on steroids and left on steroids. And it can cause some ugly, it can cause some ugly problems. And don't go be Don't be googling topical steroids withdrawal. Unless you are like ready to see it because it is a real significant problem. I mean, you're supposed to be on steroids. What is it two or four weeks? I mean, you're the doctor here, isn't it? Four weeks or something?

Evan H. Hirsch, MD 28:36

Sell really short term? Yeah.

Christa Biegler, RD 28:38

It's really short term. So when people are on it for years, and they just keep and they're just at, you know, just added. It seems to cause some very significant serious, not cool issues. So I'm not sure how I got off on that one.

Evan H. Hirsch, MD 28:53

But I want to get off on Yeah, that's important. And just to clarify, when you're talking about restriction, you're talking about food restriction, like a food elimination diet, like decreasing the number of allergic more allergic foods that you're consuming, right?

Christa Biegler, RD 29:07

Um, yes. So there's a couple ways to go about that. And from an excellent perspective, because remember, eczema is part of the allergic or a topic March. And so that's kind of like slightly different than rice. So which is not exactly considered that, to my knowledge, like it's not really in that grouping of things. So, again, eczema is like, and so I would say for the people who have bright red skin manifestations, you can see a bit of an improvement from watching those top eight allergens or doing like a two week thing

where you're watching the top eight allergens. Dairy can be a big one because what happens if you want to know like, what is actually happening for a lot of those small people isn't the allergy in the allergy situation like what happens in the allergy process. Your body should break down histamine A natural neurotransmitter and chemical messenger that does is responsible for a lot of things. And our body is wicked smart. And so it should break things down and move them out when it has too much. And if it hasn't, kind of a barrier wrench in its process, basically, there is a genetic predisposition. So this helps corroborate what we were talking about before, that if you have a parent with allergies, or eczema or asthma, you may not have a very speedy gene, or genes Hnm, T and D. O, you may not have speedy genes to break that down. Okay. So you're already like I always call genetics, the cards that you're dealt, and then what's going on in your actual life is how you play the game. So cards you're dealt are not like, you know, a giving up point, that's just, Oh shoot, I am at a decreased advantage. For example, I am at a decreased advantage for liver genetics, right? And once I cannot, I don't have to be like down on myself about that. I can just be empowered by it and say, Oh, I have to give myself support every once in a while, right? And I have to kind of pay attention to what's going on. I don't ever know if I, if I finished the thought with if I drink crappy coffee, I'll get like an like a. I don't know what the word is. It doesn't it's like a tingle. It's not it's like a feeling around my it's like a if I drink this crap out. And I'm like, Oh, you know what I think about about backup. I think that was do. I think that was too much. It's a very, it's a very unusual feeling. It doesn't actually break out as anything. But it's like it's a it's a sensation is the right word that I was looking for. So sensation, where was I going with all this? got distracted on the sensation around the eye. You did too, you got lost as well. Thanks. So it wasn't just me, I appreciate that. I thought it was just going to be me what happens but I don't have like stuff in front of me. And Chris was just rambling about stuff that I hope is useful. We were talking about allergies is what we were talking about the histamine. So your body's just a breakdown d o and H and Mt if you have imbalances and a sluggish liver, it's not going to break that down, it's not going to move it on out. Same thing, by the way, if you have if you have allergies or skin stuff, and it gets worse, you know, it's a very popular topic. But thank you for social media for telling me this skin flares and hormone times of the month. So like it's very common for women to have skin flares around their their cycle starting and so there's an upswing in estrogen and so it's very similar mechanism. If I again over simplify, your body should break down excess estrogen and move it on out. And so if it doesn't have the capability to do that, because there's a big old mess in where those enzymatic reactions happen in the gut, and the liver is a little sluggish, it's not going to move out either one of those things. So you'll see an increase in estrogen excess symptoms like breakouts around right before your cycle. And possibly mid month, there's two spikes of estrogen.

You'll see the skin breakouts, you'll see moodiness, you'll see breast tenderness you'll see maybe you'll have a heavy flow because estrogen is a growth hormone. So sometimes we want to anytime we hear about these things, we're like oh, too much estrogen, I don't want like you want a balance my friend because too little equals, you know, hot flashes and poor bone health. But so it's a growth. It's a growth hormone. And so it predicts how thick your uterine lining is. So I was like, I just love to tell you that how things work. And so if you have a lot of estrogen, you're gonna have a heavy cycle. So if you have, it's very common, if I see someone with that, like gut mediated style eczema, or they have

allergies, I will just check in with how their cycle symptoms are. Because that's going to be those are going to kind of go together, right? And so, so it's fine, because then if you correct one thing, you now improved several things, right? I know, that's one of your favorite topics as well. So the allergic process, right? So if you help break down histamine better and cleared out that's useful. So I guess I get like very concerned that people are going to go Google stuff about histamine, then they're gonna eliminate stuff. And I just I'm like standing here on a hilltop saying, Please process it. Please process it better. Don't go and hide from it. Right. Don't go and hide. Please process things better. And you could say that about a lot of food, things that people food relationship, things that people get into. Don't go hide from something that's giving you trouble. Let's try to let's try to metabolism. Let's try to break it down and use it better.

Evan H. Hirsch, MD 34:29

Right? Yeah. Yeah. And I think that that's really interesting, because, you know, the food elimination diet has been used by functional medicine practitioners or is used a lot. And it's because it provides a lot of really good success. But can you tell us a little bit about some of your concerns about that restriction, like what ends up happening? That's bad when it comes to doing that restriction?

Christa Biegler, RD 34:52

Oh, what ends up happening is that love is a great question. So what happens is if you restrict over restrict You're probably over restricting carbohydrates. And what your gut is supposed to do is metabolize, break down and use carbohydrates for not only energy, which seems really important for this conversation. So like some Dead Ringers here is when people eat carbs, their skin gets worse or they get more tired, right? just totally a gut thing like those, those gut bugs are using it up and stealing your nutrients, for sure. But if you don't break that stuff down, your body can't make short chain fatty acids, which are your guts superheroes to heal itself. That's like, our body already had built in backup plans to like work on healing itself. And with these imbalances, we cannot metabolize and make sure chain fatty acids. So this is a great topic, because with long term ketogenic diets. And now the hot topic is, which I don't see a ton. But I almost got into kind of an argument with someone on Instagram the other day, and I've just decided it was not worth any level of any part of my brain. But carnivores stuff. Are you familiar with the carnivore situation going on right now? Yeah. So people will be really happy about how they feel on a carnivore diet, well, you just removed all the carbs. So this is equivalent to like, when you remove all the fodmaps when you have IBS, or like, I just feel good off carbs, like you might feel good off carbs. And that's totally fine to experiment with and see what makes you feel good. But what will happen over time is like, our body does use carbohydrates, depending on what kind of activities and energy and what we need to do. So you need to be able to be compatible with them, and you need to be able to use those. So the short answer was if you decrease a lot of foods, you're like, your gut starts to look emaciated. And then it's actually harder to bounce back. I have a great analogy for this. It's like trying to make a community garden out of an abandoned parking lot. Like when things are emaciated. And so and that's exactly what it looks like on those on those gut tests, etc. Like, everything is really low and kind of pathetic. And just clinically, it takes longer for people to bounce back from that. It's very difficult for people to bounce back. So

Evan H. Hirsch, MD 37:02

interesting because it's more stressful on the body.

Christa Biegler, RD 37:06

Because you if you don't have if you're not taking in a lot of nutrients, and you aren't really correcting the root cause as you would appreciate, if you're just eliminating, you are one robbing yourself of nutrients, even worse than you were before. Right? If you were couldn't digest them, you weren't going to get the nutrients either. But you're robbing yourself of nutrients and diversity because people like eat the same foods over and over. So real lack of diversity, which is a huge microbiome problem. And then, yeah, you can't make the things the the fatty acids like the short chain fatty acids, that your gut needs to heal itself. Does that make? Does that make sense?

Evan H. Hirsch, MD 37:45

I hope Yeah. So then so then what's the role of gluten and dairy? Do you remove those? Are they okay? Do you think they're okay for people to continue to consume.

Christa Biegler, RD 37:54

They're probably some of the top ones to try. And I think in my approaches, I'm like an all in like, I'm like, it kind of depends on where you are in your overwhelm in your life. If someone is very overwhelmed by something, they might just try one thing, because if they aren't familiar with something, it's gonna feel difficult. The first time you try to do something, it's difficult. I don't care what it is, you ride a bike, you go skiing, you go unicycle difficult, right. But after you've done something more than once, it becomes easy, right? So I would love people with food issues, or sensitivities or allergies to come to my house, because I know exactly what to do for them. And I've got all the things I can do to help support like to feed them delicious stuff with with substitutions. Not everyone can do that, because they've just started. So if they're overwhelmed, they should start with one thing. I prefer to like do everything at once, it's a lot shorter. Otherwise, it turns into this long thing forever and ever. So I like I'd actually I never want to be someone's first good experiment. I'm like, go try something on your own. And then come back, and I'll like walk you through it. Because otherwise you can't appreciate how much faster it could be sometimes to or you're just not prepared. Like you've literally never done it before. And so then it becomes a more of an emotional thing than anything, right? This is where it's like, I want to be emotionally supportive. And also, let's separate what our body needs right now to what's emotionally. So I have to address that because emotions around food are very real. So I would say not for everyone but for gluten. gluten and dairy are the most common ones to take out right away. There's a few others actually eggs are kind of hard to digest protein eggs are incredibly nutritious. All of these foods are actually incredibly nutritious. Technically, technically, I mean, I have feelings about wheat and why we struggle with wheat living in a wheat field. I think it's so fascinating. I'm just like really curious about it. Like why? Because you know, the hypothesis that we spray wheat with glyphosate is the reason people struggle with it. That's not true. They rarely spray wheat with glyphosate, actually. So I'm like, Well, what else is going wrong? I don't know if you cared. But yeah, removing wheat and gluten. There's many there's many ways people can be sensitive to

wheat, and dairy as a high histamine thing. So you I often see you actually tend to see a pretty significant change when you change dairy. And then I would say, Hey, can you help metallic, most people would like to eat cheese again, like, you might feel okay with this for a while, but most of us like cheese, and so it's nice if you can tolerate it. Now, again, if you've got a whole other autoimmune manifestations situation going on, those people respond really beautifully, to very specific food changes, I would say long term. But if you've got some eczema that is treatable, and you'd like to be able to consume those foods in some capacity, then our goal is to try to do that. But I would say like, those are the most common ones to pull. And I tend to like to pull those right away. And I'd like to see an improvement, because when you're not itching, and you can sleep well, your life now changes. And by the way, there is an increase in inflammatory cytokines from the environment and from food and whatnot. Sometimes I can change people's diet, you know, when you see you get a little like PTSD when you see people restrict, right. And so I just wanted to acknowledge all of those things.

Evan H. Hirsch, MD 41:00

Thank you. So. So then what's the first thing that you are? What's the thing that you have found to be? absolutely the most helpful thing to help people with eczema?

Christa Biegler, RD 41:12

Hmm, I? That's a great question. So first, I like to decide what is their biggest stressor? Is it a gut? And I think that's really like you pick the first starting place? And then you know, because guess what, if your primary stressor is liver, you may not see dramatic changes from change your diet, in the same way that the gut person should change their diet. So like, you might just need to clean up your diet from toxins, and like stuff, if liver is your primary thing. So we talked about that looks like for liver stuff, we talked about what it looks like for gut stuff. So depending on where you're starting places, if gut is your starting place, you can actually make some diet changes and probably see a big difference. You also want to calm that skin down on the outside. So you can like you want to do whatever you can to sleep well. I would say like you might want to make like that might be the time where you use steroids for a while. So you can sleep, right? Because if you can't sleep, you also can't heal. Right? That might be the end of that that statement. But it would depend on is it is the priority liver is the priority gut or is the priority. This is the most recent one stress. And this is actually super timely. We're having an outbreak of hand eczema. Because we use a ton of while we were this last year, we're using a ton of antiseptics. Yeah, alcohol stuff and our skin has a little fatty acid layer has like you know it has a little fatty acid layer. And it's meant to be anti microbial. And so when we strip that away with alcohol, we're now allowing microbes to set up shop on the skin, which is a topical stressor, by the way. But another clinical pearl is that I've never seen aside from like disrupting the topical microbiome of the hands, usually. And you can very easily trace this and People's History. If you if you had eczema as a little kid, and then it presents kind of a little bit as an adult. And it starts to present on their hands for the first time as an adult. That is stress. Because where it shows up on the body can somewhat tell you a little bit about the skin. So this was a pearl, I kind of learned from a genius micronutrient mentor I had. And he would tell me about when cortisol and stress is up at dumps B fiber pantothenic acid. And so and that deficiency can be related to the spandex. And I would just say every single hand eczema case, I see

gets exacerbated via stress and by stress and certainly topical stress but also, but I will see that same pattern like I had as a kid disappeared. And when I came back as an adult, if a lot of last thing I got was hand eczema was so like when stress becomes the icing on the cake. And that then that's the priority. Right? So it's the got the priority, which you'll you'll see some difference from food of guts the priority is liver the priority which you can see some difference from from foods. I want to just support the liver in whatever capacity like I want to make sure I have good bowel movements. I'm drinking enough. I mean, you could that's a whole tangent. And if it's stressed, I want to support stress. So the the shortest answer is I want you to sleep, right? We don't sleep 1/3 of our day on accident. So we got to do whatever we can just leave because a lot of times the machine will keep you up at night.

Evan H. Hirsch, MD 44:17

Nice. So you know, so much of this is really talking about immune system modification or modulation, right? You sleep and the immune system repairs itself. When you have stress, the immune system gets dysfunctional, all these things. We're talking about heavy metals, chemicals, molds, infections, allergies, all that sort of stuff ends up modifying the immune system. So it makes sense that that would end up affecting and autoimmune skin issue like eczema.

Christa Biegler, RD 44:47

Yeah, yeah, that is true. Yeah. That's one way to say it. It's a very eloquent way to say.

Evan H. Hirsch, MD 44:50

Oh, thank you. So a couple last questions here. So I'm doing an event right now on fatigue and autoimmunity. Given that the Causes of autoimmunity are also very similar to the causes of fatigue. How many people are what percent are just a rough estimate of how many people do you see who have X month that also have fatigue?

Christa Biegler, RD 45:13

Oh, gosh, I always think fatigue is a cofactor. For everyone in my cut, and it's just a matter of Do you resonate? I think fatigue is one of those like, gray areas. on what level? Do you have fatigue? Right? Do you can you pop out of bed in them up out of bed in the morning? energized? Do you need coffee at two o'clock in the afternoon? Because you hit a wall? Are you wired and tired before bed? But then you can't fall asleep? I mean, like, what level of fatigue? Are we talking? Because I think everyone can improve. You know, I used to get back to the coffee, I used to if I would get a coffee, and it had regular milk in it when I was still struggling to like work through that. I would like make me want to go to sleep, which is the opposite effect of coffee. Right? Coffee should make you want to be awake. And so my point is the it was the it was the regular like that's how sensitive my liver was, it would like make me tired to clear out that like regular melt like it was like so pathetic can be so subtle. Like the average person may not notice that. But it wasn't so much more market because coffees, toaster the opposite. And so if I want to take a nap, like automatically after this, this coffee with milk, it's like what is wrong with us? It's not getting you know, processed properly. So I guess I feel like it's everybody. But you know, it's a little different. When it's a kid and they have tons of energy. It's like, well, if you have a sleep issue or sleep dysfunction, you're more tired. I mean, I have a

lot of feelings about tired and like sleep. I feel like six and seven hours of sleep is not technically enough for anyone. If you cared, it's like it's it is did you know that there's a study? it's I think it's only 25 or 50 people. But they looked at people who slept seven hours and they looked at people who slept eight hours and the people that slept seven hours, they put common cold virus in each of their noses. And so the people that slept seven hours had a 300% 294% increase in the cold. That's the people slept eight hours. I think that's friggin amazing. It's insane. I love to on that. I love giving that example, because it's very dramatic.

Christa Biegler, RD 47:24

Everybody, and sometimes we need to dramatic, right? Like I'm just mentioning, I'm just I'm just restating what they found. That's all I'm saying. So I guess I feel like there is a lot of I feel like fatigue is widespread. It's just a matter of does a person think they have a problem or not? we could we could all want to be more energized and awake. I think that's a wonderful thing. Right.

Evan H. Hirsch, MD 47:47

Great. So Christa, where can people learn more about you?

Christa Biegler, RD 47:52

My favorite place if you weren't too annoyed by this conversation? And how fast I talk, my favorite place to connect with people as on my own podcast, which is the less stressed life and like I said, Dr. Hirsch has a couple episodes over there. Because that is my favorite. This is my favorite way to talk to people. You cannot wrap this much stuff in a newsletter or an Instagram post, right? So you can't do it and you can't read them while you're washing dishes. So I just love the podcast. Otherwise, you can find me living over [Christa Biegler.com](http://ChristaBiegler.com)

Evan H. Hirsch, MD 48:24

Slash links, and we'll drop those links below. Christa , thanks so much for joining me today.

Christa Biegler, RD 48:29

You bet.

Evan H. Hirsch, MD 48:33

I hope you learned something on today's podcast. If you did, please share it with your friends and family and leave us a five star review on iTunes. It's really helpful for getting this information out to more fatigued people who desperately need it. Sharing all the experts I know and love and the powerful tips I have on fatigue is one of my absolute favorite things to do. If you'd like more information, please sign up for my newsletter, where I share all important facts and information about fatigue from the foods and supplements to the programs and products that I use personally and recommend to others so that they can live their best lives. Just go to [fix your fatigue.com](http://fixyourfatigue.com) forward slash newsletter to sign up and I will send you this great information. Thanks for being part of my community. Just a reminder, this podcast is for educational purposes only, and is not a substitute for professional care by a doctor or other qualified medical professional.

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