Natural Fertility for Pregnancy, Menopause and Post-Menopause Season 3 Episode 5

(INTRODUCTION)

(0:00:47.7) AS: Hello, welcome to Season 3 Episode 5 of the Insatiable Podcast: Natural Fertility for Pregnancy, Menopause and Post-Menopause with Erin Borbet. Guys, this was a fantastic episode, if I don't say so myself.

I wanted to have Erin on, because she's an acupuncturist and a doula. She can really look at things from a holistic, integrated perspective. Isn't it great when you can go to someone and they know what you need nutritionally, emotionally, *and* if you need to check in spiritually – that's Erin. She really brought this really dynamic, holistic perspective to our talk today.

What I really want you to pay attention to is what she talks about in terms of how to prep your body for fertility, including that you just can't turn it on and off and how important it is for all of us, no matter if we are in the childbearing years, going through the transition of peri-menopause to menopause, and even post-menopause, it's still so important to understand your own cycles and rhythms.

I know with a lot of my clients and myself included, trusting our own timing and getting in cycle with, not always being productive and not always judging if we're ahead or behind us is really, really challenging, and Erin's going to help us figure out that today, or talk about that and ways to think about it.

We also get a lot into the nutrition that needs to happen and how that can change and even as you go through menopause your nutritional needs might change, so



paying attention to that. Lastly, I just loved the holistic perspective; we really dived into the emotional stuff and how a lot of women around fertility and menopause, and especially what can come up as we're transitioning through menopause.

A lot of times we tend to isolate ourselves, and Erin has really important points about building community and reaching out, and especially the type of people that you want to reach out to. I hope this episode helps you no matter where you are in your fertility cycle. Let me tell you a little bit more about Erin and this wonderful offer that she has for people.

She is a transformational health coach, has her master's in Chinese medicine and she's board-certified in Chinese herbal medicine too and is a certified women's herbal educator. She helps women with their hormonal symptoms and she maintains a clinical practice in Victor, Idaho, as well as remote coaching where she works one-onone with clients.

She has trained all over the world; the prestigious Zhe Zhang Hospital in China, NYU Medical Center, the VA hospital, Luther Medical Center in Brooklyn, the Berkeley Center for Reproductive Wellness, New York Fertility Services and seven years in private practice in New York City. She really has a global perspective, as well as a holistic one.

One of the great things about Erin is you can schedule a complimentary 30-minute phone consultation with her at <u>erinborbet.com</u>, E-R-I-N-B-O-R-B-E-T.com, and we will have all of her information and ways to connect, of course, in the show notes at <u>alishapiro.com/podcast</u>.

Enjoy today's episode and just remember as well that I just launched my brand new site. One of my clients said it was a feast for the eyes and the mind. I love that. I can't think of a higher compliment: beauty and an intellectual stimulation. Remember if you



want to learn what your eating habits say about you, I've got a short quiz that'll help you figure that out and you'll start to get tools right away to get unstuck rather than stressed in eating. Check that out at <u>alishapiro.com</u>.

Now onto this fantastic episode.

(INTERVIEW)

(0:04:24.9) AS: Erin, thank you so much for coming on Insatiable today. I'm so excited for people to get your holistic perspective on fertility, given **our season three theme is renewal**, I mean, what more can we talk about? I mean, what's more appropriate than fertility, right?

(0:04:40.9) EB: Yeah. New growth.

(0:04:42.9) AS: I love that. That's part of why I wanted to have you on; you see the metaphors of this. I mean, there's a lot of reasons; first of all your expertise and your experience, but one of the things that I – as I work with younger clients; the millennials and/or even my older clients, well I shouldn't say older, but in late 30s, 40s who want to have children, or people who are even done having children, fertility it's this thing that people just try to turn on and then also only see it through childbirth. There's many layers to this. I would love to get just your overall big picture view of fertility, of new growth as you would say.

(0:05:23.4) EB: Yeah. You're so right on that there are so many layers of it and that I completely agree with you that I feel like what has happened is it has become something that we try and turn on when we want to have a baby and then turn off again, and maybe turn it on for a second baby and turn it off and then keep it on snooze, just like for our lives.



I see that disconnection cause struggle for a lot of women, certainly that disconnection and then whether you're on birth control, or whatever you're doing that has disconnected you from your fertility and then you want to turn on and get pregnant and are maybe having trouble, that's a struggle for sure, but even after you've had your babies and then turning it off again.

If there's symptoms surrounding your cycle, or your cycle is a nuisance, or perhaps there's even real dysfunction that is extremely impacting your quality of life, different things and then that phase gets jumped to conclusions too, where I'm seeing women with hysterectomies at fairly young ages after they've had their babies. All of this affects the rest of their lives and their menopause transition and all of that. **To me, yes fertility is so much more than having a baby.**

(0:06:44.1) AS: Yeah. I would love for you to – almost like a side-by-side, how does Western medicine view fertility and then how do you take it as a traditional Chinese medicine practitioner and a transformational health coach?

(0:06:57.9) EB: Yeah, for sure so. I mean, I feel like Western medicine views fertility very similarly to how it views most things that are happening in the body, like where is the problem and how can we fix it? It's a little bit more test-oriented; blood test, sonograms, there's a million different tests, there's just penograms, like a ton of different things to try and find, so if a woman is having trouble getting pregnant, they can do all these tests to see if they can find the source.

An unfortunate thing that's happening today is this diagnosis of unexplained infertility. Even with all of these tests, everything coming back normal and a woman still finding it not possible to get pregnant easily on her own, very frustrating.

The other thing that can be frustrating about Western medicine I found is that through this testing, there isn't always an easy remedy. When we do blood tests specifically



and let's say someone is testing and they have elevated FSH levels on day three of their cycle, or they have low AMH levels both that would indicate diminished ovarian reserve as they call it, which can impact fertility there's not really anything to take, like there's not a medicine to take to increase your AMH, or decrease your FSH, but there are ways to speed up the process is more the thought behind it.

I mean, I'm a medical doctor, but what I've seen it seems the thought is that, okay well if we just get this woman pregnant faster by stimulating her ovaries, by doing IVF, by doing these interventions, then we have a better chance, because we're running against the clock thing, **but it's not actually treating the imbalance that they found**.

(0:08:46.2) AS: Well, and as you're talking I'm thinking about when we look at these numbers, we forget that they're static, or that they're not static, right? You're getting one data point from one point in time, and I think that's one thing that's so interesting about fertility and birth in women's health in general. It's just been neglected in terms of studying it.

We have these ideas that I always think about a hundred years ago they had these certain health ideas. Now we're like, "Can you believe they believe that?" I'm always like, "What are they going to think about us in a hundred years, if humans are still around?" The earth doesn't antibiotic us before that, that's what I think is happening with the climate crisis.

We're going to just antibiotic you guys. You're not helping the ecosystem. I always think, like what are they going to think about? I remember in *The Atlantic*, there is a study, like an article maybe five or seven years ago, saying that the ideas that we have about how women's fertility are based on 16th century French women. That was the last time that they've actually really understood how long women can get pregnant and whatnot.



When you talk about that, I think that's so fascinating, because if you're someone who goes and gets tested and it's like, "Oh, I have this high FSH level. I have low reserves," and the doctors will tell you like, "There's nothing we can do. This is how it is." Are you saying that you can change your egg reserve? I'd be curious what your perspective is on that.

(0:10:10.0) EB: Absolutely. Well, no. You cannot change your ovarian reserve. You are born with all the eggs that you will ever have in your ovaries. There's nothing anyone can do to change that. What we *can* do is change the quality of the eggs that are there, which essentially translates to increasing circulation, increasing nutrient density in the blood, so that there's good nutrition getting to the ovaries and reducing inflammation. It's very simple, kind of similar to treating most other whatever you're dealing with, illness of other kinds. It's just a more concentrated focus to the ovaries.

There is some recognition that elevated FSH is diminished ovarian reserve, but it can also be attributed to diminished ovarian quality. We know this, because you can see women that change their diets that get acupuncture, that do mind abdominal massage, the take herbs that are really taking an active approach to change the landscape, ovarian quality and their variant health, these FSH numbers go down and back into a normal range, or near it. We know we can't affect the number of eggs so we must be affecting quality and that to me is so exciting because you actually have a lot more control than you think you have.

(0:11:27.1) AS: Yeah. That's so exciting, because it only takes, I mean, for people who want to get pregnant or whatever and I know we're focusing on the pregnancy aspect of fertility, but it only takes one. It's not a percentage and I know that there's lower percentages or whatever, but to know that we can have some control, I think, or at least a chance, right? I wouldn't say control, I would say choices.



Then just to rush through the process, because as someone who's gone through chemotherapy and it's healed their gut, but it's been through a lot medically, I would be someone who's very slow to want to do more IVF type of stuff. I know that everyone's different, right? I'm bringing a different context to the situation, to know that there is more time and more chances is really empowering.

(0:12:09.4) EB: Super empowering. Also using that information to help you make an informed choice so if IVF feels like something that's right for you, maybe lay the groundwork for three months before you do it to increase your chances, right? Change your diet, get acupuncture, do these things that will lead up to that and give you higher chance of success if you could change the landscape before they harvest your eggs and we implant them, you have a much better chance.

(0:12:36.2) AS: Yeah. Let's talk about nutrition, like what you – I mean, we talked a lot about this on podcast and everything, but I'm curious what your view is of your prefertility year – not pre-fertility, because most of our listeners are in 20s, 30s, 40s, 50s, 60s, 70s. Can you give, if we were to take that chunk of time and **how you view nutrition to support fertility, including after you go through menopause**, there's like – your estrogen goes down, you're more confident in your creative abilities.

The patriarchy will tell you you're done. However, I tell my clients this is a birth canal to growing into your – and again, by creativity everyone I think of creativity is a way of thinking. I don't think of it just as painting or singing, and that can be a huge outlet as well, but to me it's a way of thinking and a way of being in the world. I know that's a broad question, but I'd love to hear what your ideas are and what you've seen help in those different phases.

(0:13:32.0) EB: Yeah, for sure. I'm trained in Chinese medicine and boy, I got my degree and my master's in Chinese medicine about 15 years ago. Going into Chinese



medicine school, I had been a vegetarian for almost 10 years. I started in my teenage years and followed it and then went into Chinese medicine school.

Within Chinese medicine, there's a lot of focus on animal proteins, specifically red meat and bone broths in the historical texts as being very nutrient dense and good foods for pretty much anyone's constitution. In studying women's health and fertility and pregnancy and all of these hormonal imbalances, it was a big part of it. Sometimes even animal products ending up in formulas to really change the hormonal imbalance, things like deer antler, and traditionally using placenta. We don't do that anymore, but unless it's your own placenta.

This really changed my like, "Okay, there's a place for animal proteins in nutrition." and it opened my world and I at the time was also experiencing pretty severe hormonal symptoms. I felt like there was a lot of acne and a lot of pain around my period and a lot of irritability. It was amazing. Within a couple months of introducing animal protein into my diet, those things were just gone.

I just felt myself again. I was young. I was in my 20s, but I had energy like I had never had before, I was sleeping better, my skin was clearer. I was like, "Wait, this is the only thing I've done differently." That set me on a path of similar to your passion, I believe whereas nutrition is amazing. **The stuff we can do with what we choose to put in our bodies and buy at the grocery store is so amazing at how we can heal ourselves.**

I tend to be when I'm working with clients struggling with fertility in the sense that they're trying to conceive, I do strongly suggest animal products and a lot of those clients, but I will of course work with vegetarians, or vegans who continued on that path. I do find the most nutrient-dense goods are more of a traditional way of eating. Similar to Weston Price, if any of you are familiar with that, but animal proteins, organ meats, bone broths; these foods have been the foundation of our fertility. They feed the hormones.



Then healthy fats too, which can come from animal or vegetarian sources, but really rebuilding the fat new protein profile for women is amazing for balancing the hormones. I also find if they've been on birth control for any length of time that leads to nutritional deficiencies especially in the B vitamins, you can regain that back really quickly by adding in some pastured grass-fed red meat, or grass-fed bone broth. It just replenishes the body so much after being on birth control.

(0:16:25.2) AS: I love that you share that, because I have so many clients. I figured out why people have conflated vegetarianism and veganism with health, because I use a methodology that there isn't one diet best for everyone. However some people do do really well on a vegetarian and vegan diet, and they tend to be what we think of as, like they're the thinner, taller people what our culture holds up as health, which is they conflate health and thinness.

Everyone's like, "Oh, my God. Vegetarianism is healthy," because we're conflating thinness and health, which aren't – they're not correlated if we look at the research. I just have so many clients who come back to life when we – they've tried being vegetarian and they wish they could be vegetarian. I wish I could be vegetarian. I tried it in college as well. Oh, I was eating all those Morningstar, like soy dogs. I was like, "I'm so healthy." Oh, my god.

(0:17:21.3) EB: Pick vegan, or whatever.

(0:17:23.1) AS: Yeah, but the animal protein and fat, it is where I'm running <u>Truce with</u> <u>Food</u> right now and one woman was like, "Oh, my God. In all my years of food planning, fat has been a no-no," and she's realizing adding it into her diet, she's like, "I can function in the afternoon again." I'm like, "Exactly, exactly." It's such a –

(0:17:43.4) EB: Themselves are happy.



(0:17:44.7) AS: Yeah, yeah. Is that what you think are the – is the main thing is adding in bone broths and I'm assuming grass-fed, pasture-raised?

(0:17:52.2) EB: Yes, for sure, because that's going to have all the extra nutrition. Whereas, factory farms big agro meats are just going to be more inflammatory and lower in nutrition. Similar to your local organic beet is going to have more nutrition than one that came from across the world. It's the same idea with the meat. Yeah, I mean I see it makes such a huge, huge difference, especially during when you talk about fertility being reproductive years.

When a woman is cycling, I do think there is more opportunity, obviously depending on constitution in case, for vegetarianism being easier, like post-menopausel for some women. It's a different landscape then. There's a different rhythm and different nourishment needs, **so you look at the different phases based on what is going on**.

(0:18:43.9) AS: I like thinking of things in seasons. If we think of 0 to 20 is the spring of your life and then 20 to 40 to 50 are the summer, like you need that fiery young meat to power you through those building years, I guess. Then what shifts in perimenopause and menopause in that transition before we get to post-menopause, like what do you see being really supportive for women who are in that perimenopause, menopause transition?

(0:19:15.6) EB: It's so individualized for that transition, because the symptoms are like – I mean, some women go through it without a bat of their eye and other women get put through the wringer with pretty debilitating symptoms, so it really depends. I do find that the women who have had a history of some disturbance in their cycle, whether they were actually diagnosed with something like endometriosis or they just had irregular periods, painful periods, or a lot of PMS, or something that was really



traumatic for them physically and then also probably also emotionally at some point, they tend to have a tougher time with that transition.

Prevention is the best medicine in my mind and paying attention to your cycle and getting things under control knowing that PMS and cramps are not just a normal part of being a woman and they're actually a signal from your body, that there's some imbalance and taking care of that and learning to tune into your signals will be your best medicine as you transition through menopause, because you'll be able to then tune into your hormones at that point and make choices based on that.

(0:20:25.0) AS: Are there any things, and I know it's very individual, and I know even it's very culturally individual, like not a lot of other women in other cultures have the same struggles as American women, because our adrenals and our whole system is taxed, right? There's no social safety net, there's – this is not a country of family values. That's the illusion.

Go to Sweden, which is the most feminist country that we have. You go there, you will see a country that values families. I just want everyone as we're listening, we're always looking at the political structures here and, by politics I mean power, not partisan; got to emphasize that. This country is not a supportive country for women on any type of level.

We have to recognize that, and the more that we can see those structures, the more we can say, "No wonder I need support, or no wonder I need to pay attention to this, because no one's going to do it for me."

(0:21:18.3) EB: Yes. No, totally.

(0:21:19.7) AS: Are there even self-care practices, or getting more sleep? Are there things that can help people through that transition?



(0:21:27.1) EB: Yeah, absolutely. I would say any self-care practice would be awesome. Really tuning into your own intuition, you've alluded to this in the beginning that menopause is very much a spiritual birth, or a spiritual awakening for many women and not all the time, but certainly often when there is significant discomfort, it's your way of shedding and growing and it's just not that you need to exist with the discomfort, but there is meaning behind it, there's opportunity to understand a little bit more, there's opportunity for growth and moving through it.

In my experience, the best way to cope through struggle, whether it's physical or emotional, is getting very clear about your self-care and prioritizing it. It's just as important as showing up for work, or whatever else you need to do in your day. It's not negotiable. Finding that practice and sticking to it will certainly help dissolve some of the symptoms surrounding it, but also get to more clarity on what's underneath them, so that you can really start rebuilding from that root and seeing that go.

Yeah, self-care; that would be nourishment focus typical – I don't necessarily see menopause as there's specific foods that women need to eat. It's not as much as fertility, like you really need nutrient density unless there's a significant amount of deficiency. Cutting out sugar, flour; **there's a lot of blood sugar changes that happen during menopause and post-menopause and a lot of women find that they really don't do well with as many carbohydrates and sugars**.

It might even be really cutting back your grains and your pastas and things like that, and not just cupcakes and cake and sugar and cookies and things, but actually having more of a protein-vegetable forward diet can really be helpful during that transition, and just stabilize the blood sugar, which then balances all the other hormones.

(0:23:24.9) AS: Yeah, again looking at things metaphorically, a lot of the work I do with clients is transitions in general make them – have them "fall off the wagon." I don't



believe there's a wagon. I help them see that there isn't. That transition from work to home, from week to weekend and I think it's so important that what you're saying is during that transition, you're going to want to rely on the same coping mechanisms you have if you haven't worked on transitions before that. This is going from work to home on steroids, right?

(0:23:58.7) EB: Yes. We all get the opportunity to have these transitions. Maybe you haven't had much moments in life to challenge, to have this challenge in this way for you, and it's showing up now right in the menopause. That could be your spiritual awakening transition, or whatever.

(0:24:16.8) AS: Yeah. I think it's really important for women listening, like Erin said, to look at your diet, but also find the self-care that's going to work for you. I define self-care very differently. I'm thinking what are the patterns that are keeping me stuck, all that stuff it's a great time, but it's also slowing down, getting sleep, whatever works for you.

I like what I heard you saying, Erin, **is discernment. Know which do we shed, what do we not, what are we keeping, what are we not?** Almost like the follicular phase of the period, right? What's going to be dropped? What are we shedding? It's that fall season in a way that I love fall. Fall is glorious to me.

(0:24:54.0) EB: I love fall too. It's always very difficult for me though too, which is probably –

(0:24:58.3) AS: Well, it's melancholy.

(0:25:01.4) EB: All the stuff comes up. I'm like, "Ugh." Got to deal with it before winter.



(0:25:07.6) AS: Yeah, exactly. Then any thoughts on, you mentioned sometimes people's diets, I think that's really interesting just to know your diet may shift after menopause, but it sounds like it's more of the yin foods, or I mean, not the real, real yin foods like alcohol and sugar and processed stuff, but more you might be able to go vegetarian then, but you still think the healthy fats are important.

(0:25:31.2) EB: Yes, healthy fats are always important. Being careful, especially post-menopause with carbohydrate load is the biggest thing. If you're going vegetarian, making sure that you're not just eating – a lot of vegetarian cuisine can end up being high in carbohydrates, which can be difficult in that landscape for certain individuals. Just be mindful that is a big one, but also – I mean you can have, if you want to get really specific, you can have different nutritional tendencies in the phases of your cycle too.

Learning where you might be better served, to have warmer foods, more animal proteins, versus in the follicular – that would be the post ovulation phase versus the follicular phase is a little bit easier to tolerate more salads and bright foods and bitter foods and fruits and citrus, some nuts and seeds and things like that.

You can look at the month of your cycle as a rhythm that you can also tap into and follow and make choices about your nourishment for that, and then you can take a bigger look at the full spectrum **and look at, okay what's best during reproductive years and what's best during the transition into menopause and all that**. It's like, there's always a rhythm happening. It's just how closely we're looking in.

(0:26:53.8) AS: Yeah. When you learn on the week, on the month-to-month level, and for everyone listening, we did an episode with <u>Nicole Jardim, Season 2 Episode 3</u> that goes really into detail about the foods and how to adjust based on the cycles. I wanted Erin, who has such a big picture view of things, I wanted to bring her on for the bigger picture of emotional and spiritual as well.



I love what you're saying, it's like if we can get those in the smaller tests and this – I mean, I call them tests and experiments. If we can pay attention to those smaller cycles, we can then extrapolate that out to the bigger ones and say, "Okay, this is what's working." That's what I think is so mysterious and amazing about nature. The patterns are always there, it's how to look for them and it's just about having the x-ray vision to say, "Ah, this is what's happening."

(0:27:39.8) EB: Also like you said earlier, being able to have the vision to see it, but then also to trust yourself enough that you actually know what to do, I see that all the time, where it's like women are intuiting what they need to do, whatever it is they're coming to me for on their hormonal journey, but they're just so afraid to do it, because they don't want to do it wrong, or they don't know if they're right, or maybe they want to talk to an expert.

It's like someone else will have the information they need. I love that you mentioned that at the beginning of this podcast. I feel a little bit of my work is teasing out just getting them to trust and not look for answers outside themselves so often, that they actually already know a lot of it.

(0:28:20.4) AS: They do. It's just, our culture is built on this idea that women are inferior. You are really coming – it doesn't mean it's impossible but you do it in the smaller way, so that when big life choices and transitions happen, you have built up that self-trust and that's self-knowing to know yourself, so that you can then build resilience to trust yourself even more, instead of going down a different path.

It's definitely the <u>Matrix</u>. I feel like I'm really out of the matrix and I'm like, "Oh, that's the clue. You're still in the matrix when you think you're out of it." It's like, "Oh, my God, Ali. There's still things you need to unlearn." It gets easier and easier, because even though you go through that same mystery, like is this going to work? Is it not? Each



time you can look back and say I trusted before and it worked out. I just know this place better and of course, it's for bigger returns it tends to be each time.

Let's gears then in terms of the – I want to **look at the emotional and spiritual levels** of how you view fertility, because in Eastern medicine, or Eastern wisdom, to me medicine and wisdom are the same things, but you can correct me, because I'm clearly not an expert. It seems to me that fertility is about receiving as much as we're growing new things, I'd love to get some of this in explained fertility.

My hunch is that we're not eating enough fat and protein, animal protein and fats. I also think it's the emotional patterns and the spiritual patterns. Again, everything is usually multifactorial. You're never just going to be like, "Oh, take a vitamin D supplement. You're going to be pregnant. You're going to be creative."

(0:29:57.4) EB: Sometimes that works, but yeah.

(0:29:59.1) AS: Okay. Yeah. I see the outlier that I'm assuming. What is your lens on someone who really wants a baby in the worst way and there's unexplained things and IVF doesn't work, or, because you hear all these things of – I mean, I've heard, and again, they're probably the outliers, but people really grasping for a child and then they kind of, "Huh, it's not going to happen." Then a couple years later, they're pregnant. I mean, there's some attachment going on there, but what do you see are some of the themes on the emotional and spiritual levels of fertility flow being blocked, or stagnant?

(0:30:36.1) EB: Yeah, for sure. I feel that's probably the main reason that I focus so much on working with fertility clients is because there's so much just emotional stuff that comes up and I'm constantly trying to find new ways to work with it. I don't necessarily claim to have all the answers on it, but what I've noticed is that – I think as women, generally speaking, most of us are dealing with some level of negative self-



talk and dealing with feelings of unworthiness, or insufficiency, or perhaps part of us broken, or we're not good enough, or whatever, however that translates into our life.

It could be even in small, small ways, right? What I've noticed is that when a woman is trying to get pregnant, and sometimes it can happen the first month she's trying to get pregnant. She hasn't even discovered if it's going to be difficult yet. Sometimes it can be after two, three years of trying and still not having a baby, but it's this **negative self-talk** gets completely amplified.

In addition to really, really wanting a baby, there's so much just **self-sabotaging emotionally** that women are doing to themselves, when they're trying to get pregnant that is somehow a reflection of them not doing things right, not being good enough, not eating right, not thinking the right things, to the point where a common thing that I see in women trying to get pregnant is this idea that if they convince themselves that they don't really want it, then it'll probably happen, or if it doesn't, they won't be disappointed.

What that actually does is it doesn't prevent disappointment, but it just creates all of this internal emotional stagnation, because they're trying to deny themselves wanting something they actually really, really want. They're not speaking about it, it can be very isolating, they won't tell their friends, or their sisters, or their mothers, or their – obviously their partners probably know, but they're not involving people to support them.

It's the perfect storm of just feeling really, really, really bad about yourself and also really, really bad that you can't figure out how to make this dream come true. What I try and do when I see that happening is yes, it's we can set the foundation they can go on the path of nourishing their fertility with all of the things that we talked about, but I want to help them fix how they talk to themselves, because it's really just a pattern that was already existing.



Now as an opportunity, it's words really magnified to actually move through it, so that they can enjoy a different level of satisfaction with their life, whether it's through the fertility journey, or the motherhood journey, or whatever the next journey is, because they're going to be in better conversation with themselves.

(0:33:31.6) AS: Yeah, I look at the inner critic and the negative self-talk from a food perspective and the lens that I look at it there is actually this inner protector side of ourselves when we feel at risk. It's not necessarily all the thoughts we're thinking, it's the side of us that doesn't want to be emotionally at risk. I think there's such this loaded thing of if you can't get pregnant, or if you want to and you can't, like that role – I mean, there's definitely a loss there.

It's also society tells you you're here to be a mom, right? It's like, wait a second, first of all that is not true. You are a person in and of yourself, and you have personhood regardless of your relation to another person. I think that's part of the loss is this was the expectation that – and again, how do we all – we'll never be able to suss out completely what's cultural expectations, because I know some women who know that they don't want kids and they're clear on that and it's totally cool.

I know more of my friends are on the fence than not, but then I know people who really want it and for those reasons, but it's just got to be so challenging to if society has geared you towards this, even if it's part of what you want, which most people do want that. I'm not saying it's all societies once, but there's this, "Oh, my God. What is my identity?" Because people will tell women who don't want kids that they're selfish.

There's all these negative connotations where I'm like, "Oh, my God." The environmental catastrophe happening, American children are not exactly the most selfless thing to be having right now. I say that with compassion. There's these like – there's multiple things happening; there's loss, there's, "Oh, my God. It's me." Teasing



out where it really isn't about you, where it's really not your fault, I guess is my point. It's really hard.

(0:35:21.8) EB: Really hard. Yes, it's really hard. Also, I believe stems with a little bit of the fact that we're so out of touch with our fertility until we want a baby. What I'm curious about is if they actually start educating teenagers about their menstruation and what is actually happening, versus telling them if you have sex ever you will get pregnant, so just don't have sex. It's not actually educating them on the power of their body and what it is doing every month, and how can we look into it.

Then doing that with women again in their 20s, so that they can make educated choices about their own method of contraception, but also tap into their own health. If you can get really confident with your own hormonal landscape, this becomes less of an overwhelming situation when you want to have a baby, *if* you want to have a baby, right? **There's benefit in my opinion to tuning in and learning your own cycle's rhythm as early as possible for many, many reasons other than wanting a baby later. It serves you in many ways.**

(0:36:29.3) AS: Oh, yeah. No, I really like that. After menopause as well, there's no cycles and rhythms, right?

(0:36:35.8) EB: Yes, yes. Tuning in, it's extremely helpful and empowering.

(0:36:41.0) AS: Yeah. Another angle on the emotional question, do you think there's any ever emotional root causes that women can't get pregnant from not just the self-flagellation, or the beating themselves up and of I should – I mean, this is something I'm dealing with right now, like did I wait too long? I'm 39.



It's like you can really go to town on beating yourself up and stuff like that. Are there other emotional reasons you have seen? I would love if you could share any client stories of blocks and then what happened.

(0:37:12.6) EB: Yeah. The client that you – well, not the client, but the scenario you mentioned where like they tried forever and then they stopped trying and then they get pregnant two years later. I wonder if there was just some level of deep acceptance of who they are during two years, and then around a little bit of whatever the tension was could be a possibility. I don't know. You follow them.

I've had this happened with several clients and that's – when they go back to their doctors and are like, "You told me I'd never get pregnant. Look at me, I have healthy baby." I love those stories when you just see – in the whole picture. I believe that we have a – that **our innate intuitive guidance system is intricately linked to our hormonal system**.

Certainly not all hormonal symptoms are caused by – that's not to say that your hormonal symptoms are caused by a lack of connection to your intuition, but if you can connect your intuition, you can dissolve the hormonal symptoms from the root, because you can get clearer about what you need. Then when your symptoms are gone, you can use this rhythm that's happening in your body to make decisions about your life.

I mean, there's even scientific studies that are showing that women end up choosing the wrong life partner when they're on birth control, because their hormones are off, and so their pheromones are different and they're like, "Wait. Why did I choose this person," like on a very animalistic level, right? Not on a "is this a good person," cognitive level.



What I see, answering your question, is that if women as they start to nourish their hormones, see symptoms change, potentially get pregnant, they start to awaken to a new part of themselves and a new awareness within themselves. Sometimes this can be as simple as like, "Oh, I've been eating the wrong foods, and now I'm eating the right foods and I feel completely different and better."

Sometimes it can be, "Wow, I'm in the wrong marriage," or "I'm living in the wrong city," or "I'm doing the wrong work, I went to the wrong education." It could be big, big things and I've seen this happen sometimes under my care and sometimes we get as far as we can and then they're off, and then I hear from them five years later and they're living on an island with a new man and have a baby. This happens. **You have to go on your own journey.**

I have a particular client that comes to mind, who I had worked with for three years to help get her pregnant. I treated her and I treated her husband, and they both were "normal" as far as Western medicine was concerned. They took all their supplements. They were ideal patients, and nothing happened. Then eventually after three years, they stopped coming to see me.

Then she called me two years later and was like, "Erin, I woke up after I stopped seeing you and I realized that I didn't like my life at all." Her and her husband divorced amicably. She ended up taking a job that she wanted versus the job that she should have, took a huge pay cut, but loved her life, she moved to the south where she wanted to be in the sunshine. We were in New York at the time, and the sunshine with greenery, met a new man and now has a healthy two-year-old, and without even trying.

She was convinced that she was completely defective and completely broken, and it was completely her fault and she would never get pregnant or carry a baby. I don't know. That I don't know that I can help her get to that emotional level of awareness



quickly, right? It happens at a different pace for different people. You have to be open to it, you take steps on your journey and you find it out.

I think that's where also learning to be comfortable in your own skin, learning to love yourself along the way while you're trying to have a baby, will help you get there quicker and see where maybe you've been deceiving yourself in some way, or where there's emotional stuckness that you're not allowing yourself to see, when perhaps you're not being vulnerable with yourself, or with people in your life where you need to be, so that you can be more open to that reception. Absolutely. I mean, did that answer your question?

(0:41:29.9) AS: Yeah. No, I love it. I'm always saying to my clients, our work it's about alignment. It's not right or wrong, or whatever, because everyone's different and everyone's got to live their own lives. I see some people's lives and I'm like – that looks so amazing and I'm like, "Oh, but like to travel all the time. I don't do well with travel. I need a routine." Other people might see my life and like, "Oh, my God. What is she doing over there?" No one understands. "Oh, my God. I'm so glad I have a pension and a paycheck." There's no right or wrong.

(0:42:01.6) EB: There's no right or wrong.

(0:42:02.8) AS: It's about alignment. I think what's tricky about this and again, I'm looking at it through the lens of my work is we have this protective side of ourselves that's actually very defensive and a lot of my clients would never think of themselves as defensive people, but think of it as on guard, right?

A lot of that self-monitoring - it's not self-awareness, it's I'm monitoring myself - is to not be at risk. You really conflate what other people want with what you want, because you've just been looking outwardly. That's something that again our culture grooms women for and then there's not in the beginning a whole lot of incentive to



figure it out, until you start getting health issues, or you hit upon something, like infertility.

There's no new growth there and you're like, "Why do I keep feeling –" People will say I feel like I'm dying inside. Often they use that metaphor, but I think it's such a – if we look at through a fertility lens, it's things aren't getting nourished. I went off on a tangent, but what I hear you saying is the more aligned you get, the more life is going to unfold.

I want to make this clear too. It popped into my head, because I think sometimes in the wellness world, it sounds if you're in alignment, everything's going to work out exactly as you want it to, right?

(0:43:13.8) EB: Or that you're like all of a sudden arrived at your forever happiness.

(0:43:19.8) AS: Yeah. That is not joy. I always reference a spiral staircase with my clients on this podcast. I just want people to realize, if you're struggling with fertility right now, or you're in menopause and you're going through it and you're like, this is not about being unaligned and all that stuff, you could be perfectly aligned and still be going through a gritty experience.

I just want everyone to – like birth. I mean, birth is not a – I mean, I've never done it, but from what I hear, it's a joyful time and it's a dig deep type of thing. Whenever I hear high vibes, or you attract, your vibe attract your tribe, or whatever this – Yeah. It's like, that's not how it works. Sorry.

(0:44:04.6) EB: No, that's a great analogy. I have three children, and so I had three home births. It's a thing that I love, because I was a doula for 10 years, and so I just felt like when I went into my first birth, I was like, "I am so prepared. This is going to be just orgasmic and an awesome experience and I'm going to love it." Let me tell you, I did



not at all. It was hard and it was fine. I mean, I was home, I didn't have to go to a hospital, everyone was fine, but it was not – no part of that for me was easy.

Every time I kept thinking it was going to get better, and you know what? It just didn't. It was just really hard and really painful. I had no choice, but to go through it. There was no get out of jail free. I don't know. Maybe I have some deep-seated, emotional blockage that if I could have done that, I would have had an easy birth. I don't know.

I like that you say that there's no doing it perfectly and then getting everything to be smooth. It's like, we all have to go through it together. For a whole life, you have to go through it. If you can find tools that help you when it's tough, then it'll just make it that much easier to get through the tough points.

(0:45:19.7) AS: Yeah. Thank you for sharing that, because I think – Yeah, I mean, I've seen those books on orgasmic birthing, or whatever. I feel like the "natural way" now that it's really trendy, because celebrities are doing it, it's like – this means that if I'm not happy all the time, or if I'm not drinking my greens, perfect green smoothie and with my natural tanner, or whatever people are saying, I don't even know.

It's amazing to me what we – it's like, no if you even think about health and fertility, there's grit there, there's resilience. You cannot survive without resilience. That to me as much as – that health is as much about resilience, as it is being full of life and birthing, and you can't have one without the other.

Yeah, women it's like – again, I always say – I know there's a lot of women's empowerment going on. However, a lot of it is the patriarchy dressed up with lipstick. It's just putting more pressure to have things right or wrong, or perfectly or imperfect. I love this fake vulnerability that people do on social media, right? Where it's like, "Oh, I was vulnerable," but then everything wraps up in a bow nice and neatly at the end of the post, right?



(0:46:32.6) EB: Yes. After I've already figured it out.

(0:46:38.7) AS: Yeah. Not that I'm assuming after birth you're just in blood and you're like, this is a mess and –

(0:46:44.2) EB: Yes. It hurts. You can't sit for a week. It's not glamorous. It's not. For me it wasn't. Some people it is. Yeah. One of my closest fertility teachers, he told me, "You know, women used to get pregnant on the front lines during severe famines and times of chaos," and it's like the body, you're right, it has a grit, it has a resiliency. It's not about doing everything perfect. Yes, there are certain nutrients that we need to be aware of these things, but there's also other stuff going on that we don't have control over. We have to surrender to that a little bit.

(0:47:27.6) AS: Yeah, when I think this comes full circle to the beginning where you were talking about people want to rush into things, rather than giving things time. If we give ourselves time, we know that health is about over time. It's about the patterns that we do over the long haul, and that you go out and have chocolate cake.

I think it's hard to trust that our body's resilience, if we've always been battling food, if we battled our health, if we've had hormonal issues, if we've struggled with fertility, or whatever health – if we struggle with depression and anxiety. **It's because our culture looks at all that as pathology, rather than symptoms**, but if you can say like, "Hey, what's the message here?" I get that that's hard. I'm not trying to say that that's easy, but it can birth you into a new understanding of your power. By power, I mean choice, not oppressive power.

(0:48:12.9) EB: Yes, a lot of that. Yes.



(0:48:15.0) AS: Yeah. Well, I feel once you get out of the matrix, out of it enough, you have to use a completely different vocabulary, because everything has to be redefined, right? Okay, in an unhealthy culture, power means I have power over you. In a healthy culture, power means choice and collaboration and co-creation.

One last question before we wrap-up, what about the spiritual metaphor of fertility and menopause as well? I know we've gone all over the map, but I'd love to get your thoughts on that.

(0:48:44.4) EB: The spiritual metaphor of fertility, like what it means for a woman?

(0:48:49.1) AS: Yeah, yeah, or – and even as we – as women go through menopause and out the other end, what is the spiritual work in each of those time periods?

(0:49:00.2) EB: Great question. I feel the theme that is coming to mind for the whole gamut of basically women's hormonal health is trust as the big one, and really learning to surrender into your own hormonal rhythm and wherever you're at and trust that there is a wisdom to it that is serving you. If you are experiencing discomfort, I think it's really easy to go into the mindset that your hormones are against you and that your body is doing something wrong and you need to find a way to fix it and you need to go get answers outside of yourself to fix it.

That may or may not be true, but the real test in my opinion is despite those discomforts that might be there, or if you're trying to get pregnant and that discomfort to lean in and find the trust in your body, because it is ultimately always trying to move towards health and fertility, like making a baby is health, and that doesn't mean that if you can't make a baby, you're not healthy, but that trusting that your body is always moving in service of the best health for you.



That a symptom is a signal that something is blocking it. Get curious about that and get community to help you figure out how to dissolve that symptom, but don't lose faith and trust in your body at that expense. That's my biggest one. **If you can have** that relationship with your body, then you will have lifetime of access to your power, so that you can make your own choices about your own health, because you will have that deep-seated trust.

Even if you need a surgery, or to take herbs, or it's to completely change your diet, or do something really drastic to get the symptoms to go away, you will have your center and that ultimate trust in your body. That to me is more than anything, and as women, we have an incredible opportunity, because of our hormonal rhythm to constantly practice tapping into that.

(0:51:10.8) AS: I love that. I always joke that the spiritual quest of my lifetime is to trust my own timing. I'm always wanting to get ahead, and trusting I think for a lot of clients and people listening, they tend to be high-achievers. Racing against time has gotten us a lot of great things, right? There comes a time in your life, what was working is no longer working, and I think trusting yourself and what I'm hearing what you say that hormones is it's trusting the cycle, right? Cycle is timing and all that stuff. I think that's really beautiful and important for people.

I like that you said get in community, because I think that's another big part of rather than shutting down, which can facilitate more stress. I also just want to put a plug for reaching out to people who are going to guide you to your answers like you, not people who are going to put you on a formula or a plan. I know that that's when we're most vulnerable.

It's the same thing with dieting. They don't want a diet plan, they want certainty. The diet industry knows that; they prey on that. The same with Western medicine, it's big business to rush you into IVF, or to get you a hysterectomy, and that's not my domain,



so I don't know intricacies. I think what you're saying is if we can get ahead of it in terms of just tuning in now, and working with people who will give you – will bet on you. I always say bet on yourself.

With the right guidance, you can figure it out. I would put a plug in for that as finding people who will help you find yourself and your center. I love that you said that, that finding your center, I think most people realize that they don't need everything to go right as long as they're attached to that center, right? You start to realize –

(0:52:54.0) EB: The right for yourself. You're right. Choosing the team of people around you that helps you – that supports that process, because it's a lifelong process. You never arrived and now I know myself. Really practice, so you're never done, I don't think anyways. I don't know that.

(0:53:13.0) AS: No, you're not.

(0:53:17.4) EB: It's getting comfortable with that and then recruiting the team, and then you can make choices, whether they're low intervention, or high intervention, it's not really about that but, it's making from the right place. Not out of fear, or like you said, a quick fix, tuning in and what does your body need what do you feel is the right call.

(0:53:37.6) AS: I like that you mentioned that sometimes high intervention is the right choice, because this is not – I've never been like, "Oh, all natural," because to me the people who want do everything all natural are just as dogmatic as the people who just wanted drug yourself. It's like, wait a second, life is mysterious, fertility is mysterious.

I think what you're saying is if we find our center, we can go in to be the best prepared for whatever unfolds. Fertility is such a highly individualized choice. There's no right or



wrong, and it's just important that you're following your truth, I think at the end of the day.

(0:54:13.8) EB: Yes, agree. I hope people question my herbal formulas question just as much as a prescription from their doctor. It's like, you've got to take both. One isn't better than the other, but you've got to tune in and see well, what is it that I wanted? What is it that I need? What is it that feels the right next step for me? Because that is powerful. That will augment whatever formula, or whatever prescription you take, that self-awareness and self-confidence, so yeah.

(0:54:45.1) AS: It just popped into my head that I want to ask you one more question. I always call it one more time Ali growing up, because I was one more lick of icecream, one more ride on the slide, but as you were saying that, **how do you tap into what's right for you?** Because when I was first trying to tap into what's right for me, I would feel like I had the answer right away, and then I would always pick like again, this started with me unlearning dieting and exercise, but I used to pick the striving choice, like the challenging choice and I have since learned that when my – I have to let everything settle for a couple days, because then my real intuition versus that frightened part of me.

We're always going to have the fear-based part in our – it just gets smaller and smaller. Then the trusting side gets louder and louder, but from – I would love to hear your opinion and for listeners, what I've learned works for me is letting a choice sit for a couple of days, like getting the information, whatever it is, letting it I say like watch over me, processing whatever and then not what makes me feel contracted and not what makes me feel like I'm holding my breath, but that just right, like okay, this is what it is, versus that gearing up that I used to do with diets, or exercise.

It's more like, "Oh, this fits like a glove." It may be a little pushing my edge, but it's not so much that I'm going to end up biting off more than I can chew, because when



you're drawing that metaphor to decision-making processes, as you get more information you will start to make different choices, versus going to the extreme. Also if something feels contractive, I always tell my clients like, "What feels expansive in your body? Not super expansive, but what feels like, 'Huh, that's interesting, and that that's something I want to pursue.'" That's my process, but I'm curious what yours is.

(0:56:26.1) EB: I love that. Definitely part of that. I feel like waiting to make a choice is my best ally, for sure in just having that clarity. Oftentimes, I feel the voice was actually there in the moment, but I never would have listened to it for some reason. I'm getting better at being like, "Oh, I know what I should, do but I'm still going to wait two days to make sure." Got to be careful.

I also feel like, and especially when it comes to fertility, I think it's important – there's different seasons. For me right now, as a mom of three little kids, my time is incredibly slim and I'm working and all these things. To me, when I feel I need to get back on my intuitive center, self-care practices that I can do at home in a short period of time, like meditation for five minutes a day, like if I just commit to that for a week something completely shifts and I'll get really clear on something, but it has to be easy, versus before I had kids and I was a little more – I had a lot more freedom, but I was also a little more curious and a little more uncertain about even my own physiology, it was super helpful to have appointments.

I would go to massage therapists and go to acupuncturists and herbalists and naturopaths and homeopaths, and maybe even midwives too. I was just a gathering information, but also support was really, really helpful of me getting out of my own head. Rather than sitting around trying to meditate and not be anxious, it was helpful for me to go see someone, get their perspective and then go see someone else, get their perspective and allow my own curiosity to digest information and be like, "That really sat well, that really didn't. I want to know more about that." Just be curious to learn more about your own physiology, but then also your own process of finding your



intuition and finding your confidence. I think it depends on your life, what works for you, but that was helpful for me.

(0:58:33.3) AS: Yeah. I think something really dynamite that you said was in the moment, I actually got what it was, but then I just had to you know. I do accept it myself. Like, "Really?"

(0:58:50.3) EB: Yes, yes.

(0:58:52.2) AS: Wonderful. Erin, where can people find more about you? How can they connect with you? Please share with everybody.

(0:58:58.6) EB: Yeah. My website is <u>erinborbet.com</u>, that's B-O-R-B-E-T, E-R-I-N-B-O-R-B-E-T.com.

(0:59:05.8) AS: Like sorbet. That's why I said.

(0:59:07.4) EB: Like sorbet. Yes. I do remote health coaching for women struggling with hormonal imbalance. It's all one-on-one, and we do nutrition and herbs and these lifestyle things. Then I have a private clinical practice in Victor, Idaho, our small mountain town and do house calls around Jackson Hole, Wyoming for acupuncture and herbal consultations. I'm on Instagram as well <u>@ErinBorbet</u>, and you can connect with me there or sign up for my newsletter through my website, which goes out once a month.

(0:59:38.7) AS: Wonderful. Thank you so much for your time, Erin. I've learned so much. Thank you.

(0:59:44.3) EB: Thank you, Ali. This was fun.



(END OF INTERVIEW)

(0:59:49.7) AS: Thank you, health rebels for tuning in today. Have a reaction, question, or want the transcript from today's episode? Find me at <u>alishapiro.com</u>. I'd love if you leave a review on <u>Apple Podcast</u> and tell your friends and family about Insatiable. It helps us grow our community and share a new way of approaching health and our bodies.

Thanks for engaging in a different kind of conversation. Remember always, your body truths are unique, profound, real and liberating.

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