



Transcript: #418 What Is Your Hormonal Archetype? with Shawn Tassone

Wendy Myers:

Hello everyone. I'm Wendy Myers of myersdetox.com. Welcome to the *Myers Detox Podcast*. Today, we have a great show on the truth about hormones. My friend, Dr. Shawn Tassone is an OB-GYN. He's a brilliant doctor that talks about integrative medicine, functional medicine, bioenergetics, and a diet and lifestyle to address your hormones. We talk about the birth control pill and about hormone replacement. We talk about testosterone being the number one deficiency when it comes to hormones, we talk about toxins and how they affect your hormones. We talk about a lot of different issues when it comes to hormones and hormone balancing, and essentially the truth about hormones. You have gotta listen up. This is a really, really good show if you're concerned about hormones or having trouble balancing your hormones. I know you guys listening are concerned about your heavy metal load, your toxic-load, and how that can impact your hormones.

Wendy Myers:

The research does show that heavy metals, chemicals and pesticides have a dramatic impact on your hormone levels. Dr. Shawn Tassone talks about how xenoestrogens or fake estrogens are five to 10 times stronger and act on your hormone receptors five to 10 to times more than natural estrogen. It's a real problem in our environment today. It leads to fertility issues and so many symptoms related to hormone imbalance. If you want to take my quiz at heavymetalsquiz.com, it will tell you your relative level of body burden of toxins and what to do about them. You get a free video series after you take the quiz. Just go to heavymetalsquiz.com and you'll get all the frequently asked questions answered when it comes to heavy metal and chemical detox. Our guest today, Dr. Shawn Tassone, has an MD and a PhD. He's known as America's holistic gynecologist.

Wendy Myers:

He's the first physician in the US to be double board certified in obstetrics and gynecology and by the American Board of Integrated Medicine. In addition to

holding a medical degree, he has a PhD in mind-body medicine. He's a practicing OB-GYN in Austin, Texas. He's a hormone specialist, an author, a speaker, a highly weighted patient advocate and a creator of the world's first integrated hormonal mapping system. In his 20 plus years of practice, Dr. Tassone has seen over 40,000 women and he's determined to remove the myths surrounding women's health.

Wendy Myers: As an integrative health practitioner, he believes that you should have an active role in your own care, not leaving it just up to your physician. His work includes studies and publications on hormone imbalances, spirituality, medical care and whole foods to heal the human body, in addition to integrated medicine. Dr. Tassone is featured in many publications, including the New York Times and NBC News Online. His book, *The Hormone Balance Bible* published by HarperCollins, is now available for purchase. You can learn more about Dr. Tassone and his work at tassonemd.com. Shawn, thank you so much for joining the show.

Dr. Shawn Tassone: Thanks for having me. I'm super excited.

Wendy Myers: Why are you so passionate about helping women with their hormones?

Dr. Shawn Tassone: It's an interesting question. It's a legitimate question obviously being a male, I obviously get that a lot. What I like to fall back on, is I think the reason that I am where I am today is about 20 years ago, my mom was diagnosed with ovarian cancer. I was already an ObG resident at that time. I was in my second year but I was kind of in that mold still of, it's embarrassing to say it, but we used to say, "You heal with steel." That's a surgeon kind of mentality. When my mom got sick, I knew it was bad. Ovarian cancer was never good but what I found was, five years later when she passed away and I'm the only child, I kind of got caught up in that whirlwind of being not just the son, but a physician. I found that as the physician, I couldn't help her.

Dr. Shawn Tassone: I couldn't do anything to not just help her survive, but to lead a good life, to be happy and to help with the aches and pains. When she passed away, I kind of felt a little bit worthless as a doctor. I was like, "I couldn't even do anything to help my own mom. What am I going to do for somebody else's mom?" So I just started this little journey of my own, where I did a two year fellowship with Andrew Weil at the University of Arizona, and then I did a five-year PhD where I basically just toured around South America and hung out with indigenous shamans. I learned different ways of healing.

Dr. Shawn Tassone: I think the culmination of all that was more of a personal journey. I didn't know that I was going to be using it in my practice, but I think over time, it just kind of morphed into how I do things. I still do surgery, I do robotic surgery, but I also can tell somebody to use yarrow flower for heavy periods, or we were talking earlier about NES Health and refer patients for energetic evaluations and stuff like that.

Wendy Myers: Fantastic. You focus on hormones. What are the top hormonal imbalances that women suffer from, that you deal with?

Dr. Shawn Tassone: Far away, no question across the age spectrum, testosterone deficiency is number one. I used to think that it was going to be estrogen dominance because of obesity, xenos, food and things like that. The reality is, testosterone deficiency from birth control pills all the way up through menopause, is a massive plague of the 21st century for women. It really isn't talked about a lot. If it is talked about, the doctors that are doing it are making gobs of money putting in pellets, which I'm not a huge fan of. I think there's better ways to do things. Those two, testosterone deficiency and then the other one I'm seeing a lot now is subclinical hypothyroidism.

Wendy Myers: What is the number one thing that you feel is contributing to these hormone deficiencies and hormone imbalances? What is the underlying root cause?

Dr. Shawn Tassone: First of all, definitely other medications. From birth control pills being one of the biggies to things like blood pressure meds, weight loss drugs, antidepressants and things like that. Second, is going to be just diet. I think our diet, as we all know, you live in a place where there's probably a lot of great food. We all do, but it's cheaper to eat badly a lot of times. The obesity rates go up and up and up and that throws the hormone levels off, throws thyroid off. I think the amount of inflammation that's in the body, and inflammation is a word that we throw around a lot, but inflammation coming from even things like gluten and bread and things like that can definitely be adding to it.

Wendy Myers: What about toxins?

Dr. Shawn Tassone: Yeah, there's a lot of the endocrine disrupting agents, whether it's pesticides or possible xenoestrogens in the food supplier, in the water and then we are surrounded by plastic all the time. Leave those water bottles in your car and they get hot. I can't remember the number of toxins in a person's body, it's well over 150 at any given time, in different quantities. Even from the food we eat, like certain fish, they're just not clean. It's rampant in our country.

Wendy Myers: I fully believe a big cause of hormone issues are metalloestrogens, hormone disrupting chemicals and pesticides. It's such a huge problem. How does your approach to health and hormones differ from other physicians in your field?

Dr. Shawn Tassone: I just saw a lady, a minute ago, who was told her hormones were normal. The reality is I kind of liken normal to you're either in the house or you're not in the house. The question then is, where are you in the house? Especially with testosterone. You can be in the house, but you could be laying on the floor in the basement. Which may not feel particularly good. Just getting you up into the middle of normal could be a lot better. So I tend to look at things not just as normal or abnormal, but then where are you in the normal range? Things like

estradiol and progesterone have a balance, and making sure that the amount of estrogen that you have for progesterone is kind of in an area where I find most women to be most comfortable.

Wendy Myers: What's the difference between integrative and traditional medicine? A lot of women go to conventional doctors and they'll put them on the birth control pill or hormone replacement, automatically, if they have low hormones. What is it that you do differently?

Dr. Shawn Tassone: We've got the names now, integrative, functional, lifestyle and all these things. Integrative medicine to me, means that I have just learned a little about a lot of different treatment modalities. I know some about chiropractic, I know some acupuncture and I know just enough to make referrals. What I've tended to do over the last 20 years, is what would be ideal in an integrative practice. On Fridays, to have a sit down table where you have a homeopath, a naturopath, an MD and a chiropractor. You put this patient out, and everybody gives you a little tidbit of what they would contribute to her care. Then you give that to the patient and let her decide what pieces she wants to put in place because obviously, I can't do that. What I've done is I just have to know enough to say, "Yeah, I think this might help," like for pelvic pain or something, "You might benefit from some chiropractic or some acupuncture."

Dr. Shawn Tassone: I have built a network of providers that I trust that I would refer to. I kind of am like the quarterback, seeing if I can get her to the right places. Then, in kind, those providers will also refer to me if they think she needs hormones versus say functional, which is more doing different types of testing and then interpreting the test. I do a little bit of that too but I would say I'm more of an integrated base practitioner.

Wendy Myers: Okay, great. What are the ways that you approach hormones? When a patient's coming to you, how do you try to balance or improve their hormone levels?

Dr. Shawn Tassone: I look at hormones as being kind of a six step process and only for one of those steps, do you actually need a physician. The other five are self-care. I look at things through the lens of a spiritual practice, whether that's journaling or praying, whatever it is you like. I have different things in the book that I wrote for different imbalances. Hormonal modulation is the one step you would actually need a physician for.

Dr. Shawn Tassone: The third thing being what I call, infoceuticals, in my book. Which you are way more familiar with than I am, the energetic aspect of medicine and unblocking blockages, but for NES, that's the drops of water, energetic integrators and things like that. I barely touch on this in the book, because it's obviously such a huge topic. For some people, Reiki, healing touch, acupuncture, energetic essential oils and things like that. Nutrition is obviously a huge piece of hormone imbalance. If I had to pick one thing that I feel would be at the bottom of that pyramid for hormone balance, it would definitely be nutrition, exercise and then

proper supplementation. You can choose a cadre of those pieces or you can choose one thing at a time. It gives women more options.

Wendy Myers: Okay, fantastic. The bioenergetic aspect is amazing, because I addressed my hormones using NES Health. I found it to be incredibly effective. It really helped to control hot flashes I was having and other uncomfortable symptoms of menopause.

Dr. Shawn Tassone: Yes.

Wendy Myers: You came up with a hormonal mapping quiz. How did you come up with your 12 archetypes that are in the hormonal mapping quiz?

Dr. Shawn Tassone: What I noticed was, over the last 20 years, I jokingly say, "I'm kind of a blue collar practitioner." I'm just a pretty simple person. I try to keep things as simple as possible. If I was talking to women about certain hormones, like, "Oh, your testosterone's low," it wasn't as connecting as if I started telling them the stories of the other women that I'd heard. What I noticed was these consistent lines coming through with women that had low thyroid or high thyroid, or low estrogen or high estrogen. I started to just kind of put those together. I noticed over time as I was talking to women in these archetypes about these stories. I had about 12 of them, some were way more common than others. When I would talk to women in these lines, I would just see light bulbs go off like, "Oh my God, that is me."

Dr. Shawn Tassone: They could connect to it versus me just saying, "Oh, it sounds like you have low testosterone." They could connect with it, but the story just made it that much more special. So the quiz, everybody's got a quiz, everybody's got a five or 10 question quiz. Mine's about 36 questions. The thing that's different about it is that it's a graded response. So, "not like me", "sounds totally like me" and then on the back end, it's also weighted in the sense that if you have insomnia, I have a higher weighted scale in the progesterone archetype. It's very mathematical on the back end. I majored in math in college, so I'm kind of a nerd. I really spent a lot of time on this algorithm. When you get the quiz results, it's not that you didn't necessarily score in some other archetypes as well, but you're getting the one that had the highest number based on your answers.

Wendy Myers: Okay, great. Great. As you mentioned, a lot of women need testosterone replacement. A lot of women have low testosterone, especially as they get older. Can testosterone potentially save a woman's life? Is that recommended? Is it something that you recommend often, and what type?

Dr. Shawn Tassone: I always say with hormones in general, the only two hormones you need to necessarily survive are cortisol and thyroid. The others, you don't need them to necessarily live, but you need them to live well. Testosterone, for a woman, is hardly ever talked about but it's responsible for muscle mass and bone density. If it's super low along with estrogen, it can really contribute to osteoporosis.

Testosterone for a woman is also hair growth, it's a feel good hormone. I often say low testosterone, if it was a t-shirt you would just say, "Meh." Like, you just don't care. "I can do it, but I don't really care," but who wants to live that way? I just had a lady say she hasn't felt this good in seven years.

Dr. Shawn Tassone: She's like, "Well, how long can I be on hormones?" My answer is, "Well, how long do you want to feel good?" Women feel like they shouldn't feel good. That's what I find fascinating in being a Gyn, is that I do feel like there's this undercurrent in our society that it's okay for women to suffer. Men, not so much, but women, they can suffer a little bit. It's like I said, "How long do you want to feel better? If you want to feel better, then let's feel better, it's okay." I often try to get women away from this aspect that while they are on a medication, they're just hormones that you'd normally have in your body, being a bioidentical. They look very similar, exactly as your body's natural hormones. If you think about it, it's not like you're taking Motrin every day for the rest of your life. You're taking a hormone that has positive benefits to your body as well.

Wendy Myers: What about the other hormones? So many women have this conundrum where they have low estrogen production in their body but they have estrogen their labs?

Dr. Shawn Tassone: Well, the thing with xenoestrogens is if we talk about a lock and key, xenoestrogen is close enough to estrogen to stimulate the receptor in your body. The problem is, most times, they hit that receptor five to 10 times harder than your natural estrogens. So with the xenoestrogens, a little can be a lot. Over time, you can stimulate. What happened was, 20 years ago we were giving women Premarin, which is a xenoestrogen, it's horse urine. We were noticing, when we combined that with progestin which is a fake progesterone, we did have an increase in breast cancer rates but we're talking about two medications that aren't natural to your body. We found that we don't have that same aspect when we use natural estrogen and progesterone, that we've seen so far. They've followed women for the last seven years and they haven't seen that increase. You have to just remember that if you're taking a xenoestrogen or xeno progesterone, you're stimulating those receptors and that breast tissue, that uterine tissue is so much harder.

Wendy Myers: What about when it comes to people's labs, women's labs? So many women will be estrogen dominant because of xenoestrogens and then have low estrogen levels, in their lab work. Can you talk a little bit about that?

Dr. Shawn Tassone: The problem with lab work is that they usually will order only estradiol, estrone, and estrinol. The three estrogens. You could have xenoestrogens that don't even get picked up on a blood or urine test, because we're not necessarily testing for those estrogens. You have to test for ethinyl estradiol or whatever that xeno is that you're taking or that you're consuming. You have to be a little bit careful. The point is you don't just look at labs, you also look at symptoms. Some women

will actually have estrogen dominance, even when they have a normal estrogen level.

Dr. Shawn Tassone: Not because their estrogen is too high, it's because their progesterone is too low. You can have a combination where your estrogen could be too high and you have low progesterone, which is even worse. Sometimes, even just having a normal estrogen level, your progesterone isn't rising to offset the effects of the estrogen every two weeks out of every month. A lot of women that have had a hysterectomy, they're on bioidentical estrogen and they're not on any progesterone. That could put them into an estrogen dominant state just because they don't have the benefit of progesterone.

Wendy Myers: Let's also talk about when women get labs, they do their labs with their typical conventional medical doctor. They're told that their labs are normal, but they're struggling day to day. What's the next step? What should they do?

Dr. Shawn Tassone: It's really frustrating, you know you better than anybody else. I always say, "Normal isn't always normal," in the sense that maybe it's not your normal. The way that they find normals on lab work, let's say it's a free testosterone, free testosterone is 0.1 to 6.4, that's normal. What they do to get that range is they'll say 10,000 women came in who didn't have any complaints and we drew their blood, and these 10,000 women came in in this range. We took out the top 5%. We took out the bottom 5%, and this is what normal is. Now, that's not to say that 200 of those women weren't having fatigue but they weren't asked the right questions, or they didn't know that that fatigue was related to their testosterone so they don't really look at the symptoms at the same time. What happens, is you'll be told, "Oh yeah, your testosterone is normal. Your thyroid is normal." Well, with thyroid, they could just be checking a TSH, which really is a horrible indicator of your thyroid health.

Dr. Shawn Tassone: You really need to look at the actual thyroid hormones. I can't tell you how many women I check will come in with a testosterone of one, free testosterone of one. Now, I could multiply that sixfold and it would still be normal. But you might feel like a totally different person, even having it go up two points. It's one of those things. Small changes in hormones sometimes can make massive shifts in the way women feel. We think of men's testosterone, and you're talking about these big, whooping injections once a week. That's because guys have testosterone levels that are 10 to 20 times higher than women, in most cases, sometimes more. They need more dosing but sometimes just little fluctuations can help immensely.

Wendy Myers: What about the birth control pill? A lot of doctors prescribe the birth control pill to even out the hormones. Is that a magic cure-all, and why or why not?

Dr. Shawn Tassone: I'm kind of middle of the road when it comes to birth control pills. I think birth control pills for birth control use are fine. That's what they're made for. Now, you need to know what the side effects are and what the potential risks are, as with

any medication. The problem that I have with birth control pills is when they're prescribed to women for problems. Like, heavy periods, PCOS, pelvic pain or endometriosis. It's not fixing anything, it's taking over your ovulation and it's faking a pregnancy in a sense, so that your body doesn't ovulate. The problem with that is you might feel better and that's okay. I have got a couple patients who just don't want to come off of their pills because they're afraid of the pain that they used to have.

Dr. Shawn Tassone: If they're not having any side effects and we're looking at their electrolytes, their zinc and all their stuff, then I want them to be happy. I would be more than happy to keep them on those, but I wouldn't just willy nilly put someone on them until I knew exactly what I was dealing with. In most cases, for say heavy, bad periods, if we can rule out structural issues, sometimes high doses of flax or fish oil with some magnesium and some maca can change somebody's life. They don't need to be on a birth control pill. I think that they're overprescribed. I think it's because it's a much longer discussion to talk to somebody about taking supplements and eating right, than it is to just put them on a birth control pill and we've gotten into that. I think for women, if they don't want birth control, they may keep fishing until they find somebody that actually will dig a little bit deeper.

Wendy Myers: And so you have a protocol called the S.H.I.N.E.S Protocol. What can women learn from that and can you explain that a little bit more in how you use that to approach women's hormones and balancing them?

Dr. Shawn Tassone: That's the steps that I was talking about. Spiritual practice, hormones, infoceutical, energetic information, nutrition, exercise and supplements. Each of the 12 archetypes has a S.H.I.N.E.S Protocol. It could be something like, for instance, low cortisol which I call the saboteur, because those women have sabotaged their own health because they take care of everybody else and they don't take care of themselves. Over time, they used to be workaholics and now they're kind of burned out. They've gone into this self-sabotage phase. Let's say a spiritual practice for her might be learning how to say, "No," because those people tend to have, "Yes, yes, yes. Job, work, kids, whatever." Hormonally, we might want to look at her thyroid, testosterone and other hormones, because usually by the time cortisol hits the skids like that, it's because all the other hormones are now worn out and this is the last one to go.

Dr. Shawn Tassone: The energetic aspects, you can talk about the energetic integrators and I think nine or 10 is the ovarian-hypothalamic-pituitary axis. You can try that or acupuncture. For nutrition, obviously I want those women eating high fat, high protein, low processed foods. Actually, what's interesting, exercise for that archetype is to not exercise too hard. These women, they probably already gained a little bit of weight and they want to get out there and do cardio and stuff but you don't even have a candle left to burn.

Dr. Shawn Tassone: A friend of ours talks about this openly on her YouTube page, Flipping Fifty Debbie Atkinson. She had this issue, and she works out for a living. That's what she does. I had to tell her to stop working out and she flipped out on me but she ended up losing weight because she slowed down. Sometimes, you just have to listen and look at the labs. Then supplements, obviously for somebody like that, adrenal complex with maybe even some glandular cortisol in there, some ashwagandha, rhodiola and some other things. Each of the archetypes, the great thing about it, is you can pick one, you can focus on one and go deep. You can try a couple, it's really up to you and how you want to do it.

Wendy Myers: Okay, great. You outlined all this stuff in your book, *The Hormones Balance Bible*. I love the name of that. Can you tell us a little bit more about what someone could expect when they're reading your book and the kind of tips they can get from it?

Dr. Shawn Tassone: The way the book is laid out, page 14 is a QR code. There's a quiz and you can take the quiz if you want. It's free obviously, or you can get your blood drawn and that's another way. Obviously, the quiz is not as scientific as actually having labs but it's free and it's something you can do at midnight when you're bored. The way the book is laid out, it talks about each of the hormones and what they do, and then how to test. It talks about urine, saliva and blood.

Dr. Shawn Tassone: Then it goes into the actual archetypes. Initially, the archetypes chapters are set up by symptoms, a story, how you feel and what to expect. Then the second half of the book is the archetypes and each of them in their S.H.I.N.E.S Protocol. The thing about the book is it's about 500 pages. There's a lot of information. It's not necessarily meant to be read from front to back although, I have a lot of people do that. It's because your archetype can change over a couple of years. You could be high in estrogen when you're 49 and low in estrogen when you're 51. It's one of those books to just keep on your shelf and use it over time. You can take the quiz as many times as you want.

Wendy Myers: Okay. Fantastic. Yeah and I love, love, love and totally respect that you talk about bioenergetics in your book.

Dr. Shawn Tassone: Not nearly as proficient as you are. It's a difficult topic, it's a lot.

Wendy Myers: Yes, it is difficult for people to get their minds around, but I think people are definitely more open to new ways of approaching their health. I just love it that you're exposing people to that as a medical doctor. I think it gives a lot more wheat to people that are skeptical, so I love that you brought that up in your book. It's fantastic.

Dr. Shawn Tassone: I think the way that I look at it too, is it's not such a big stretch to think, "Oh, if you're stressed out, you have a headache." Yeah. Well, if you're stressed out for a long time, your estrogen, testosterone and thyroid can be thrown off too,

because you don't need those hormones to live per se, so your body's going to shut your hormonal system down because it needs the energy to digest food and pump blood to your brain and all that. Hormones tend to be one of the first things to go when you're not living the life that you need to live. I think we just need to make it more accessible, so you don't always have to go to the physician. You can try some things and if you need us, we're here.

Wendy Myers: Fantastic. Tell us about your website and where we can learn more about you and your work.

Dr. Shawn Tassone: So Tassone MD, TASSONEMD.com is my website. The quiz is on there, you can read more about the book there too. Coming up in the next few months, I'm going to probably have courses for women that want to do the S.H.I.N.E.S Protocol, in a more kind of guided fashion. I'm recording those right now but usually, it's just a place for information. I have a blog, I talk about things I like and things I don't like. Instagram is huge. That's where I put a lot of my information @shawntassonemd. If you're interested in watching me dance or do Tik Toks, well, there you go.

Wendy Myers: I'm going to sign up for that right now.

Dr. Shawn Tassone: Okay. I'm not Anthony Young.

Wendy Myers: Well, Dr. Tassone, thank you so much for coming on the show. So many women are having so many issues with their hormones, so thank you for shedding light on this topic and giving us some answers on a direction to go. Everyone, I'm Wendy Myers. Thanks for tuning in to the *Myers Detox Podcast*. It's my pleasure, every week, to help bring you experts to look at your health issues in a different way, alternative ways so that you can address them once and for all. You do deserve to feel good so thanks for tuning in. I'll talk to you soon.