

You're listening to episode 125 of The Devoured Podcast.

Welcome to Devoured, the podcast for women ready to release the title of dieter for good. I'm your host, Lucia Hawley. And I'm a certified nutritional therapy practitioner with my master's in social work, clinical mental health. I've lost 80 pounds, and I'm on a mission to get you into the life of your dreams without being the woman who is consumed by diet after diet, trying to get there.

If you're wanting more in your life and are tired of wondering when or how to make that happen, then this is the podcast for you. You'll learn how to make the radical changes you only dreamed of 100% possible for you today. I'm so happy you're here. The information provided within this podcast is intended as general education only, and is not to be considered a substitute for professional medical advice, diagnosis, or treatment.

Okay, pretty people, welcome to another episode. So, happy to have you here. I am very, very excited. It's trash day. I'm very, very excited to be talking to you about today's episode. Listen, on the show, I clearly, if you have been listening for an episode or two or longer, you know I love to talk about the intangibles of health. Meaning, the thoughts we think about the thoughts we have, the actions we take, the feelings we experience, and what happens as a result of those. I think we have to talk about, basically, our mental fortitude, and our ability to be in relationship with ourself when we have dialogue around weight loss, and weight loss endeavors. We have to talk about those intangibles.

And I call them intangibles because it's not a thing. You can't go buy thought work. You have to experience it. It's not like a cool water bottle that you now drink more water out of. It's not an action that you can hold in your hands, it's experiential, and it's a practice. It's a way of being, a way of looking at. Like a lens that we look at our worlds and how we navigate them through.

So, I love me some intangibles because I personally don't think I would've lost the weight or feel in balance in my body and with myself, if I just felt like I had to be on a diet, basically. Dieting world, dieting cycle is very much what can I tangibly do on paper? Food in, food out; calories, in calories out, which is a subject for a different episode. And I have a note for myself about that. Those are the tangibles and that's fine, but they kind of leave us wanting more, or feeling like we're not enough, or they don't really fully encompass our human experience. So, we talk about the intangibles. We get real cozy, real comfortable with them. We got to, otherwise, not much is going to happen.

However, let me now say, in the coaching world, it's easy for coaches to hold a hammer, and start to see nails everywhere. And, well, the hammer is thought work and the nails are people who we think need to do thought work. I'll be honest, I think thought work, like I just said, is one of the most important tools anyone could ever learn how to use period point blank, but while our thoughts influence how we feel, and we take action and get results based on those feelings. And then, after we do all of that, we are now creating proof that those thoughts are the only valid and true thoughts possible because look, they made what I thought would happen come true.

And while our thoughts, literally, decide whether we have an emotional experience that influences whether or not our bodies feel safe, and are at the ready to release weight. We also are living in human bodies with a whole history of experiences that have brought us to the present moment and not just emotional experiences, but physiological experience. We're all born into different bodies. Some of us have different diagnosable medical conditions. Some of us don't. Some of us might've had something in the past and it no longer applies now. And maybe we'll have something in the future, but that's not happening right now.

So, today, what I want to talk about is lab work. And I want to share with you some of the most important lab work that I find incredibly useful when I am working with my clients in Lean + Liberated. I, as a nutritional therapy practitioner, I got my masters in social work, clinical mental health for anyone

who hasn't heard me say that before, I do not order lab testing, but I interpret lab testing. And I can talk to you, and do talk with my clients about their lab testing. I do not take the place of a licensed medical professional or practitioner, but I can work in conjunction with them. And I can also help to decode or create more conversation around lab tests, or conversations people have with their doctors.

Because listen, the medical field, it's tough to be a doctor. You've quite frankly, I think we've all had the experience with a doctor pops in and out of the office. They could be the most well-intentioned doctor and they might not have enough time to explain what a certain lab is measuring. Why a certain lab might be important, or may not be important, how those correlate with your goals, your values, what you hope for with your life and your health. And they, also, might not be able to offer a full scope because of their lack of time around why something like a medication recommendation, or a lack of a recommendation is useful. And how it works physiologically in your body and how it's something, if you wanted to do that, you could add into your life, or remove from your life.

And so, for me, I realized as I was thinking about subjects to talk about, lab work is so useful. It's so, so useful. And I want to share with you some of the most important lab work and why it really matters to advocate for yourself to get this blood work done as a foundational part of your process. And I share this with you, actually, from personal experience because, and again if you've listened for a while you know this, I'm someone who has Hashimoto's, which is an autoimmune attack on one's thyroid. Our thyroid is our master energy regulator. So, a lot of my physiological experience in my body, I have to have conversation around my thyroid.

Now, I think that that started at a very young age. I think by age 11, my thyroid should have been part of a conversation. And it was not part of a medical conversation until I advocated for that at about age 20, 21. There was no doctor that suggested that that could be part of the barrage of different symptoms that I was experiencing, including weight gain. And, as you've listened to before, the weight gain was very secondary to a lot of what I was experiencing. I felt like very much, my body was different than like my siblings' bodies, and I couldn't figure out why. And it felt like it was a problem for me to solve.

So, instead of being a victim to that, I decided to use my brain because I liked it. My little neurons fired pretty sharply, if I do say so myself. And I figured out and did the work of starting to advocate for different labs and panels to be drawn. So, I could have a more robust understanding of what was happening to me physiologically. So, I did not have to feel like a victim. So, I really believe that advocating for yourself to not only ask for blood work, but to be knowledgeable about the types of blood work available, and to be then able to, as a patient, as a client, to be able to understand and interpret your own labs is one of the most empowering things we could do for our health, if we feel like we have some chronic stuff going on that we can't quite figure out.

So, I want to share with you a basic rundown of just, again, foundational panels. Now, I'm a nerd, so we can do a lot of panels. But I think some of the basic ones, if you're someone who's coming to the show, you're looking to be losing weight. It has felt like a struggle. You feel like you do all the right things. And then, it feels like the dieting world and the cycles, and the thoughts are really frustrating. And it just feels like there's something that's missing. It might not just be that you have to do more and more thought work. The thought work will always be helpful, I will add that in. You literally can't do too much that work, legit. And I know if you feel like you have it's because that thought work is like trying to show you something there too. What? Very meta.

But the lab work will always be supportive to help us, at least, get an initial snapshot in time of what our bodies are experiencing physiologically. And from there, we can feel more empowered to be able to take actions and create choices that support us with that deeper understanding of our bodies. I will also add that I haven't shared an episode like this before because, being in the wellness and nutrition world, I see people who get so caught in the data, and the nitpicking of their data, and it becomes a hyper-focus.

And there can be some fretting and worry that is created by lab work. And, honestly, feelings of not feeling good enough, feeling like our bodies are broken.

So, I want you to know right here, right now, we are in such a beautiful time and age. There is so much possibility that can happen simply by having more education and information available to us. So, if you have lab work, that's come back and you're either not sure how to interpret it, you're not sure you feel like you wouldn't be able to do that, you don't know where to turn for that, or you feel like you got something back from a panel that is telling you that your body is broken, I want you to know right here right now, probably not. It's just your body communicating with you, asking for support. And communication, as we all know from relationships, communication is a powerful thing that we can leverage. Once we're in communication, that's when change can happen.

So, I love the medical field. There's so many disclaimers I have to say. I love the medical field. As I mentioned, all too often, practitioners might not have enough time. And they also might not run full panels that can clue us in, as patients, into what is happening in our bodies. And I really think that's just because, in some of the more functional fields of medicine versus more conventional fields, there is a difference of opinion of how deep we can go with this information. Like I just said, I could talk for forever. There's so much information available to us via blood work, saliva panels, urine panels, looking at hormones, et cetera.

So, while there is so much more that I will not be speaking to you on the show, if you were someone who's felt like you haven't been empowered by your practitioner to hold your own data in your own hands, to actually even feel like God, maybe there is something physiologically that this cycle of weight gain, weight loss, I feel like I can't quite chip away at things. This is the lab work and this basic yet functional lab work could be applicable for you. So, it's a conversation to bring up with your medical practitioner. And it might take you advocating for that conversation. If you feel like, over time, your medical practitioner is not open to that, this is where I would support you to find a medical practitioner who is open to have dialogue with you as their patient, because it is their job to do no harm. It is their job to listen to you. And it is their job to make sure that you feel heard, taken care of and respected as a patient who knows their body best.

Okay so, I'm going to start from the top. Again, this is a not huge panel, but this is what I would want to be looking at, if I were supporting you as an advocate for your health. If I saw that you were struggling with weight, and that you were feeling like you're eating pretty much whole foods, you were pretty much moving your body. You could always be less stressed out, but stress was pretty much under control. If you were feeling like you're just trying to bang your head against a wall and you were doing the thought work, and you're really feeling like a savvy consumer of that part of your life here's some stuff I'd want to be looking at.

Number one, I would want to be looking at a thyroid panel. And this is different than simply the common conventional panel that is run when we talk about the thyroid is the TSH. What is our TSH level? TSH stands for thyroid stimulating hormone. So, a full thyroid panel includes other thyroid hormones beyond this TSH. In conventional medical practice, often what can happen is that TSH is included on a basic panel. But if our TSH level comes back within normal range, then it's not looked at any further. And if it comes back out of range, then what can happen is that that abnormal lab result of the TSH will then, offer the opportunity for practitioners to then look at other thyroid hormones. However, I think that does us a huge disservice because a lot of people can feel quite horrible, and I'm speaking from experience, and have a very normal looking TSH level, but all their thyroid hormones can be out of balance.

So, we're going to start with TSH. So, the thyroid stimulating hormone is a pituitary hormone that responds to low or high amounts of circulating thyroid hormone. And I'm not going to give you details

on this podcast, because if I were to tell you like milliliters and blah, blah, blah, that doesn't make any sense in a podcast format. So, I'm just going to tell you the labs that I would want you to include. So, TSH.

Next up, I would want you to include free T3. T3 is the active thyroid hormone in the body. In addition, to free T3, and free means, it's moving around your body. It's free to move, it's not bound to anything. In addition to free T3, I'd also want you to be looking at free T4, another active thyroid hormone in the body. These two levels, when we're looking at thyroid, are very helpful to understand in conjunction with the next thyroid hormone that I'd want you to look at, which is called reverse T3. So, this is free active T3 that is able to bind at thyroid receptors. However, it's called reverse because reverse T3 is produced in stressful situations that then, binds to thyroid receptors, but it turns them off instead of activating them.

So, if someone presents with a high reverse T3 level, that means that they're active, they're free T3, free T4 levels. Their free T3 might be being created, so their thyroid could be functioning, but they're having an issue actually utilizing the thyroid hormone. And they're, basically, moving it into a storage type of hormone, the reverse T3. So, four lab tests: TSH free T3, free T4, reverse T3 are the thyroid hormones that I would want to be looking at all together to see how they're working with one another, because that would then inform... Well, it'd inform a lot of things. What is someone's stress level? If they were to be considering thyroid medications, would they be best served by a synthetic form of T4? A synthetic form of T3? A synthetic combination of T4 and T3? Would it be single release T3? Would it be sustained or a delayed release T3? Would they want natural fibroid, which is derived from pigs, which is a combination T3, T4, and as well as other thyroid hormones? You catch my drift?

The very conventional practice is someone has a TSH level that is out of range. That is indicating hypo thyroid, which is what is most commonly happening with someone, if they're having thyroid considerations. They can have hyperthyroid, they could have Graves', they could have Hashimoto's, which we'll talk about in just a second. They could have thyroid cancer. There's a lot that can be happening with the thyroid. But very commonly, if someone is feeling like they're having issues with weight gain and that TSH comes back out of the normal range, and is indicating often is a sluggish thyroid, but it's not the whole picture. So, we really need to understand the whole picture. We want free T3, free T4, reverse T3.

And we want two thyroid antibody tests, thyroid peroxidase antibodies called TPO antibodies, and thyroglobulin antibodies, TG antibodies. These are both markers of autoimmune reactions for the thyroid. So, they can be markers of autoimmune hypo thyroid, AKA Hashimoto's. So, being able to understand if we have levels that are high enough of those antibodies coming back, that that would strongly suggested an autoimmune issue with the thyroid. If we have a better understanding that we actually have an autoimmune condition, there are different ways that we would be supporting that.

Okay so moving on, those were the thyroid panel that I'd want to be looking at and understanding, and having you look at and understand. Next up would be serum cortisol. Okay so, our cortisol is a stress hormone. We actually want our cortisol to be changing levels throughout the day. Ideally, when we wake our cortisol should be at the highest in the morning and then reduce throughout the day. Often, people can have situations where because of chronic stress, because of physiological stresses, emotional stresses, spiritual stresses, we're having a different expression of that cortisol where it's low in the morning, we're not feeling like we can wake up, we can't really get going during the day. And then, it ramps up later in the day, oh, we get like that burst of energy. We start to feel tired, but wired later in the day. Those are all signs that cortisol is, perhaps, not starting off highest and it's not lowering throughout the day in the way that's most preferred and most natural for our bodies.

So, cortisol, I think often we hear that we should never have cortisol ever. No, we have stress hormones for a reason. And stress isn't bad. Our stress hormone can rise naturally in the morning, it's waking us up, it's getting us ready for the day. We're most on high alert, we're ready to go. That's a good thing.

So, looking at serum cortisol, any vitamin panels are helpful, but especially vitamin B12. Vitamin B12 is found in animal-based foods. So, often for vegetarians and vegans, it's a little bit easier for vegetarians, but even that is difficult, vitamin B12 is something we don't produce in our bodies. We take it in through animal-based foods or supplementation.

So, if people are feeling weak and tired, a little brain foggy, maybe even a dipping into some feelings of not so great. Don't want to say like clinical depression, but sometimes it can present as clinical depression. Feeling a little more depressed, lethargic. If you have pale skin, heart palpitations, shortness of breath when you're walking up the stairs. Here's the thing, this is why I'm mentioning this, if you feel like you would work out, if your body felt like it, but you feel really tired and you feel like it can't just be because you're lazy these are the types of labs I'd want to be looking at because you can trust if your body's telling you, "I'm hella tired. I don't want to be working out right now, even though I'm also holding onto weight," why is that? We keep talking about it. Don't worry about it. So, vitamin B12, because it is something that we get in animal-based foods. A lot of us are not eating quality sources of protein. We might need to do thought work around that, or we just might not have that education and knowledge.

Next up, vitamin D. I think a lot of us are familiar with vitamin D. It's called a vitamin, it is actually a hormone, or functions as a hormone in our body. We get it from being exposed to sunlight on our eyes, our skin, especially areas of thin skin on our bodies. So, if we're fully dressed throughout the summer, we might be getting sunshine on our face, but maybe not even because we're wearing SPF or hats, which is good, but we need some exposure in the backs of our knees, our armpits, and the crook of your elbow, those are all great spots.

Vitamin D is also important for mood and affect. If you feel like you experience seasonal affective disorder, of course. So, vitamin D is actually commonly ordered. But I don't think we recognize just how important it is because it functions as a hormone in our body for so many different processes in our body, including thyroid health, thyroid function. And remember, our thyroid is like a master energy regulator. So, if our thyroid is feeling off, even if we don't have some clinical presentation that would indicate disease or autoimmune expression, et cetera, we can still have under functioning thyroids because they're just not getting the juice that they need. So, looking at vitamin D.

And then, looking at ferritin, which is an iron storage protein. So, when we're deficient in ferritin it's similar to that deficiency in vitamin B12, where we're feeling fatigued, we might be experiencing hair loss, again it's correlated with that poor thyroid function. So, thyroid is a biggie here when we're talking about this, and then these different supports that are common, and big supports of our thyroid health. Again, the heart palpitations, if you feel like you get very weak around your cycle, if you're a menstruating person looking at ferritin, looking at iron as well, but I especially would want to look at serum levels of ferritin.

So, next up looking at some of the different sex hormones. So, estradiol, a form of estrogen, free testosterone, total testosterone, looking at those. Those can help us understand if we might be... None of this is one-to-one. This is why you need to be working with a qualified medical practitioner, a licensed medical practitioner, an MD. Someone who, their job is to be interpreting this stuff. But giving you this information here.

Looking at testosterone, looking at a couple of the next panels that I'll mention in a minute to understand if some of these imbalances that we might be feeling physiologically could be, potentially,

related to some insulin resistance, or showing signs of something like PCOS, which is polycystic ovarian syndrome. It's a very common experience. I think I want to say... Don't quote me on this one, but I think I just read it's like one in five women will experience PCOS. There are a couple different forms. PCOS is highly correlated, especially with what I see, with levels of insulin resistance. And I made a note to myself to do a whole episode on fasting and what it's doing from a place of insulin, as well as leptin. So, I'll describe both of those in a minute, because both of those are on this foundational lab panel that I would recommend.

So, looking at free testosterone, total testosterone, looking at estradiol, looking at progesterone. With all of these sex hormones, you have to remember that for a lot of us, and I would say for all of us, especially for people who are menstruating, however, our estrogen, our progesterone levels, even our testosterone levels are changing throughout the month. So remembering, and also when working with that qualified medical practitioner, that you're really being explicit and that they're asking you to be getting those panels done, the sex hormones done during a specific time in your cycle. So, the luteal phase, the follicular phase, working with your practitioner there, because your levels will change depending on where you are and your cycle. And so, we need that information. And just because they're changing doesn't necessarily mean something's bad. It's really great that our hormone levels change every month.

So, next up from the sex hormones, and I'll do a full recap. I'll just say the name of each one of these labs at the very end of this, so you can just hear me say them in full succession. But moving from the hormones into two labs that I find extremely important, if someone is really feeling like they're struggling, they're doing low calorie diets, the weight loss is not working. They're just getting more tired. They're feeling like they're retaining more water, et cetera. What I'd want to be looking at is serum insulin. And this is a fasted test, blood test, insulin levels. High levels of insulin indicate insulin resistance. And if we're in an insulin resistant, or moving towards an insulin resistant state, we won't be able to lose weight. And so, I'm going to do a whole episode on that.

Some people believe only in the insulin weight theory, which I don't believe in, but I think it's really, really a big and a powerful lab to be understanding, where it can take us out of, "Oh my God, I just to eat more chicken and broccoli," which I love. "I need to eat more chicken broccoli. I'm not doing this right," into a place of, "Oh, there's a reason why I'm eating low calorie. And my body is holding on for dear life to my body fat stores.

So, looking at serum insulin, looking at those levels, how high, how low they are. Ideally, we want them to be on the lower side of the spectrum, even if they fall within a normal range. And this is also an important point, I think, is that a lot of conventional practitioners will... Not everyone. Some of them are amazing. But they can often then look at panels and say, "Okay, if they're in range, any part of that range is good and fine." And I would say, if you're looking for a practitioner, look for a functional medicine practitioner. They're going to be more likely to be not only ordering tests that have ranges that are actually appropriate because even test to test some of the ranges can vary. And even if it's a small variance, that can matter if this is feeling like a place that you want to be focusing attention on.

So, looking at that, having practitioners, who can not only be ordering tests that have ranges, that they prefer, from their professional standpoint, but then also understanding that where one falls, where someone falls within that range, even if it's in the normal range, if they're trending towards one side, or another of the normal range, that is an indication to be paying attention to. So, you might be within the normal range of having normal fasting insulin levels. But if you're in the higher end of the range, I would be much more inclined to pay attention to that, and leverage some tools to be able to bring that down to the middle, or lower end of their range.

Okay so, serum insulin, and then serum leptin, also 12 hour fasting. Leptin is a hormone that regulates energy balance by inhibiting hunger. And so, just like you can become insulin resistant, meaning your cells are bathed and insulin, but because they're always bathed in that insulin they're, actually, not sensitive to it anymore. So, they don't do the thing of grabbing, in that case with insulin, blood sugar and moving it into our cells, which is what is the healthy way for our body to respond to insulin. If our cells are always bathed on insulin, they're not going to have a healthy response. They're can be resistant because it's like they're numb to it.

Same thing can be happening with leptin. You can become leptin resistant, which is what you don't want. You want to be leptin sensitive, and you want to be insulin sensitive. So, looking at leptin levels, same with the insulin. You could be within the normal range, but at what area on that range do you fall? We want that to be lower versus higher.

Okay so, wow. Those are the ones that I think are most important for these conversations that we have here in terms of weight barring, again, any major medical diagnoses that you've already worked on with your medical professional. So, this is for the people who are feeling like, "I chronically can't lose weight. I chronically don't know what's going on. I chronically come back from the doctor not having any major medical issues happening. And I'm not feeling like I quite get the support I need." These are more of the things that I would be looking at.

So, something like a stool analysis also, I'd put that on my list. Something like a GI map, or general gut testing, they're useful but, honestly, I would say first things first would be looking at all these other numbers and letters and all the things I just said first, instead of feeling a hyper focus with the food. A lot of the times the people who are coming back, not feeling so great, like I prefaced with, they're, in general, understanding which foods they're already sensitive to. So, if you're sensitive to dairy, you're probably not subsisting only on dairy when you're getting these lab panels. You're feeling like for the most part you're kind of in tune with your body.

I think the stool analyses are great because they can be identifying underlying infections. But both from personal experience, and then from professional experience in working with clients, I think sometimes a little too nitpicky when if we can flip the script, and get our systems to be coming back up to speed from a functional standpoint that can take care of a lot of the GI issues. If we're experiencing low thyroid, and we're feeling like we're constipated okay, well, we might have stool sitting in our intestines longer. Oh so, which part do we do first? A dysbiosis? Do we try to kill off those things? Or do we actually want to increase our thyroid levels from a medical perspective, a foundational functional perspective where our gut motility can be increased naturally the way it should be? Maybe we could solve for dysbiosis from that standpoint first.

So, that's my personal opinion. A lot of people love to, and I know other NTPs like to order things like the GI map. I've had that done, again, myself. I'm a geek, so I love that information. From personal and professional experience, I think actually understanding how is my body functioning right now, before, what are these other things that are potentially frustrating my body, that seems a little more helpful, in my opinion.

Okay so, let me go through these again. So, I'm going to start with a thyroid panel. Okay so, that would include TSH, free T3, free T4, reverse T3, thyroid peroxidase antibodies; TPO antibodies, thyroid globulin antibodies; TG antibodies. Then, I'd want to be looking at serum cortisol, vitamin B12, ferritin so iron, vitamin D. And then, the sex hormones, estradiol, free testosterone, total testosterone, progesterone. And then, moving into serum insulin as well as serum leptin.

This would be a really strong panel, if you were to be able to get these for yourself, in addition to any other basic lab panels that your medical practitioner would want to be ordering for you to understand a

much more robust photo. And it's just one glimpse. When we get our blood drawn it's one point in time. But to start to have some sort of a marker and understanding what is my thyroid showing me? What are my sex hormones showing me? What is my stress hormone showing me? What are any of these common deficiencies that can be difficult for my body to be managing, what are those showing me? What is my insulin? What is my leptin? Am I sensitive to those? Am I expressing some resistance to those? I'll tell you what to do about that stuff in the next episode.

But I hope this was really, really helpful. I don't want to just like cut and run, but those would be the panels that I would suggest. Those would be the panels that we can have conversations around to then start to modify and modulate in order to help your body more fully express itself. Because a lot of the times what's happening is we might not just be getting the nutrients, we might have some deficiencies. And we, also, might not have our bodies be able to feel like they can focus their time and energy on using nutrients and building blocks to fully express themselves. And, for some people, medication might be supportive, it might be helpful. That's all part of the conversation. It can all be there. The number one goal always is to help you feel more like yourself. More like you can fully express yourself emotionally, spiritually, and physiologically. So, I hope this is a helpful episode. I'll see you on the next one. And I hope you have a great week.

Okay everyone, that's all for this week. Thank you for listening to this full podcast episode. If you want more of this information every day, instead of just one podcast episode each week, consider coming over to Instagram to hang out with me. I'm [luciahawley\\_](#) over there. That's L-U-C-I-A H-A-W-L-E-Y\_. And one more thing before this episode ends, please consider leaving a review of Devoured on iTunes, so we can keep spreading the word. And together we can offer this free education, empowerment, and [liberatory 00:34:41] nutrition principles that'll change more lives. If you're someone who likes to empower other people, then please consider sharing this podcast with friends and family, and by leaving your review. It makes a world of difference.