Gina Harney: You're listening to the Healthy in Real Life podcast episode number 38.

Speaker 2: Welcome to the Healthy in Real Life podcast, bite sized tips for healthy living that you can implement right now. Join us weekly for interviews and real life advice for creating the happiest and healthiest version of yourself. Here's your host, fitness expert, author, and mom of two Gina Harney.

Gina Harney: Hey everyone. This is Gina. Welcome back to the show. I'm so excited that you're here today. Thank you so much for tuning in. In today's episode, we are chatting all about chiropractic and functional medicine and gut health with Dr. Barter. I'm so excited for you guys to hear this episode. She has so many awesome tips that you can implement right now. She was so much fun to talk to, so I'm really excited for you guys to hear it.

Gina Harney: Before we head into this week's episode, I'm going to go ahead and read this week's five star review. And this one says, "Awesome. I look forward to each new episode. Gina is positive, relatable, and does thorough research to prepare for guests on the show. I can't wait to see what topics come next. Awesome job." Thank you so much for taking the time to leave that five star review. I hope you know how much I genuinely appreciate it.

Gina Harney: If you guys wouldn't mind taking 30 seconds out of your day just to send that little virtual high five, I would appreciate it so much. Just head to Apple Podcasts, Stitcher, wherever you're listening and leave that five star review, and thank you. I just, it means a lot to me. It helps with the visibility of the show, and I know that I always check out reviews before I listen to new podcasts, so the new reviews always help. So thank you for doing that, and if you do take the time to leave that review, just head to fitnessista.com/podcastreview, so F-I-T-N-E-S-S-I-S-T-A.com/podcastreview, and I'll give you a copy of my Barre Blast workout for free. So just a little thank you gift from me to you. You can stream it, you can download it, it is yours to keep, and it's a combination of traditional bar exercises with heart pumping cardio intervals. So it's one of my personal favorite ways to train.

Gina Harney: Speaking of training, wanted to make sure that you guys knew about the new Les Mills online platform. I love their on demand platform. There are so many classes. They have over 600. There's body pump, body attack, grit, barre, there's a yoga fusion, there's so much to choose from, and all of the instructors are so good. Whenever I take one of their classes, I feel like I get so pumped up by the music, I work harder, and it's just a fun way to switch it up. So if you guys want to check it out, I've got 21 days free of Les Mills On Demand. You'll just go to bit.ly/yaylesmills. So it's B-I-T dot L-Y, /yay, Y-A-Y, lesmills, L-E-S-M-I-L-L-S. I hope you guys love it as much as I do.

Gina Harney: So let's go ahead and head into this week's episode. Today we have Dr. Ann-Marie Barter on the show, and she is on the cutting edge of holistic health care. As a chiropractor and functional medicine practitioner, she helps people get out of pain and reach their maximum potential through her unique approach she has developed after studying under some of the finest minds in her field. She went to chiropractic school at the University of Western States in Portland, Oregon, but when she found out her mother was diagnosed with late stage cancer, they moved to Colorado to fulfill her mother's dream, and she opened her first practice.

Gina Harney: These days, Dr. Barter can be found dancing, skiing, running, practicing yoga, biking, hiking, practicing barre, or walking her Rhodesian Ridgeback, Ritz. Today in our episode, we are chatting all about chiropractic, functional medicine, gut health, some of the common traits she notices in her clients, simple changes every woman can make right now to improve their health, and so much more. She has so much great information and tips. I really hope you guys like this week's episode. Let's go ahead and welcome to the show Dr. Ann-Marie Barter.

Gina Harney: Hi Dr. Barter. Thank you so much for being on the show today.

Dr. Barter: Thank you so much for having me. I'm so excited to be here.

Gina Harney: Yes, I'm so excited to chat with you and learn more about you. So for those of you who have not met you or are not familiar with you yet, would you mind sharing some background info about yourself?

Dr. Barter: Totally. So I have two practices currently. One is in Denver, one's in Longmont, Colorado. And basically, I'm a chiropractor by license, and we also do a ton of functional medicine. And so how I got into this, I'll give you the light and brief story on that. But the big reason for doing or getting into this was because no one could help me figure out what was going on in my own health or my own life, and as ... Being a woman, I remember going to the primary doctor, and I had all these terrible period cramps and acne. And the doc said, "Oh, we'll run your blood work, we'll check on some things. We can probably offer you birth control if your lab work comes back normal. Otherwise, sorry, welcome to womanhood." Well, my blood work came back "normal," and I was offered birth control or Accutane, which my mother was strictly opposed to. So anyway, I just thought it was something that I had to live with for the rest of my life.

Dr. Barter: Fast forward a couple years, I remember waking up and going into my mom's bedroom, and I said, "Mom, my period cramps are really bad today. Do you mind if I stay home from school?" I could barely stand up straight. And she said, "Can you stand all the way up?" And I said, "No, they're just really bad. I would really like to go back to bed." This was quite atypical for me, because I loved going to school. And she said, "No, we're going to go to a different doctor." Well, long story short, I ended up in that doctor's office. That doctor's office sent me to the ER. I had confused period cramps with my appendix exploding. So that's how serious my period cramps were.

Gina Harney: Oh my gosh.

Dr. Barter: And my appendix was actually in the process of exploding, and again, I was told that I was perfectly healthy and that there was nothing wrong with me. So fast forward a couple more years, I was at school, and I started breaking out with hives all over my face and my body. And again, I'm told there's nothing wrong with me. I go into the emergency room, they give me Benadryl, because the hives were actually swelling up in my throat, which can restrict your breathing. And at this point, I'm 19. These problems all happened before I'm 21, right? I'm 19 years old. And the hives were actually swelling up in my throat, and they just would give me Benadryl and send me home. Nobody talked to me about diet. Nobody talked to me about environmental exposures. Nobody looked at maybe what could be causing the bottom line issue of creating my health problems.

Dr. Barter: And so finally I sought alternative medicine, and it was a chiropractor at the time that really helped me get to the bottom of my health complaints. And certain things that I didn't know at the time were my feet. I was a runner and a competitive dancer. My feet hurt so bad, and I'd been from doctor to doctor on that. He fixed my feet with adjusting and helping with orthotics. And then my entire structure system, just getting that flowing again, and I just did not know how bad I felt structurally, and my posture that I would walk around with, it was actually pretty messed up. And then on the other side of things, treating my gut health helped with my hormones, get re-regulated, detoxified my entire system, the list goes on and on. But I just did not know how sick I was. And so that created a passion for me to get into this and to help others that had been basically disappointment after disappointment in the medical system. So that's my passion.

Gina Harney: Wow, and what a beautiful way to turn around such an unfortunate situation and use that to develop the ability to help other people who are going through something similar. I listened to your story, and I feel like that is such a common occurrence in young girls. And I had a very similar situation. I had horrible menstrual cramps when I was young. I started my cycle when I was 11, which was pretty young. But I would get physically sick they hurt so bad, and I couldn't walk around. I had to miss school. And they put me on birth control. And I wish so badly that we would've questioned it and wanted to do a little bit of digging as to why this was actually happening, because I was on birth control for 13 years and then when I finally got off and we wanted to start a family, I wasn't ovulating, and I had estrogen dominance, and all these other things were going on that could've been addressed earlier.

Gina Harney: So I think that's a bummer that it's so common, but what a great way to turn that around and help other people who are going through something similar.

Dr. Barter: Yeah, thank you so much, because it's really important, and I just feel like as women, the bottom line message is that we need to suck it up, or it's not that bad, or, "Yeah, sorry you can't stand up straight," or "Oh sorry you're vomiting. Welcome to womanhood." And that's just the wrong message. Your hormones I think are just telling you, "Hey, something is off," because your hormones are the first thing that go off because you don't need that to stabilize your own health. You would need that carrying a baby into this world. And so if something is really dysregulated with your entire health system, that's where you're going to see it initially.

Gina Harney: Yes, 100%, and also, just because something's common doesn't mean it's normal. So even though we hear about it all the time, it doesn't mean that it's okay and that it's normal. So you're a chiropractor. Would you mind just explaining chiropractic for those who are interested in it but may not have tried it. I feel like some people are intrigued but might be just scared or really unsure as to what it is and how it works.

Dr. Barter: I have a lot of different subsets of patients come in. Some people come in because they're in pain and just addressing the structural piece really helps them. We do a mix here of scar tissue. We do dry needling, we will do cupping work. We also do the manual adjusting. And what's important is when you bend, lift, and twist, a lot of times things go out of place. They can go out of place, for example, a rib, or sitting all day, you can get just microtraumas from sitting with bad posture all day, or sleeping maybe on a bad mattress. You just feel your neck go out. And chiropractic is really, really effective at getting folks out of pain and getting them back structurally aligned and feeling better, and then also addressing the scar tissue piece of it.

Dr. Barter: But I personally use chiropractic in my own life to keep me feeling great. I love athletics. I love sports. And so keeping my muscles balanced to be able to mountain bike better or to be able to run better, I can always tell when I'm out of adjustment because I just don't perform as well, and I feel bad. So it's really effective number 1 A, for pain, but also for just keeping you in good working order. And something that most people don't know that I think is an important thing to share is, let's say you're sitting all day and you're hunched over. Those nerve roots that go to your organs also go to your back. So a lot of times, you can stimulate digestion for example with doing an adjustment, or you can help with acid reflux potentially with doing an adjustment, or constipation, because those nerve roots are so linked up, it'll go from L5 to the colon. So that is also helpful at just getting things re-regulated without maybe having to do a deeper dive into functional blood chemistry or doing heavier duty nutrition.

Dr. Barter: For example, I'll see babies occasionally, and a lot of times, babies when they stop breastfeeding or if the mom's eating something that they're reacting to, babies will become constipated. Just working a little bit of visceral manipulation on their abs, and then also working in their back, and then switching their diet around a little bit, babies will completely have easy bowel movements where they've been very constipated. So I just feel like it's really important for overall health and to feel good.

Gina Harney: Mm-hmm (affirmative), I totally agree. And we actually took our first daughter when she was a few days old, so she was a newborn, but I had noticed when she was breastfeeding, she only liked to do one side, and I didn't know if it was hurting her shoulders, if something got tweaked on the way out. And so I took her to my chiropractor, and she did the tiniest little adjustment in her shoulders, and Olivia's eyes just opened. Like, "Oh my gosh. You got it. I feel better now." You could see the relief on her tiny little baby face. So it was pretty incredible, and I think it's worth mentioning too, not all chiropractic is this violent, intense adjustment process there. I've seen so many chiropractors that are so gentle and they tweak the tiniest thing, and it was like you mentioned before, you don't realize that you felt bad until you feel better, and you're like, "Oh my gosh, I feel so good now." And it's pretty incredible.

Dr. Barter: Right, and I just, I love that what you said about your baby, because it's really important, and it's ... Babies, they just take a little bit of stimulus, and they know. They're so happy to see you. Kids come into my office, and they're super excited to see me, or they ask to come see me when they get a little bit older, which is, that's definitely a testament to that. And you will see just quick changes, like nursing on one side. Because the birth process is very traumatic for both the mom and the baby, right, especially if they're breech, or have the cord wrapped around their neck, or something else went on, or a C-section got pulled out. I mean, it's an aggressive process when you really think about it, so thanks for bringing that up.

Gina Harney: Yes, absolutely. So this is something I have just been wondering. What is the educational process like to become a chiropractor? Whenever I see one, I'm always thinking to myself, "How did you learn how to do this?" When you're practicing adjustments, I just feel like, I don't know. I would just think of something going wrong and be like, "Oh, sorry, I broke you my first time." How does that work?

Dr. Barter: So how long is my education, how long was my education going into that, and how did I learn how to adjust per se?

Gina Harney: Yes, exactly, yes.

Dr. Barter: Oh, I was super terrified. So chiropractic school is a doctorate program. It's four years, so I technically had eight years of school, undergrad and graduate program, or doctorate program. So it was a pretty intensive, intensive program. Lots of boards. I sat for five different sets of boards that were pretty involved, so pretty well sort ... actually, six sets of boards. I clearly blocked that out. But with the adjusting, I'll never forget, I remember adjusting the neck for the first time, and I was really scared because it was just nerve wracking. You don't want to hurt anybody. You want to make sure that everything that you're doing is correct, because there are certain motions that you have to keep.

Dr. Barter: For example, the neck in, or the back in, or ... to make sure that you're doing what the body is okay with, right? Because the joints move in certain planes. So I remember the first time I adjusted a neck being very scared. You don't know what amount of force to put through initially. You are learning the angles that are appropriate in ... So I remember that part of my process being very challenging for me. Also with low backs, I remember also being surprised at the amount of force I had to use initially to adjust somebody's low back that had been, that they've been very inflamed, they hadn't taken care of themselves. And so just learning where the correct limits are. I'm not a very big person, so adjusting is a whole lot for me about skill and having the set up correct, because I ... I'm not, again, I'm very small. I'm about 130 pounds, so, and 5'7". So I'm not hugely big. So that has been, that was a challenge for me, and there certainly, in the adjusting, there's certainly people that are too big for me to adjust.

Dr. Barter: But I get the common question all the time, "Is this going to hurt? Are you going to hurt me," or, "Is this going to hurt?" And I'm, "No, it actually feels pretty darn good," to again, know how great your body can feel. So it's kind of a long, roundabout answer to your question, but yeah, there's quite a bit of schooling involved, and definitely getting over your fears involved with the adjusting.

Gina Harney: Yes, exactly. The last chiropractor that I saw, she was a very strong woman, and she picked me up like a baby almost and just moved me around, and my hips popped maybe 30 times. And I was just cracking up. And she was like, "Why are you laughing?" And I was like, "I've just never heard that many pops come out of my body at the same time." But it felt amazing. I felt so good afterwards. So what are some of the things you think that women should know about functional medicine?

Dr. Barter: I think really, women are the people that seek it out. They are really the decision makers of most of the families, and they're kind of the get-up-and-go. So women will seek it out because they know something is wrong. So I think the first thing that I like to educate people on is, just because you go into your primary care and they say, "Your blood work is normal," and you say, "Well, hey, I have these symptoms. I'm bloated. My periods are off. I'm getting these headaches. I have ...", whatever it is that's going on that you feel like isn't quite ... "I'm gaining weight," is another one, or, "I'm not sleeping well." And they say, "Hey, your lab work is the 'normal'." I just want to educate that the reference range on the side is a standard deviation of the population. So that's a super fancy way of saying, anybody that runs labs in the last year that went to get their blood drawn is how they're comparing what's normal.

Dr. Barter: And most of the people that go get their labs run have some sort of symptoms. Generally, most people aren't proactive and saying, "Hey, I really want to go just get a baseline to see how healthy I am." A certain percentage of the population do that, but it's not very high. Most people seek care when they're not feeling that great. So you're being compared to a bunch of other people that have some sort of symptoms. And so that reference range is what's "normal" or what I like to say is average. And that certainly doesn't mean that you're healthy. So just because your lab work is normal doesn't mean that there's not more that we can do with that, right? So again, it depends on if you want to be like the rest of the population. Do you want to feel like the rest of the population? Do you want to deal with these symptoms? Because generally, there's more investigating that can happen, and as we get sicker and sicker, we're noticing more and more deviations of those reference ranges, right?

Dr. Barter: So I bring up this example just to highlight this. So I live in Colorado, right? And most people have relatively stable glucose levels here. That doesn't tend to be our problem. And so the reference range on blood sugar or glucose is about 99 here. That's the upper end. If you go somewhere like Georgia, it's possible that it's 120 at some of the labs, right?

Gina Harney: Oh wow, yes.

Dr. Barter: Right? And the American Diabetes Association says 126 is considered full-blown diabetes. So there's such a difference in those two locations of what's okay and what's normal, and you're certainly in full-blown what we call metabolic syndrome if your blood sugar is constantly at 120, versus somebody that's at 85, right? So, which is a standard range that we actually like to see, and then we also want to make sure that after you eat, your blood sugar isn't spiking too high, right? 30 points. So, a lot of that is an arbitrary number. So I really like to drill that home, because most women are like, "Why didn't I know that? I just thought I was healthy." And that's originally what I thought too. So I think that's one of the first things. You certainly don't have to live with symptoms. Your body's trying to tell you that something's going on. If you're bloated, if you have diarrhea, if you have constipation, if you can't sleep, if your hormones are dysregulated, that's a warning symptom for your body.

Dr. Barter: And there are other ways, for example, to fix hormone dysregulation that we talked about earlier without birth control, or without hormone replacement therapy, right, which would be considered like a birth control. Not bioidenticals, but hormone replacement therapy. There are a lot of things that you can do to regulate your system. And it's just a warning sign and symptom that something is wrong, and the body's going to get louder and louder, and the earlier you address this, the better you're going to feel, and the easier it's going to be, and the less intervention you're going to have to do with supplements. Because supplements are a supplement to your diet.

Dr. Barter: So I think that those are the big things that I like for people to know about functional medicine. And again, also the other thing that I think is important is, just because your numbers are normal, one thing I have seen in practice is, some women have all these, for example, thyroid symptoms. I see a lot of thyroid. And a primary care runs the TSH and they say your thyroid is normal, and a lot of these women have full blown autoimmune thyroids. But they've never checked those numbers. So sometimes it takes more investigative work if you say, "Hey, I think something's really wrong with my thyroid, but she said it's normal," there can be a multitude of other markers that work together that'll tell us really how your thyroid is functioning, and do you have potentially autoimmune to your thyroid or is your T3 okay? What else is going on? So for a bigger picture.

Gina Harney: Mm-hmm (affirmative), and I feel like conventional doctors, they test more on a macro scale, and functional medicine practitioners, they test on more of a micro scale. So they'll test all of these subtle nuances, and I just, I feel like it's so preferable to, take a couple of supplements and herbs and make some lifestyle changes than just putting a Band-Aid on it with some type of medication that has a whole list of other possible side effects.

Dr. Barter: Right, exactly. And I think the biggest thing is is a lot of women come in on antidepressants, antipsychotics, and all kinds of other hard-hitting, mind-altering drugs to cover up maybe symptoms of mold exposure, that they were exposed to and they felt completely depressed after that, or completely anxious or couldn't sleep. I mean, we've got to look at maybe what's going on. And certainly there are indications for those, but they're prescribed very commonly, much more common than ... And they're very challenging to get off of in the long run. They're the patients that I have the hardest time with, because they're pretty disconnected from their body and what's going on and can't really give me accurate feedback of what's happening. Same thing with some of the pain medications. So it just gets tougher and tougher the more medications you end up getting supplemented with because you become more and more disconnected from your body.

Gina Harney: I absolutely agree. So I know you specialize with helping clients with thyroid and blood sugar issues, gut health, hormone dysfunction. Are there any common traits that you noticed among your clients?

Dr. Barter: Something really super interesting that I've noticed. I live in a very dry state. I see a lot of mold problems.

Gina Harney: Really?

Dr. Barter: So, yeah, mold is a big endocrine disruptor. So patients are relatively pretty informed when they come in and when they see me, so let's say they've had ... They'll come in and they've said, "I've had a chronic candida or yeast overgrowth, and I've had a chronic SIBO infection that I keep taking things for," and a lot of times when people have been chronic, or they have chronic depression or chronic blood sugar swings, I've actually seen blood sugar levels become stable after we started treating the mold exposure. Or depression or anxiety or sleep disorders, a lot of times, the patients have been exposed to mold. Otherwise, the symptoms will really resolve quickly. I think if it's not a mold or an environmental exposure, like petroleum or ... We're all exposed to that. But we have higher levels I think of petroleum up here.

Dr. Barter: We also will see, for example, if you have a gut infection, a lot of times that can affect your blood sugar. And then blood sugar ultimately can affect the hormones. So when we're looking at a case like PCOS, in a case where we would see the woman may or may not have cysts on her ovaries for example. Blood sugar is always a contributing factor, and you have to see what is affecting the blood sugar? Is it just simply diet? Is it that they're drinking a ton of alcohol? Is it that they have some sort of low grade systemic infection? I mean, what is going on with the case?

Dr. Barter: And really, all of these things work together, because in the gut for example, 95% of our neurotransmitters are made, which are our feel good neurotransmitters which help with depression. The blood sugar also can affect, you can feel more depressed or more anxious if your blood sugar isn't stable. So basically, it's looking at the whole system versus going somewhere and saying, "Oh, is it my ... is it ... I have pain in my back, is that related to something structural going on? Do I need surgery here or a cortisone injection and an adjustment? What's going on here?" Or could it be relating to inflammation or your large intestine or something going on with your digestion? It's kind of piecing it together versus looking at different body systems and saying, "Oh, you've got depression. You need a antidepressant," or, "You have neurological symptoms. You need a neurologist." Maybe, but it's also, "What else could be going on that could be contributing to these issues?" So I feel like it all, they all link together, and they all affect each other.

Gina Harney: Mm-hmm (affirmative), and it's kind of a cascade of events too. I read the book Mind of Her Own. Have you read that one?

Dr. Barter: I haven't read her new book, no.

Gina Harney: Okay, it's a very-

Dr. Barter: Is it great?

Gina Harney: Very fascinating, but she was talking about how so often, depression and anxiety is caused from a nutrient deficiency. So it can be B vitamins or omegas, and so many times with her patients, they would just run a blood panel and find the deficiency, put them on their vitamins that they needed, and it alleviated their symptom. So it's just ... It's so crazy how everything is interconnected like that, and also you mentioned the gut and everything that occurs in the gut. I love The Model Health Show, and the host is always talking about how he thinks eventually, the microbiome is going to be referred to as our second brain because there's so much intelligence and nerves and things that happen in there. It's pretty, pretty fascinating.

Dr. Barter: Absolutely, and when you actually are looking at this, I mean, for example, B vitamins. They help with our microbiome and our gut. They help us run Krebs cycles and hormone cycles and all of that. And so all of that plays ... Nutrient deficiencies are really important as well. I mean, that's a huge, great point. And omegas, most people are omega deficient, right? And so they don't have enough omega 3s. I mean, 10 years ago, it was 20 to 1 omega 6 to omega 3, and it should be 1 to 1.

Gina Harney: Wow.

Dr. Barter: And so that causes inflammation, it causes depression, it causes anger issues. I've seen it cause all kinds of problems. And most of the time, let's say someone has a gut issue. They're not absorbing those nutrients, and so then they get these nutrient deficiencies, and then these nutrients are needed to run certain pathways. And then they're not able to do that, so we have this cascade of events, exactly like you said. So in the microbiome, totally is like a second brain, I 100% agree.

Gina Harney: Yeah, so do you recommend probiotics, and if so, is there a brand that you love?

Dr. Barter: Yeah, I do occasionally. It depends on what is going on. So I see a lot of IBS with constipation. So the patients lean more towards that. So the probiotic I actually recommend is called Visbiome. I have seen it cure chronic IBS. It depends on, again, what the case is. So for example, if someone has loose stools all the time or having problems with that where you're really thinking more of a bacterial maybe gut infection or some sort of infection going on, so I don't generally tend to recommend probiotics off the bat. It completely depends on how the patient's presenting. But with the IBS with a leaning towards constipation, Visbiome is really super powerful from that standpoint. I don't find, I haven't had great luck with probiotics in the grocery stores. And not to say that there's not great ones out there. For the specific conditions that I've been treating, I haven't had overly great luck with that.

Gina Harney: Oh okay.

Dr. Barter: And if patients are, they're generally not coming in to see me. So, but that's been the one that I've seen that has been a complete game changer from that perspective. And it's really important ... It's been interesting to hear what patients think is normal to have a bowel movement. You have to be having a bowel movement once a day. That's really, really, really important. It's kind of like you don't take out the garbage. You have to take out the garbage and have a bowel movement for things to work appropriately, right?

Gina Harney: Yes. Absolutely. And you kind of alluded to leaky gut. So if you have that, you're not absorbing the nutrients from the food you're eating. What are some of the clues that you might have a leaky gut issue?

Dr. Barter: I think most people have a leaky gut. A lot of times, you're going to have ... Some people have food sensitivities. Some people have noticed bloating, they ... I think it's just pretty much any sort of gut issue. They can get reflux after eating. That tends to be more of an acid deficiency, that you're not breaking down your food. But if you're getting reflux after your meals, generally you're not breaking your food down. The food particles are too big, and you are tending towards more leaky gut. Any changes in bowel function are going to be more related, you definitely have leaky gut. Other things are ... Neurotransmitter function is really important. Again, those are all made in the gut, so if you're noticing anxiety, depression, difficulty concentrating, you get more depressed in the winter, you have motivation problems, you feel like you're running through lists and lists and lists. Those are all neurotransmitter deficiencies. Specifically what I named off was serotonin, dopamine, GABA, and ACH, and those are made in the gut.

Dr. Barter: And we know that that's a step above leaky gut, when you start to get neurotransmitter deficiencies, right? So it means your gut's very, very inflamed. Other things that I've noticed with leaky gut, people will have an itchy anus after they eat. There tends to be more going on with that. Any sort of bloating, even before a meal, can be leaky gut. It doesn't just have to be after you've eaten. So any sort of, "Hey, something's not right. My bowels are off, I'm bloated, I don't feel good after I eat," any of those things are signs and symptoms of leaky gut. But most people have leaky gut because most people even have pathogens in their gut, or they have dysbiosis of the flora, which means generally they don't have enough, or potentially a parasitic infection, yeast overgrowth, you name it. Most people have some sort of pathogen in their gut.

Gina Harney: Okay, good to know. Yes, it is so common. So what are some simple changes that you think every woman can make right now to improve their health?

Dr. Barter: Yeah, that's a great question. I think ... One of the first things I recommend when a patient comes into practice is, I don't believe in any particular diet being right for everybody. I always get surprised at what certain people react to and other people don't react to, right? So I think number 1, it's doing an elimination diet and figuring out maybe what foods don't really work for you. Like what makes you bloated, what makes you have brain fog, what makes you constipated, what gives you diarrhea. So doing an elimination diet I think is really important to see what's going on with that.

Dr. Barter: The second thing that I think is really important, again, movement is really important. I think that's a tip that most people give, so I won't get too much into that. But exercise really helps us to create also feel good neurotransmitters in our body, which just makes us feel better about every part of life. Something that I do that I'm pretty passionate about is I sauna. So, kind of a random side note, right? So I think saunaing is very important, and I also sweat. Most of my activities are heavy duty sweating, right? So the reason I sauna, for me in particular, is I ran an environmental tox screen on myself, a heavy metal test on myself, a mold test, and obviously nutrient deficiencies. And so for me, what was important was petroleum products showed up really high on my environmental tox screen. And I want to be able to get the petroleum products out, because there is a link between benzene and cancer. And so what I do is, sweating helps you to eliminate those compounds.

Dr. Barter: And so I sit in a sauna for 20 minutes to an hour probably four times a week. So that helps me feel better, it helps me sleep really soundly, and it's using my skin as a tertiary organ of elimination. You can eliminate through your bowels, through your ... from peeing and drinking enough water, which is really important and overlooked. And then I think another important thing is making sure that you have a good water filter, depending on what that looks like. But a lot of these petroleum products can get into the water supply. So knowing what's in your water supply and filtering that out, having a good filter for that.

Dr. Barter: Also knowing what you're detoxing I think is a really important something to note. Do you need to detox even? Is this important for you? So I really like the Great Plains toxicity test, and also their heavy metal test to just see, what do I need to detox? Is there anything that I need to detox? If you live in the country and you don't have a ton of environmental exposures, you may not. That may not be an issue. So I think also just knowing what you're working on. And then, there are nutritional compounds that help us detox.

Dr. Barter: Something else that I do that I recommend highly, just because I live in a quiet and urban area, is I'm a huge fan of glutathione. I'm a huge fan of it. Glutathione binds to a lot of these toxins and to help detox these things out. If you've been exposed to mold, having a mold test, because that's going to generally be missed by a huge number of practitioners. And making sure, because that's one of the first places you want to start, and it's going to mimic other symptoms. I also use Great Plains for that as well. They have a MycoTOX test.

Dr. Barter: And I think ... I also think making sure that you're having a bowel movement every day is really important. Making sure you're drinking plenty of water for kidney health is also really important. And self care, depending on what that is for you, I also think that's important. For me, I love to get work done. I love the chiropractic work. That really helps me stay in tip top shape. The Graston work, the cupping. I also get acupuncture done, and massage. And I also think therapy is really important and talking to somebody. So I think all of those things to be just, to be well-balanced helps. We all need a little bit of support and just to make sure we're being our best selves.

Gina Harney: Yes, I love that so much, and I love that you included self care, because I feel like that's so critical, especially for women, especially for moms, just the people who want to care for everyone else, very often you don't leave much left for yourself at the end of the day. So for myself, my goal is to always to do something that I enjoy every single day. So maybe it's just a walk around the neighborhood with my dog for 10 minutes, maybe it's a hot yoga class, maybe it's getting a glass of wine with a girlfriend. Just something that I can look forward to, because otherwise I feel like the day can just become a series of tasks, and I feel so much better, so much more centered when I make that a priority. I'm excited-

Dr. Barter: I think that's ... Yeah. And I think the number one patient that I see in here is basically what you were just describing, was the woman that puts everybody else first, and they know something's not right with their health, and that is literally the type A, you go to this person for everything, they're the person you can depend on, "Oh, you're moving this weekend? Oh call her." They're the go, go, go kind of driving type, and they are generally the typical patient that I see in here because they're such a high performer that nobody can figure out what's wrong with them because they already perform at such a high level, higher than most of the population. So they're written off as not having problems, and so that's typically what I see, and they're basically operating at 50% of what's normal. And they're also the type of woman, this woman also needs to hear this, is when you take a vacation, you have to go away, or else your garage is going to be reorganized, and that's the vacation, right? So-

Gina Harney: Seriously.

Dr. Barter: It's really important, because it basically, and myself included in this, we never stop, and we never stop to really rest. Rest is critical.

Gina Harney: I completely agree, and I feel like so many of us are guilty of doing that and just trying to fill the gaps in with chores or extra things that you could be doing. But I've even been trying to do that more myself. I went to the library with the girls, we picked out books, and usually if they're occupied playing with toys or maybe watching a movie, I'm cooking, cleaning, doing a show. But the other day I got my book out, and I'm like, "I'm just going to sit on the couch and read for 15, 20 minutes." And it felt so peaceful, it felt so good.

Dr. Barter: Mm-hmm (affirmative). You actually got a break.

Gina Harney: Yes, exactly.

Dr. Barter: Instead of being so scheduled, right?

Gina Harney: I'm like, "Oh, relaxing feels so nice."

Dr. Barter: Yes, very, very important. Very important.

Gina Harney: Yes. So the title of the podcast is Healthy in Real Life. What's something that you do in your own life that's just a sustainable habit that you've been able to maintain that you think just improves your quality of life and your happiness?

Dr. Barter: Yeah, for me, again, I really like to feel how I feel after I eat. What foods make me feel great? What foods make me feel bad? And so I tend to stay away from those foods that make me feel bad. There's no diet specific that I can say, "This is what you need." I eat closer to a more paleo-type diet, but high, high vegetables, little protein. So that's kind of how I eat. Working out for me, that I enjoy a couple times a week, is really, really important for my sanity. And then, like I said, sauna, detox, and then I take ... making sure that I have a supplement regimen that is directly correlated with what I need based on laboratory findings, based on basically nutrient status, based on what I need to detox. And I feel like those are really sustainable changes to actually know what I need to do, that gives me a pathway.

Dr. Barter: And really, take time and spending time with my significant other at the end of the day, I just feel like that's important and just putting work aside instead of constantly being working. I feel like just having a shut down point where I have time that I enjoy with him, so.

Gina Harney: I love that so much. So where can everyone find you online?

Dr. Barter: So our website is short for Alternative Family Medicine, it's alt, A-L-T, fam, F-A-M, med, M-E-D. And you can also find us on social, same place, so Alternative Family Medicine and Chiropractic. We generally tend to post pretty cool stuff up there, and we also have some great quizzes on our web site and more information.

Gina Harney: Perfect. And do you do online consults?

Dr. Barter: We do, we do.

Gina Harney: Oh okay, perfect. So I'll include links to all of those that you guys can find Dr. Barter online and connect with her there. Thank you so much for being on the show. I loved talking with you, and thank you for all these amazing tips.

Dr. Barter: Absolutely, thank you so much for having me.

Gina Harney: Yay, have a great day.

Dr. Barter: You too.

Speaker 2: Thanks for listening to the Healthy in Real Life podcast. For more info, check out Gina's blog at fitnessista.com.