



#550 Everything You Learned About Exercise May Be a Lie

with **Debra Atkinson**

Dr. Wendy Myers

Hello everyone. I'm Dr. Wendy Myers. Welcome to the Myers Detox podcast. I've got a great show today with Debra Atkinson. We're going to be talking about exercising after 40 and all the lies that women have been told about exercise during menopause. We're going to be touching on ways to increase bone density and issues with osteoporosis if you don't do weight-bearing exercise. We'll talk about some of the realities of exercising after menopause, what happens to your body with your hormones after menopause, and what you can do to remedy that.

We'll talk about using peptides to increase muscle strength and flexibility. We'll also talk about Ozempic and other peptides that people are using for weight loss and what some of the realities of those are, the pluses and minuses. It's a very interesting conversation, so tune in to the end to listen to our talk on Ozempic. We talk about a lot of really interesting subjects when it comes to this. You must listen if you are anyone who's not exercising right now or you want to increase longevity. We'll give you a lot of tips and tricks on doing that well into the menopausal years, so check that out.

Debra Atkinson is a hormone-balancing exercise coach and a four-year fitness expert. She's helped over 275,000 women flip their second half with the vitality and

energy that they want. She's a bestselling author of [You Still Got It, Girl: The After 50 Fitness Formula for Women](#), [Navigating Fitness After 50](#), and [Hot, Not Bothered](#). Debra hosts the Flipping 50 TV and the Flipping 50 show, and She Means Fitness business podcast, with more than 3.5 million downloads. She's a prior senior lecturer in kinesiology and a subject matter expert recognized by the American Council on Exercise, AARP, Washington Post, Prevention Magazine, and USA Today, just to name a few. Check out her TED Talk titled, [Everything Women in Menopause Learned About Exercise May Be a Lie](#). I've been on her show before, Flipping 50. I highly recommend her podcast. Check out her website, flippingfifty.com. Debra, thank you so much for coming on the show.

Debra Atkinson

Hey, thanks for having me. We had this idea in the greener map to tell everybody, just look at your face. You glow. I'm hoping some of that rubs off on me through Zoom.

Dr. Wendy Myers

Well, thank you. We were talking because I do a lot of energy work and bioenergetics, and I feel like that's my secret weapon. It has a lot of stuff to reduce stress, and it's a lot of work that took many decades of research to figure all that out.

Debra Atkinson

That comment is so worthwhile to anybody who's listening and came over here from my audience and my community. We're so used to thinking hard work is like you got to be breathing hard or you got to be lifting hard, and honestly that tangible stuff is actually easier than doing the real underlying work on yourself. Sometimes I think we try to ignore that and be a little more noisy with the doing and the action, and getting quiet is really hard for us.

Dr. Wendy Myers

Yeah, and definitely, as I'm getting older, I want to do more surrendering and relaxing. What can I do that is the easiest, like the path of least resistance?

Debra Atkinson

Yeah, absolutely. If you don't deal with it, at some point, it catches up with you, and you will relax. So you can either choose it or you can do it because you have to.

Dr. Wendy Myers

For me, exercise has been a lifelong pursuit and passion and interest. I try to make it as enjoyable as possible and try to do it as much as possible, even though I don't always take the time, but I wanted to talk about that. I haven't done a lot of podcasts on exercise, but it's incredibly important for anti-aging and longevity. Why do we need to exercise? A lot of people just think of it as a weight loss tool, or they don't want their butt to droop, or they just want a toned butt, and they're not really thinking about much else. Why do we actually need to exercise?

Debra Atkinson

First of all, you just told me your age because you just said one body part drooping. It's like a race to the socks girlfriend at some point. I think this year, 2024 is when we're recording live. This will live on, and it's relevant no matter what. I feel like longevity is the buzzword of the year. Everybody's using that word, and it's so funny. This is my 40th year in fitness, and I don't care if you're 20 or you're 87; my mother demonstrated to me that it's immediate gratification that we want. I find it really interesting that people are more interested in longevity and I'm grateful for it. I even find that we're hearing about 30-somethings who are trying to biohack so they could be younger. I'm like, how far back do you want to go?

Dr. Wendy Myers

Just stop already.

Debra Atkinson

I think there's also no discounting that we want the two for one. We want to look good and feel good now. We're a little more conscious as we get older, even more so of, am I doing the right thing for the foundation? Because now we're in this pattern where we're saying, "Gosh, I wish I would've known that earlier in my life. I wish I would've known to start that back then." I think we're at least able to project. So number one, if we lose muscle, we've lost, period. End of sentence. And it's not just about strength, energy, and stamina. That's one that's a given, but it's about our

independence. In order to do the things that support our bone density, we have to have the muscle. That's your first layer of, how do I get it? But it's also disease prevention, and a lot of do I or don't do HRT right now. We can get into that too, but if you don't want to do something extraneous, you don't want to supplement with hormones, muscle acts like an endocrine organ, and it's on your side. It's natural and as easy as picking up something heavy in your house. They don't even have to be in the shape of dumbbells because your muscles do not know, right? It doesn't have to be at a gym.

Muscle is everything for the immediate gratification out there that everybody wants. If there's been a little weight gain, a little creep, or a belly fat deposit, that wasn't there. So even women who don't gain weight and perimenopause, the lucky ones, often have a redistribution. It's sitting somewhere on their body it didn't use to sit. That's not just a vanity thing. That's a health risk thing. So if you've gained weight around your waist, we've got to watch that girth.

If you're a smaller woman, I also don't think you can wait until it's 35 or more inches, where it becomes a real health risk. If you're a smaller petite woman, we've got to look at your overall shape too and say, it's not going in the right direction, but muscle can help with that. More muscle means you're moving more all day. Your energy expenditure is great when doing anything you're doing. It's also great for all things that improve your strength in your muscle are great for brain health. We're all going to want those cells sooner or later, right?

Dr. Wendy Myers

Yeah, I saw one podcast that was talking about how your muscles actually regulate your neurotransmitters. The more muscle you have, the more movement you have. It really plays a huge role in regulating your mood, serotonin, and dopamine.

Debra Atkinson

Yeah, absolutely. And just so that everybody understands if you are overly stressed at midlife because we tend to be as estrogen comes down, even if you're doing a replacement, you're not as high potentially as you were pre-menopause in your reproductive years. But when estrogen comes down, the body turns this switch and says, okay, cortisol is going up. Some of the causes of our cortisol we can't get rid of,

you know what I mean? We can't shoot the messenger. If it's your family, your dog, your aging parents, they're not going away. We can't take care of all of it, but we can offset it because if we've got better mood, those neurotransmitters you mentioned, we've got serotonin, we've got dopamine, or we've got oxytocin. If they're up, cortisol can't also be up. So your secret weapon is working on the mood, boosting it. That brain chemistry happens within seconds of you starting to move your body. It's pretty amazing.

Dr. Wendy Myers

Yeah, it's amazing how much better you feel after you exercise. I find it interesting that when I feel low energy when I go exercise, I have an amazing energy boost afterwards. It's just very counterintuitive. It continues to surprise me even though I've been exercising my whole life. It just, I don't know why it just continues to surprise me. There's another really interesting fact. I was listening to Steve Kotler talk about how your longevity is very directly correlated or indirectly correlated to your thigh strength. Your quad strength determines your balance and stability. One-third of fatalities from older people are from falling.

Debra Atkinson

Yeah, and you're getting up out of a chair safely. We all do it. I think a lot of older adults say; I don't know if I want to exercise cause I'm afraid of hurting my knees. I totally understand that nobody wants to get hurt, and there is fear that gets in the way of some people doing the exercise that will actually help them. Generally your knees probably are going to suffer more if you're not exercising than if you are. We need that strength in order to help us operate. Longevity is directly correlated to total body strength as well. Total body strength is correlated to you can take a hand grip test. The way to get stronger or do better at that test is not ideally walking around squeezing tennis balls. It's doing things that you're lifting heavy for the major muscle groups. We're able to test you with grip strength as opposed to taking you into the gym and doing a very unsafe one rep max. We wouldn't want to do that with most of us because it could be risky, but we can tell the correlation between your overall total body strength and your grip strength, and that correlate with your longevity. So the longer you live or want to, the better. We want the health span. We want the energy. We want to not be the person stuck in a nursing home.

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For anyone listening that really wants to detox their body, go to heavymetalsquiz.com. I created a quiz for you. It only takes a couple of seconds, based on some lifestyle questions, you can get your toxicity score and get a free video series that answers all of your frequently asked questions about how to detox your body. Check it out at heavymetalsquiz.com.

Dr. Wendy Myers

Yeah, and it's easy to fall into that kind of counterintuitive thinking where you don't want to work out because you might injure yourself, right? Being tight and weak is what ends up causing you to be injured. . I've had periods like I just did this heavy docu-series, and I just couldn't work out for like three months. It was really intense. I got back to working out and I realized how tight and how weak and tight I was, and that's what can lead to an injury. So I've had to be very ginger getting back into it. I understand that fear of not wanting to hurt your back and then losing mobility, but you can do stuff like Pilates or Yoga or more gentle things getting back into a workout routine

Debra Atkinson

Yeah, I'm so glad you said that. This brings up a question that has been there for decades and still prevails. I think a lot of people fear, "If I start lifting weights, I'll get tighter. I'll lose range of motion." I think back in the 70s or 80s when we saw all those muscle heads whose arms are out here. They can't put them down from their side. Potentially, they're the only ones who lost range of motion. By going through the full range of motion and doing exercises, we're doing a couple of things that I call 'juicing the joints.' We get that lubrication in the joint so that movement feels better. You've got the right muscles surrounding joints strong. So movement again feels better with more ease, and you're less likely to lose range of motion if you're going through the full range of motion. Not to discount that. Yes, we do want stretching and yoga or Pilates or however that might show up for you in a way that's enjoyable for you. We want it all, and you're not going to harm that by doing strength training. If anything, it will improve.

Dr. Wendy Myers

Yeah, I'm a huge fan of lifting weights. I've been lifting weights since I was 13 years old. I had my little weight set and my little routine that I was doing. And it's interesting that it was the hardest that I worked out in my life. I was small. My muscles were the smallest. I was just killing myself working out with the personal trainers and stuff like that. My body was the smallest. So, you're not going to get these huge bulky muscles that some women worry about.

Debra Atkinson

Well, let's speak into that too, because if you're a woman, definitely over 50 or 60, and you started lifting weights at one point in your life and you got bulky, I want you to go back in time to where we also might have been because, for many of us, that is an era where snacks were on the rage. We were eating really high carb and low fat. We thought that was evil, and because you could have low fat, we didn't have a serving. We had half the box. You were kind of loading in a way that would have caused a bulk-building protocol, but I also want you to go way back. If you first learned to lift in high school and you're of the era I was, what did we learn? Three times ten. And friends, that's a bulk-building protocol. So lifting heavier, doing fewer repetitions or doing more repetitions with lighter weight, both of those tend to be not so bulk building. You also don't have the same hormones you had then. So you might try really hard to bulk up and not be able to do it. It's going to take a lot of extra effort and bulk building right now might be the thing you need so that you're avoiding frailty 10 years down the road.

Dr. Wendy Myers

Yeah, that's just not going to be me. I'm just seeing friends and family members and things; people fall and hurt themselves, break a bone, walking and just tripping, breaking a kneecap. One of the reasons I lift weights is that I'm going to be strong. My bones are going to be strong. I'm going to do weight-bearing exercise. I am not going to get osteoporosis. I'm thinking of that every time I'm lifting weights and I love it. I enjoy it. One thing I found after I hit menopause, I'm 51 now and I hit menopause at 47, 48 is that your estrogen goes down a lot. I started having a lot of musculoskeletal issues. I was pulling muscles all the time. I'd go for a walk and pull a muscle in my butt. And I was like, what in the hell is this? What is going on? I can't go

for a walk now. Like, what is going on? And I was pulling a muscle. I pulled a neck muscle for months. It was bothering me and I re-injured every time I'd lift a weight. So I thought, okay, I've got to figure this out. I realized it's low estrogen.

Connective tissue can be responsible for these musculoskeletal issues. At first, I tried peptides. I tried BPC 157 and instantly solved my issues. But now I have started some estrogen, realizing that I need that estrogen to keep those muscles supple and prevent muscle tears and things like that. Then I started doing the testosterone cause I was killing myself in the gym and not building muscle on my own. I'm doing all this work, and so I decided to supplement testosterone just because I want to get results. I don't want to feel like I'm wasting my time. So I've definitely gone that route. I never thought that I would. I always told myself, "I'm not going to do that. I'm just going to age naturally." No, wait until you hit menopause and talk to me.

Debra Atkinson

I love that you said that. In our community at Flipping 50, a lot of women are still having this discussion. I think I'm beginning to see that some of the studies that came out have been retracted and yet the problem is once they've been out for a long time, they still live up here. It's really hard to separate that and take it away and not have that little bit of fear that this is a bad thing or it's a crutch and it's not natural. I think that a lot of women also think I don't have symptoms, these being very limited to the hot flashes and the night sweats types of symptoms, and so thinking I shouldn't take them.

You mentioned one of the signs, and it's very obvious that you're lower in those hormones. You're doing all the work, but you're not seeing any results. It's not just that you're tired all the time, necessarily. It's just that I deserve it. I'm managing my diet, I'm getting protein, I'm getting the rest, I'm doing the exercise, but I'm not seeing the results. That's a sign that you may benefit. Exercise has greater efficacy when you're supplementing with hormones. That's not a persuasive argument for anyone, but just another point of view that you might want to think about. We've got thousands of women in the community, and we've seen it. Women will get results no matter what. But, those who are on hormone replacement therapy and they've dialed in that

cocktail, so it's right for them, seem to get better results where they come just a little bit faster.

Dr. Wendy Myers

Yeah. I mean, just as someone who's worked out their whole life, I know what results I get. I know when I go to the gym, what I did, what I feel like, what my muscles feel like, how long it lasts, et cetera. I've got it down, but after I hit menopause, I just started noticing that if I put this effort in my twenties, it should have been a lot different results, and I just felt frustrated. But also, I felt like physically I couldn't do what I was doing in my twenties. I can't do two hours in the gym, or a day or whatever exercise I was doing. I don't want to push my body that hard, but I still want to look good. So what am I going to do? So I decided to do the hormones and the peptides and just try it. It's not the right choice for everybody, but if you exercise, you're going to get some results. You are, period.

Debra Atkinson

Yeah, absolutely. And if nothing else, back to mood, which is such a big one for a lot of women going through menopause who feel like things are a little bit flat, and they don't get the lift that they used to. So let me ask you this. I'm going to play interviewer now. There is a study out there that talks about having fewer dopamine receptors during menopause or due to menopause. I think it hits a lot of women differently. If you have been somebody who exercises, you're used to going and getting this little bit of euphoria. It feels so great. But a lot of women are experiencing like they're flat. Like, it didn't really give me that little boost of feel-good anymore. It's not that they're not working hard enough. It's potentially due to fewer dopamine receptors. Do you want to comment on that?

Dr. Wendy Myers

I can definitely say that I feel the same way. I don't feel that same excitement. Maybe there is that same high that I used to when I used to go to the gym, but I could definitely identify with that. I'm thinking like just in general, your cortisol receptors can be desensitized if you're constantly pushing your body with the stress and lack of sleep. Your insulin receptor could get desensitized when your body is flooded with sugar and it's not being burned off or what have you. I think you can have a lot of

similar issues with all of your hormones if they're not balanced. You can even get desensitized with peptides. You can get desensitized to those and have to get off of them for a little while. Like the HGH secretagogue hormones, you can become desensitized to those and have to go off of them, for instance.

Debra Atkinson

Do you find cycling those periods of time again on purpose? In strength training, we call it periodization. We wouldn't have you go hard, like just balls to the walls, pardon my French, all the time. We will have you go like, let's start. Let's go a little harder and let's have a recovery week. And we look at quarters at the same time like an athlete would look at in-season versus off-season and do something different. Do you cycle peptides as you're using them?

Dr. Wendy Myers

Yeah, it depends on the one. Some of you take five days a week and take the weekends off, and some you take a high dose for a few days and do that once a month. Some of them you take for a few months and take a break. So they're all a little bit different. You can do those, but I'm experimenting with some different things and enjoying them, and definitely getting the BPC 157. I've had amazing results with that, and I really like that a lot, especially for someone that is pulling muscles a lot or can't seem to address their leaky gut, or maybe they have a leaky brain or leaky gut. I think the BPC 157 is really great. You can't get it in the U. S. so much, but you can in other countries. You can figure it out.

Let's talk about testosterone cause I think there are a lot of women out there who want to get strength and build muscle. What are your thoughts on taking testosterone and just hormone replacement in general to facilitate that fitness?

Debra Atkinson

Ironically, years ago, when I first started digging into this, testosterone was the natural place where we go for building muscle. But for women, the bigger stimulus is estrogen. So it's not that I would look at testosterone alone. I would suggest that a woman may also want to look at her estrogen levels because that's like you're sitting on this three-legged stool, and boom, we just took out estrogen. If you can, you have to lift much harder. You've got to eat more protein. So we're getting the muscle

protein synthesis from both of those things. And then combining them on a regular basis, that's going to help. But not everybody can or wants to lift really heavy in order to get that stimulus. I think that's where it comes in, where you've got to look at estrogen and testosterone. Here is where we take in an intake form, and we do it very differently than the fitness industry traditionally has. We do everything. We're actually asking, what's your libido like? Because that's a huge factor for me. And if somebody is just saying, my what? Then we know testosterone is potentially a little bit lower, especially then if we go on and find out how much strength training versus what dose of cardio you are doing in your workout. A lot of cardio or a lot of endurance exercise will tend to kill testosterone. So you're not doing yourself any good.

Pandemic and post-pandemic women in midlife tend to maybe like their wine a little bit too much. Alcohol is not testosterone's friend. You've got to think about that and what do you want worst. If you want to decrease the belly fat, potentially you want to sleep a little bit better and you want to boost the testosterone to boost the libido. You're probably going to leave the alcohol alone, at least temporarily, until you get things under control. But absolutely. So in terms of exercise, how can you help yourself? If you looked at nothing else, you're going to do strength training and high-intensity interval training is also far better for you. And we're talking not just hit it and do hit, but hit it and quit it. It should be short. If it's intense, you're walking away after a session of 15, or 20 minutes at most, and that's it.

You should feel good when you're done, and that's another thing that women have a hard time with. We tend to think we should have to wring ourselves out. It's a good workout if we're sore while we walk out. It doesn't have to be. If you're taking yourself that far, you've probably just done a lot of extra muscle damage. Maybe we don't have the bandwidth to do that either energetically or, like you mentioned, we're more prone to the risk of injury. If we're pushing to those limits, we can go to the edge. We just don't need to go over it anymore.

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I want to give thanks to one of our sponsors, Everbella Collagen. As women age, collagen depletion becomes a major concern. It was for me, especially with the hormonal shifts around menopause when our need for collagen increases. The

notable signs of collagen loss include wrinkles, fine lines, dryness, loss of skin, elasticity, plumpness, brittle hair and nails, and stiff and painful joints. When it comes to collagen supplements, there are not a lot of great options out there because many collagen supplements contain glyphosate and also heavy metals. They're contaminated with things like arsenic. Luckily, I found an incredible collagen supplement. It's free of toxic metals, and it tastes like caramel. You can try today for 30% off. Just go to [EverBella.com](https://www.EverBella.com) and use code Wendy30. Try today. I love this collagen supplement and highly recommend it.

Dr. Wendy Myers

How often do you think women should lift weights or do weight-bearing exercises? I mean, there aren't any shortcuts. You have to do it if you want to be healthy. If you want to maintain your balance, healthy bones, longevity, increase your lifespan and quality of life, feel good, and look good, you have to do exercise. You have to do weight-bearing exercise, not just walking every day. You've got to do some weightlifting or something.

Debra Atkinson

Those are two different clients, weight-bearing or walking and if you can, jumping, right? If you're not here with an injury or a joint replacement, and your surgeon doesn't want you to mess up his pretty work, you could still do some jumping and hopping. We're seeing post-menopausal women with osteoporosis now, and studies are actually having them do the heavier lifting, high-intensity lifting progressively. They're calling that high impact. We don't start you either on day one, but slowly we're having you do box jumps, meaning you step onto it and jump down, like standing on your chair in the kitchen and jumping down because the impact is far greater than something small like a jump rope repetitively.

Weight-bearing in all ways, even by being on your feet more during the day, is far better than sitting down or on the couch. So all those things count, but let me answer your question about the frequency of strength training, and I'll tell you how I answer that. It's slightly different. We still have to come back to, how do you feel? I haven't even released this podcast yet, but it will potentially be out by the time we release this one. A 2023 study looked at the best frequency and intensity. Of course, in the

study, there's always a limit. They're only looking at so much. It was actually a study on subjects, not a review of literature. They found that doing between 65 and 80 percent of a one rep max in terms of lifting and doing it three times a week was more effective than doing less frequent or even doing higher intensity. So to anybody who's like, what did she just say that 65 to 80 percent. That's anywhere between 16 and 10 repetitions. Notoriously, 10 repetitions have been most closely associated with bone density benefits, more than 15, more than 20. So we're talking heavier. When you push on something, you push on bone. It pushes back. It responds, and that's really what we're talking about.

So you can work your muscle by doing higher reps and lighter weight or heavier and fewer repetitions, but you don't get the same exchange for bone. Bone actually requires more stimulus. If you can go heavy, you should. Now, not everybody can. So when you can, then you have to look at those other things. What else can I be doing? We've even seen we talked about weight gain bearing. So notoriously, you and I think, okay, walking, stepping, picking up, and putting down because the earth and that impact is actually what helps grow the bone. Dr. Loren Fishman came out with a study in 2016, looking at 12 yoga poses a minute each. So if it was right, left, it was 30 seconds here, 30 seconds there. He did it in a longitudinal study, meaning over time, with a large number of postmenopausal women. Over the seven years of the study, women gained a percent of bone mass every year. Not just the first year, but every single year they continued to gain. I had interviewed him last year, and he said, we're in the process of now breaking down to see what were some of those more beneficial poses than others.

They had put a corpse pose in just as a reward for doing it. Now, I'm going to say that lying on the ground on your back probably isn't one of them that gave the most density just as a gas, but we're talking not hard things. We're talking tree pose, warrior pose, we're talking rotated triangle in some poses that someone might have said at one point, don't do that. Don't do forward flexion with rotation. In the 90s, that's what we were telling everybody. We thought we needed to bubble-wrap you. You're diagnosed, now don't move. Now we're seeing the opposite. So if you're diagnosed, put down the fear because it's a great time. We're seeing research studies do high impact, do heavyweight training progressively over like 18 month studies. We don't

take somebody and do that right away, but we build up, and we're seeing a low risk of injury, no dropout weight and adherence is really good.

There's something that surprised researchers in these studies, and that is that the participants, the women actually seemed to enjoy high-intensity impact more. There was something about it, and it does light something up in your brain. It's like a sense of achievement and mastery. When you finish a long walk, your legs sometimes feel heavy. You just feel a little tired. You don't feel that way after high-intensity exercise. It's a very different feel and we should feel good. We need to start looking at that. To summarize that, three times a week seemed to be better for bone density and doing that moderate 10 to 16 repetitions. So here's what I do at Flipping 50 and we have to factor in that a lot of women come to me and they're already in some state of adrenal insufficiency. They're the women wanting help, not seeing results, and they're the push-through people. And we can identify, right? We're all type A. You can count on me. I'm going to get it done. If you say to do it, I'll do it. But they need actually to listen to their adrenals and not throw themselves under the bus because they're not going to be increasing their bone density while they're exhausted. Something at some point is going to give and they'll have total rest.

So we actually have twice weekly total body strength training sessions, particularly for women in perimenopause who seem to be more volatile and up and down so they can get it. They can stay consistent, stay regular for postmenopausal women, who generally are kind of flat lining. It's stabilized. It's lower, but it's predictable. Now they know their energy level is better. We'll have them introduce, say, two heavy sessions, one on Monday, one on Friday, and do the third, but that would be the one that instead of 10 reps or fewer, they might go with the 16 repetitions and do a single leg work. So it's a different kind of stimulus, and we're not making you sore, tired, and achy while we're doing it.

Dr. Wendy Myers

When you were talking about yoga and the yoga building up your bone mass, 1 percent a year, I can identify that because yoga kicks your butt. Sometimes people or guys will look at yoga and be like, oh, it's not an exercise, but it's not easy, especially since some of these classes are an hour and a half. It's not easy, but it

feels really good. It's very simple movement and stretching. It's definitely muscle-building. I was doing yoga four times a week at one point, and I was in the best shape of my life. I just felt like an athlete. It's not easy

Debra Atkinson

No, it's not, and that's such a great point, and back to, sometimes an hour and a half sessions, but this is 12 minutes, literally. It's like anybody with objections; we just tore them down. Okay. So, I'm just saying. To your point, I interviewed Dr. Fishman, and I said, look, I'm going to play devil's advocate, but never ever would I have thought this counts as weight-bearing exercise. We're not picking up our feet and putting them down. So tell me what gives here, right? He explained that originally, we might have thought that hypothesis was true too, but what you're doing, say you're in a triangle pose, and for anybody unfamiliar with yoga, I know that's a stretch, but you're basically your spine is parallel to the floor while your legs are split apart in a forming a triangle if you were to look at it. He said, what we're doing is we are weight bearing and putting the effect of gravity on the spine differently. You are resisting the gravitational force. So in that, you redefined it, and numbers don't lie. The statistics don't lie, and there's a huge number. I think that's very exciting. If you can't lift heavy, or if you can't do high impact, you still have something. You still have other things you can do. Whole body vibration is another something to have in your back pocket that may work for you.

Dr. Wendy Myers

Yeah, that whole-body vibration is amazing. You are adding another little factor, or you're vibrating your muscles, having to fight against that. It's a great way to reduce the amount of time you're exercising and build bone density.

Debra Atkinson

It's a great insurance policy. I'm at a point where I can still do high impact. I can still lift heavy, but I love what you said earlier. I'm not going to get osteoporosis. I won't. Good luck with that. However, your gut may be in better shape than mine. I've lifted heavy my whole life, done high impact, and I had osteopenia in my left arm. I started using a power plate for that reason. Like, okay, what else can I do? I can't go heavier. I can't do it more days a week because my muscles and endocrine system need

recovery. We have to take a break. So how can you do it? But likewise, you've got a list of things that you can do, and what you have to focus on for anybody is what can I do, not what you can't.

Dr. Wendy Myers

Yeah, and I love PEMP also for building bone density. Amazing research there, and all you gotta do is lie there on the PEMP mat and build your bones, but you still have to lift weights. You still have to do the weight bearing exercise and whatnot. But with yoga, you're kind of like lifting your boobs. That's your weight. You have to lift up your upper body and hold poses for a really long time. It's not easy. Your muscles are shaking sometimes with some poses.

Debra Atkinson

It's a great functional workout. It's great if you're doing strength training that really helps with bone density. Many of those exercises are so linear. Well, life is not. So you've got to go to yoga or you do it another way, but you've got rotation, flexion, extension, lateral flexion. It's all built-in. No wonder it's 7,000 years old, and it's still one of the best, right?

Dr Wendy Myers

Well, yeah, it's a tried and true.

Ads 00:40:37

I want to give thanks to one of our sponsors, Pure Body Extra Zeolite. As you know, toxins are all around us and in the food that we eat, the water we drink, and the air we breathe. You can do something about it. With over 1 million bottles sold, pure body, extra zeolite is changing lives with its natural detox. It's a nanonized zeolite that's proven pure and optimized to remove the toxins that have been building up in your body. With just a few simple, taste-free sprays a day, you can detox every single day. Get your bottle at thegoodinside.com.

Dr. Wendy Myers

Let's talk about another peptide because we kind of segue into this. We're talking about peg peptides, but Ozempic is something that a lot of women are turning to. A

lot of celebrities are talking about it, piquing the interest of millions of people and tempting them to use Ozempic for weight loss. And I get it. I've tried it. I wanted to try it. I wanted to see what the hype was about, and it is amazing. It stops your cravings. You lose weight, but you can't stay on it long-term. You cannot. It has its host of issues. Do you want to talk a little about Ozempic and what your thoughts are on it?

Debra Atkinson

Yeah, I'd love for you to come back in with that too. It's interesting in the last week, I've gone like 360 degrees, and I'm kind of back to, hopefully, I'm not spinning anymore, but my jury is still out on this. Number one, I think I was still always coming from a point where for the right individual, it could be the right thing. It's that individual that we all know them. They've done all the things. They've made all the lifestyle choices and changes. They are lifting. They are monitoring blood sugar levels. They are changing their diet. They're getting the protein, and they're not getting anywhere. Their weight is a health risk in itself, and there are other numbers, such as inflammation and fasting blood sugar levels. Those are also problematic and threats for them. I think for those people under the right supervision, it's right. What I don't like is for celebs or the real housewives who want to go from a size four to a size two, not do the work, not make the lifestyle changes, simply not be bothered by that and harm themselves because as they lose, they're probably barely eating and they're losing lean muscle mass. Over time, that's gonna come back to bite you.

So if you're doing this for metabolic reasons, the hope is that somebody's counseling you. You're doing the strength training. You're sure that you're forward first with protein, so you're getting adequate stimulus for the muscles naturally, and you're not losing muscle mass. You're also tracking, getting on a smart scale, tracking your body composition, not just body fat, but looking at your absolute pounds of lean skeletal muscle. How much is there? Don't lose it. We don't ever want to lose that real estate here.

Recently, I kind of heard of some women using it who already are fairly lean to get that extra edge, and that kind of put me up in arms. I'm like, Oh my gosh, now I'm looking all differently at my Instagram account. Like, who don't I trust right now that has looked really good over the last year. I had no clue because I'm so naive that

they might be getting a little leg up. Then two days later, I was introduced to someone who said to me, well, I'm doing it just for the longevity benefits, and I'm doing such a low dose. I am micro-dosing, and I'm cycling it. I'm doing it only once a month. I respect all those people, and so my jury is still out. I think a lot of things to consider is always for me a risk-reward ratio. If we were talking solely about exercise, we might say deadlifts are wonderful. Pushups are great, and yet, is there a risk associated with both of those by coincidence? There certainly is. Just because you can doesn't mean you should. The bottom line is it's not a way to skip the things that you need to be doing and to your point, you can't not lift the weights, even if you're doing some other things, because we lift weights every day. For instance, putting dishes away in the cupboard, taking your carry on and putting it in the overhead bin by yourself. It's either that or batting your eyelashes, right? You're going to have to do one or the other, so it's, which part do you want to play? But we are always lifting. You're going to bend over and reach into the bassinet, or you're going to reach and pick up the dog or the salt pellets or the dog food. We're going to have those instances where we do need a lift. We need that function.

Dr. Wendy Myers

I agree with you. I think that's a very good way to put it that you're kind of, the jury is out, and you're still kind of like, yes, and maybe no. Ozempic has been used since 2017, and before that, it was a peptide that people were using. My rule is I don't touch anything unless it's been used in the general population for five years. I don't touch it. I want to see what's going on. Having tried it myself, unbelievable at controlling your blood sugar and your cravings. I found myself just craving sugar and food all the time. I just couldn't control my snacking. It was certainly related to cortisol. I think for a lot of people who have diabetes and blood sugar control issues, it is a big deal. It's almost like a miracle drug for those people. But I do have concerns about people starting to take it and seeing these amazing results and stopping their cravings and snacking and then not wanting to get off of it.

Debra Atkinson

Yes. I see that too. There's another problem or challenge that I want to have us bring up. I've got clients or women in our community who actually struggle to get adequate calories and protein in because they've got what I would call early satiety.

Sitting down at a meal with other people, they'll look around them and say, how can you eat all that? They're already not getting it or already very disciplined and may have cravings, but they don't give in to them. Now we're taking someone who's potentially prone to losing muscle because they're not already eating enough. We're closing down their appetite even more, so they're eating less.

I have one case study. I had a client who deserved to have rewards. She works harder than anyone else. She's playing by all the rules. If anything, her hardest thing is getting enough in, but she lost muscle. Not a lot, but when you're 70, any is a lot because it's harder to get that real estate back. Likewise, I walked into my stylist, and I know that he, in this case, had been on Ozempic since September, I think. Each time I'd gone back, he looked better. I walked in this time, and I said, wow, you look great. So what are you doing? And he said, I'm never going off of it because it's now it's a crutch.

Dr. Wendy Myers

Yeah, because when you do go off it, you want to eat again. You want to eat everything aside. The cravings come right back, and the blood sugar issues potentially that I think a lot of women in menopause start dealing with for various reasons. Toxins is one of them. Stress is one of them. Circadian rhythm control is one of them, and just the biology wearing out to a certain degree. It can definitely become a crutch. How does it work? It slows down your digestion, and that can cause problems like constipation, the food rotting in your gut, and getting sulfuric burps. I had that. The sulfuric kind of rotten egg burps because the food is literally rotting in your digestive system. Seriously, that's what it's doing. It's slowing down your digestion, and for some people, it's a problem

Debra Atkinson

The point you bring up about constipation and slowing it down gives me fear for a lot of women in our community. Many women tolerate constipation on a regular basis. This is all pre-ozempic previous conversation. They just tolerate it and think, well, that's my normal, or that's the way I've always been and not realizing, oh no, we can do things about this. We can make some lifestyle changes. So we've got to get rid of

toxins. That's part of the way we're going to do it. That really bothers me for a lot of women who already may tend to struggle with that.

Dr. Wendy Myers

Yeah. I can't imagine taking Ozempic or a similar peptide like Tirzepatide without doing coffee enemas or having some sort of relief or management of the side effects in that way. I also took a product called Solaris, which kills bacteria and infections and can control yeast and things like that. When you slow down your digestion, you're going to have an overgrowth of yeast and other bacteria that may not have otherwise overgrown. I think there's something to consider there. It remains to be seen what the potential long-term effects are. There are some women who are having stomach paralysis as a result of obviously a very low complication rate. It's there and other issues, but we won't get it all out. You guys can read articles about those things. Any other thoughts on Ozempic?

Debra Atkinson

I think it's just out there. I have had the discussion and realize that it's not just a one-size-fits-all. There are functional docs that are willing to microdose, that are willing to start you at a very low dose and increase it or to cycle it. If you were going to do it, I would suggest that's the first place that you'd want to start and look at what else is there. Are you doing the right lifestyle activities? Is there any emotional eating in your history? It's not going to make that go away because you're on it. From some that I've heard, the emotional eating may still be triggered. If that happens while you're on it, it can cause more complications, more nauseousness, and more getting sick. So there's a lot to really consider. I think if you're looking longevity wise, can this be helpful? Be very honest with yourself because I think we're all sucked into the immediate gratification, and it's maybe the weight loss that sounds sexy.

Dr. Wendy Myers

Yeah, for sure the Ozempic does not. I can speak to this firsthand. It does not help you overcome emotional eating or stress eating. It doesn't work on those for sure. If that's the root of your issues, that's another thing you have to address. Debra, thanks so

much for coming on the show. Why don't you tell us a little bit more about yourself, how to work with you, your podcast, your website, et cetera.

Debra Atkinson

Well, thank you so much for having me. It's a great discussion. Flippingfifty.com is where everybody can find me. That's all the words spelled out. No spaces. Flipping five zero TV (Flipping 50 TV) is where I am on social. Primarily I'm on Instagram, Facebook, and YouTube, lots of resources for you. There are lots of quick tips, messages, and the Flipping 50 podcast, which you have been on, and a fantastic episode, by the way, that we did together. So lots of things that if you're interested in muscle, more on strength training or talk about muscle protein synthesis or how do you get that osteoporosis, all the things that women in midlife are concerned about, there are great resources for you there. At the site, you'll find what's happening this month and lots of free masterclasses for you to dip your toe in the water.

Dr. Wendy Myers

Yeah, fantastic. Debra, thanks so much for coming on the show. Everyone, I'm Dr. Wendy Myers. Thanks for tuning in every week to the Myers Detox podcast. It's just such a pleasure to do this show every week, and I just so much enjoy it. It's learning myself, but more important teaching you guys and helping you guys get that information you need to take your health to the next level. It's such a pleasure and honor to be able to help you in that way. So thanks for tuning in every week.

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