

**Nicki:** It's time to make your health an act of rebellion. We're tackling personalized nutrition, metabolic flexibility, resilient aging, and answering your diet and lifestyle questions. This is the only show with the bold aim to help 1 million people liberate themselves from the sick care system. You're listening to the Healthy Rebellion Radio. The contents of this show are for entertainment and educational purposes only. Nothing in this podcast should be considered medical advice. Please consult your licensed and credentialed functional medicine practitioner before embarking on any health, dietary, or fitness change. Warning, when Robb gets passionate, he's been known to use the occasional expletive. If foul language is not your thing, if it gets your britches in a bunch, well, there's always DisneyPlus.

**Robb:** Welcome back, everybody. Welcome back.

**Nicki:** We're live, another episode of the Healthy Rebellion Radio. This is episode 129. Good morning, hubs.

**Robb:** Good morning. It's a frosty day in the neighborhood.

**Nicki:** It is. It's a beautiful day in the neighborhood because it is like a winter wonderland.

**Robb:** Won't you be? Won't you be my, neighbor?

**Nicki:** I shall. Are we dating ourself? Everybody knows that, right?

**Robb:** I don't know.

**Nicki:** Okay. Well, the youngsters might not, but everybody in our generation knows Mr. Roger's neighborhood, I believe. Anyway, I don't know where we're going with this. It's beautiful outside. We've gotten a lot of snow in the last, what, 36 hours?

**Robb:** Yeah, at least.

**Nicki:** A lot of snow. Yeah. Yeah. So the kids are ecstatic. Zoe is desperately wanting a harness so that she can hook Grizz up to a sled and have him pull, probably Sagan, but she wants to ramp it up so that he can maybe pull her, but we'll see.

**Robb:** And yeah, it is just hilarious. Zoe is fascinating in that since she was probably 18 months old, she's tried to harness up chickens and stuffed animals, and there's just been this-

**Nicki:** There's this animal affinity.

**Robb:** Yeah, yeah.

**Nicki:** Animal training thing that's been lurking. So we're trying to foster that.

**Robb:** Yeah. That'd be getting too weird.

**Nicki:** Well, no, lots of people... It's a thing, harnessing dogs and people will have their dog pull them on cross-country skis and sleds and all kinds of things. Even in the summer, people will harness their dogs and have them pull them on bikes and skates and stuff. So it's a thing. We just don't have the proper harness for that. So she's trying to do it with the collar, but I'm like, "No, this is going to hurt him." So anyway, the harness is coming. Trying to think of any other news. It is finally November. I don't know why I said finally, but it is November and 2022 is rapidly coming to a close.

**Robb:** Soon it'll be the new year.

**Nicki:** Lots of ominous stuff being reported in the markets. But hey, we are in the me that is on this adventure. Is that the quote?

**Robb:** That is the quote.

**Nicki:** Robb's favorite movie, I think back when we were doing trivia for the Healthy Rebellion Radio podcast, we used to do these trivia episodes, and I think we asked that question. What is your all time favorite movie?

**Robb:** Grosse Pointe Blank.

**Nicki:** Yeah, so I'm on the me that's on this adventure. All right, hubs, news topic.

**Robb:** News topic is a good friend sent me this one. And the title is Losing My (Vaccine) Religion, A Doctor's Journey from Hope to Despair. It's from a guy, Dr. Turner. I was not familiar with him. And for some context, this guy started off a hundred percent kind of team vax, COVID's going to kill you. And clearly COVID does and did kill a lot of people. He starts the story off with one of his friends who was 70 some odd years old, being taken early from COVID. But then it tracks his kind of psychological transformation over time as different bits of the story, different bits of the narrative didn't really add up. I think there are good faith actors like this Dr. Turner who are showing some transparency around the transformation that they had. And he became a fairly vocal critic of forced vaccinations, particularly in the reality that these vaccines are leaky and they don't prevent transmission and making your own cost-benefit analysis and whatnot. But now we have these bubbling up little bits of stories of, "Gee, whiz, guys, maybe we should have some sort of a COVID amnesty."

**Nicki:** Pandemic amnesty.

**Robb:** Pandemic amnesty. "It was kind like a drunken night and gee, whiz, we didn't really mean it all."

**Nicki:** "Let's just kiss and make up."

**Robb:** Yeah. And this is what fucking narcissists do, is they completely ignore the damage and the hell and the chaos that they unleash on the people around them and just want it all to go away, particularly if you finally hem them in, finally show that they were a piece of shit and they didn't know what they were talking about and they were being abusive. Then it's like, "Oh, well, we can just kiss and make up. And I mean, you should forgive me. I mean, forgiveness is noble and all that type of stuff." And this is different. This Dr. Turner piece is different, But I think that it's important to acknowledge folks like this gentleman who went through a pretty remarkable transformation just based off of the facts and the reality that he saw in front of him as a clinician. And then we have other people that are now, as all the chickens are coming into roost...

God, there's this article that I'm still carving my way through, that's talking about there's some sort of publicly traded funeral home. It's like an international thing, and it's a conglomerate of funeral homes. And historically, it's never been a real growth industry, but it's been very consistent because people die in a remarkably consistent pattern. And this is part of that article, which maybe I'll bring that one up next week and dig into it a little bit more but at best, there's a one, one and a half percent variation from one year to the next. A little bit up, a little bit down, but very consistent. People are born, people

die. Investing in this thing, it's just going to be a good little work horse deal. Well, this organization is up 15 to 18% off of what its normal baseline is.

And you can only hide this stuff so many goddamn ways, but you literally can't hide all the bodies. And one of the key points that they point out in this stuff is this 15% uptick is not attributable to the COVID deaths. This is aside from the COVID deaths is the way that this article plays out. And again, I have not fully vetted this out, fully looked at it, but yeah, just give this Dr. Turner piece a look, and maybe we will discuss these amnesty topics and things like that a little bit more as we move forward.

**Nicki:** The amnesty topic, I haven't seen many people from the side of the aisle who were just wanting to ask questions and have a conversation, I haven't seen many of those people embracing the amnesty.

**Robb:** Yeah, me neither. And maybe it's because after you've spent two years being called a racist, a grandma killer, and everything else, for just wanting to ask questions-

**Nicki:** And not being able to go to funerals and not being able to hug your loved ones as they lay dying or be with elderly relatives who-

**Robb:** Births.

**Nicki:** Births, losing jobs, closing businesses. Family businesses that have been generationally operational, closed. Forgive and forget is a-

**Robb:** It's a laudable thing but when you've been held literally at gunpoint and abused for the better part of three years, and I don't want-

**Nicki:** Being told that you're-

**Robb:** That you're a horrible person.

**Nicki:** I mean, Chris Cuomo had a quote that was like, "The biggest threat to America are your fellow Americans," meaning-

**Robb:** In what regard?

**Nicki:** Meaning the ones who chose not to get vaccinated. So you had all of this divisive messaging coming from all sorts of media angles and politicians and anybody with a blue check-

**Robb:** I didn't.

**Nicki:** Not you, a lot of them.

**Robb:** And I guess we're short-ish on time, so I don't want to belabor this thing too much, but I think it is worth discussing. Nicki and I talk about this stuff a fair amount, just kind of where we're going and Trudeau in Canada just rolled out this bill that's truth-

**Nicki:** There's some that's proposed, Bill number 11, which is basically any opinions that are counter to the government stated position are, I don't know if they're punishable or whatever it is, but his little speech was just, "Gosh, we've got to deal with these extremists like the ones that were protesting this winter." And anything that's inconvenient for the government is automatically in this misinformation, disinformation,

bad, extreme, right wing, violent. Like slap any adjective you want on there, and that's what you get.

**Robb:** And again, just for context, this ranges from the vaccine, the virus, to all kinds of social justice topics like having an opinion on maybe the nuclear family is a good thing, net-net. But if the state decides, "No, that's not good," which when the state goes down this kind of Marxist revolutionary thing, the nuclear family is always the enemy, always the enemy. And we're in a position now where if the state says, "No, no, no," and people think this is hyperbolic bullshit, but it's not. And then even just as mundane as, "I want to feed myself and my family the way that I feel is best for our health," and, "Well, the stuff you're eating is causing climate change and climate change is racist," and on and on and on.

**Nicki:** Greta Thunberg doesn't think you should eat meat, babe.

**Robb:** Well, there you have it. And so we're in a position right now where we're kind of teetering on this precipice that I'm not honestly super optimistic that we're going to turn the corner on. It's possible we might. We might stuff this genie back in the bottle. We live in an area here in northern Montana that wildfire is a hell of a problem. And what you need is defensible space around the property you don't want to burn. And if we manage to turn this shit around, if we're able to get back to a spot where discussing science, which is what science really is, it's inquiry and discussion and debate, and it's not rarely all that much that is settled. And if you think it is settled, you just let it go a couple years and you discover there's some wrinkle or nuance to it that you didn't consider.

But if we're able to stem the bleeding that's been happening around all this stuff, we're going to need a defensible space. And part of that defensible space is holding people accountable for being absolute shitheads over the last three years. And fortunately, the internet does have a long memory, and I'm not sure exactly what that looks like at this point, but there definitely needs to be some accountability around that stuff in addition to just fostering these opportunities for discussion and seeing that people can transform. And this is where I really think that this Dr. Turner piece is super valuable. Okay.

**Nicki:** Okay. Healthy Rebellion Radio is sponsored by our salty AF electrolyte company, LMNT. Winter is coming. In fact, it's already here if you live in northwest Montana. But that doesn't mean that your electrolyte needs decrease. And the good news is that LMNT doesn't have to be consumed cold. So if you're chilly or just want something warm to drink, try drinking LMNT in hot water. Chocolate Salt in hot water is amazing. Lemon Habanero in hot water is my go-to. Absolutely amazing. Even Orange Salt or Raspberry Salt in hot water, they work. It's the perfect way to hydrate, get in your electrolytes, and stay cozy when it's chilly outside. So you can grab yours at [drinkLMNT.com/robb](https://drinkLMNT.com/robb). That's drink, L-M-N-T.com/R-O-B-B. And I know I put out a teaser a couple weeks ago, and I'll put another one coming soon. There will be another cozy flavor for you to try.

**Robb:** There you go.

**Nicki:** There you go. All right. We've got three questions today. The first one is from Justin on joint pain. "Hi Robb and Nicki, I must start with the obligatory first time caller, long time fanatic. I have a varied medical history, but the main highlights being I'm six foot tall, I was 360 pounds in 2016, down to 185 pounds in 2018. Keto and fasting made this possible. I meandered back to 215 with the help of higher calories and some light weight training. I also don't have a thyroid due to papillary carcinoma. My maintenance calories

are really low for some reason, 1700 calories. But I eat my protein first, between 160 and 180 grams, and tend to feel better if I fill the remaining calories with fat rather than carbs. I know I'm healthier without the weight. My cholesterol, triglycerides, A1C are all on the lower end of normal now, but I don't feel better." "Mild lethargy and joint pain are what plague me. The lethargy is a struggle but isn't debilitating. The joint pain is just frustrating. Knees, ankles, hips, shoulders and elbows nag enough to make even body weight workouts a challenge. The pain in my wrists and hands can be excruciating. I'm a couple years post carpal tunnel release as well. No redness or swelling. I've been cleared for gout as well as rheumatoid arthritis. And then he has some test things that were positive, but nothing warranting more than a pat on the back from the rheumatologist. Turning to you, Robb, because I've heard you mention hand pain in the podcast, but I'm not familiar with your backstory there." "The hardest part about all of this is that I unintentionally removed red meat from my diet, temporary bro diet with lots of chicken and my hand and wrist pain almost vanished. Spoiled myself with a homemade double cheeseburger the other night and woke up with throbbing hands and wrists. As a devout Ketoer and meatasaurus, I was all in on sacred cow and even considered carnivore as my starting point for an elimination diet to test various sensitivities. Now my brain just doesn't know how to process this recent information. Can you help me make sense of all of this? Justin."

**Robb:** Man, that's a lot to unpack. First, I think no matter how attached we are to paleo or Keto or carnivore or whatever, the clinical outcome is the most important thing. And so if you have a food that you add into the mix that gives you problems, I would absolutely pay attention to that. On the rheumatoid arthritis screening, the fact that you've got some activity there... The bugger with some of the screening, so like... Oh gosh, what is it? The Mast Cell Activation Syndrome, for ages and ages, people would get blood work and they would be sick. It'd be kind of like fibromyalgia, which for ages, the medical community said was a non thing and now it's acknowledged as being a thing, which is again, science fucking evolves. If the science was settled 30 years ago, then we wouldn't have a concept of fibromyalgia, chronic fatigue, some of that being Lyme disease related and whatnot, and other issues there, metabolic and whatnot.

But diagnoses have to fit into these certain buckets. And if we're talking about an orthopedic issue like a broken bone, it's kind of cut or dry. If we're talking about pregnancy, it's binary. It's a yes or no. And then in so many of these immune function scenarios, there's kind of a spectrum. And in going back to the Mast Cell Activation Syndrome, for ages, people knew they felt like shit, they knew that they had all these problems going on, and they'd different types of elimination diets and, "Oh, maybe this would help," and that would hurt and they would get blood work. And the allergy side of the immune response screening was kind of elevated, but not enough to really tick the box of, "This is an allergic reaction." Some of their autoimmune stuff was elevated but not enough to tick the box there. And so what was missed is that there was just this general broad uptick in immune response across the board, not enough to kind of like, "Oh, you have rheumatoid arthritis," "Oh, you have multiple sclerosis," or on and on.

But there was this general enhanced immune response which downstream was likely leading into systemic inflammation and significant problems, at least from a clinical perspective of just living. And now we have some other categories that we can stick on people like Mast Cell Activation Syndrome, and we can think about histamines and different stuff like that. Okay. So the main thing that you have to look at is what is it that's causing this stuff? And for me, what was a bugger is dairy ended up being a pretty big factor for me and dairy protein specifically.

And the difficulty there, the shitty thing about that is that if I eat a tub of yogurt, which I in the not too distant past used to routinely do, it felt wonderful on my gut. I digested it well, my blood sugar was good, I enjoyed it. But for the better part of three years, I had this non-trivial amount of hand pain and joint pain that I mainly attributed to jujitsu. I thought, "Ah," I'd get a little tweak here, get a little tweak there. I don't do a real grip intensive jujitsu game, but still it's a grappling sport. And maybe my hands are getting kind of dinged up. For my birthday, I guess a year ago. Yeah, this last-

**Nicki:** January.

**Robb:** January.

**Nicki:** January of '22, Robb's favorite cake is a cheesecake. And it's easy to do those Keto. So I made a Keto cheesecake and you felt terrible afterwards. Your wrist pain noticeably ticked up.

**Robb:** Well, my left pinky, which has been a problem for a long time, and you can noticeably see that joint is bigger, was very painful. But then my right hand, which had never really hurt up until that point, the pinky, the metacarpals up into my wrist and then all the way across up to my middle finger into the metacarpals, it was on fire and screened it for a gout. And it wasn't gout. My blood work got fucked up trying to see if it was rheumatoid arthritis. The lab just didn't do it. And I had gotten the blood work done, went on some prednisone, and an elimination diet. Thankfully, was able to knock that stuff down to a point because I mean, I couldn't sleep at night. I actually wasn't so hot.

**Nicki:** Really, really uncomfortable.

**Robb:** It was pretty terrible. I managed to knock all that stuff down. I've had kind of a mild flare of late and I actually added some fish oil into the mix and that seems to be helping a little bit. But dairy is a big deal.

**Nicki:** Dairy kind of stuck out with me and I'm not sure... So he's saying that he's had this pain eating Keto, and so I don't know how much dairy is included in his Keto diet. And then I'm wondering, when you did your temporary bro diet with all the chicken, was there any dairy? He's attributing it to the double cheeseburger, he's attributing it to the meat that he ate rather than the chicken, but it could have been the cheese on the meat.

**Robb:** Right. I got it. So interestingly, I don't seem to respond particularly negatively to whole cream or butter. I don't do a ton of it because it does tend to raise my lipoproteins. So I'm in this thing of, "Is my gut going to kill me? Is my autoimmune disease going to kill me? Or am I going to have a heart attack from just being able to eat enough calories and figure out a way to do it?" And when you're doing Keto, I got to say, dairy products like cream and fatty cheese-

**Nicki:** Cheese is a big one.

**Robb:** And everything are really handy. But I guess my big thing here is I wouldn't immediately throw red meat under the bus. Maybe it is. And even in that scenario, I've encountered people that like a steak doesn't cause problems. Ground beef does. The ground beef, sometimes what they need to do is get a steak, grind it if they want a hamburger, and then fix it and eat it because to some degree, the histamine production, the bacterial activity that occurs in the ground beef, people who are really, really reactive to different scenarios like this Mass Cell Activation scenario and histamine and whatnot, they can't

do ground beef or they have to do ground beef under a really specific circumstance. But out of this whole story, I would definitely look at dairy as the most likely problem here.

**Nicki:** Cut it and just eliminate that.

**Robb:** Absolutely eliminate that.

**Nicki:** In every form to start.

**Robb:** Yeah. And I can do a little bit of goat dairy and it doesn't give me seemingly any problems, but I don't pressure test that a whole lot. But that's kind of the place that I would look first and then I would look at the types of beef that you're doing and maybe see if steaks versus hamburger... The deal with the steak is just that it doesn't get the same marginal amount of bacterial activity, which can feed into histamine production which can be a problem in this thing. I wouldn't be afraid of maybe dropping in a tablespoon of good quality fish oil in that whole story. Again, because my hands started kind of flaring up again, I did some reading, "Does this help? Does that help?" There were some great studies that suggested that for RA specifically that fish oil was beneficial. And I've been back on using it consistently and my wrist is definitely a lot better.

**Nicki:** Justin, let us know.

**Robb:** Yeah.

**Nicki:** Drop the dairy and let us know if you notice a difference. Okay, our next question is from Corey on Achilles tendon rehab options and diet. "Hi, Robb and Nicki, love the show and the well-balanced opinions the two of you provide. I recently tore my Achilles tendon shooting some hoops. The ultrasound revealed a Grade 2 tear. I'm fairly active, playing hockey two to three times a week and weightlifting a couple times a week as well. I'm a 45 year old high school physical education teacher, so on my feet most of the day, as well as demonstrating sports specific skills in class. My questions for you are, one, which rehab option do you think is best for my case, surgical or non-surgical? Two, what sort of dietary interventions could I be making to optimize my recovery? And three, what can people do to prevent Achilles tendon injuries from occurring or reoccurring? I live in Ontario, Canada, so although the healthcare is free, it does move at a slower pace for access to orthopedic surgeons and sports medicine doctors. Hope you can shed some light on this for me. Kind regards, Corey."

**Robb:** So Corey, on your first question about surgical versus non-surgical, totally above my pay grade. I don't know what the right answer is there. What I would recommend, if I were in your shoes, I would try to get the best sense of, "Okay, it's a Grade 2 tear." I'm assuming that there was an MRI, and you've got a sense of where in the tendon belly that this tear occurred. I would do a deep dive into what surgical repair success looks like versus rehab success with as close a matching as you can get to the type of injury that you have. And then go from that. And this is the funny thing, again, not to just make the whole show all politics and angst towards COVID, but goddammit, there was a day not that long ago, when you went to a doctor and-

**Nicki:** Then you got a second opinion.

**Robb:** And then what did your first doctor tell you? Go get a second opinion. The science isn't fucking settled. And Malcolm Gladwell has talked about this in his books like Blink and some other pieces that he's written. There were 10 oncologists that were provided, I

think, a hundred cancer cases and there was no consistency. Each person had a different take on the same material, and they were all experts. Pointing into the sphere of clinical medicine where we actually decide to do things, we try to rely as much as we can on science, and then there becomes a certain amount of art and also faith in what you are up to. My sense from people, like we knew Lonnie ages ago who had Achilles tendon rupture, we've known quite a few people who've had Achilles tendon ruptures who did a surgical fix, and it's a nontrivial period of time in a boot and rehab and their leg is tight and all that type of stuff, but my sense is that people respond pretty well to that. So I wouldn't automatically-

**Nicki:** Dismiss it.

**Robb:** Dismiss it. There are cases for when that might be appropriate. There's always a risk when we have surgery. I mean secondary infections and there's just risk associated with that. But when we are trying to heal something... Did he mention his age? He's 45 years old-

**Nicki:** 45.

**Robb:** Not super old, also not a spring chicken. So healing is not the same as what it always has been in the past. Some folks, and I don't know, could be difficult to get access to this in Canada, but peptides, the BP-158 and some things like that do seem to offer some promise in rehab. So he asked for dietary interventions.

**Nicki:** Yeah.

**Robb:** I mean just a good anti-inflammatory diet, whatever that is for you. You don't want big blood sugar excursions. When the body is healing, if we have these blood sugar highs in particular, you are glycating the proteins, they're sticking together and they just don't heal as well. Something like a Ketogenic diet I think offers some non-trivial benefit in wound healing because of the mitigation in inflammation. Although, we don't want zero inflammation. There was a podcast on STEM-Talk, and if I remember, we'll stick this in the show notes where they talked about a little bit of fish oil and then a quarter of a baby aspirin. So a baby aspirin is 80 milligrams of salicylic acid and they cut that into quarters and they're doing a tiny little piece of that for this selective pro-resolution modulation process because it is part of our recovery.

We have an initial inflammatory process that we must have, but then the resolution which happens on the backside sometimes gets bugged up. And so tweaking that resolution process could be beneficial. And this is another angle that could be brought to bear on that. So like Ketogenic diet, reading up on these selective pro-resolution modulators, and then what to do to prevent and recover from this. The tendons are largely avascular. They don't have a ton of blood flow. What is super beneficial for them are really high rep activities and mobility, so good stretching. And this is where some FRC, can stretch type stuff that actually puts some emphasis on all the little fiddly bits joints and whatnot. And then talking to Coach Summer and gymnasts. Gymnasts almost never experienced Achilles tendon ruptures and these are people that are... A tumbling run is-

**Nicki:** Super explosive?

**Robb:** So explosive even though it's a-

**Nicki:** Spring floor.



**Robb:** Spring floor and everything like my God. But when you look at the injuries that occur in gymnasts, Achilles tendon ruptures are not one of these things that are really high up the list. And they do a mountain of high rep toe raises and full range of movement, lots and lots of stretching, toes in, toes out. And so I can't see that being anything but a good thing. But clearly, again, you'll have to start that at appropriate loading. I have heard of people who have mild tendon ruptures. Initially what they will do is toe raises while standing in a pool. They'll get chest deep in a pool and so they're able to go to the-

**Nicki:** And when you say toe raise, you mean like a calf raise?

**Robb:** A calf raise, yeah.

**Nicki:** Okay.

**Robb:** Yeah.

**Nicki:** I was thinking you meant lifting the toes up.

**Robb:** No, no.

**Nicki:** Yeah, okay. Calf raise.

**Robb:** Calf raise, but they'll stand like nipple deep in water so they know exactly where they are. So they're getting a certain amount of displacement and they accumulate a hundred reps, 200 reps, 300 reps or whatever. And then they can go back there over the coming weeks and then they go from nipple deep to couple inches lower and slowly what you're doing is increasing the loading that you're going to experience with that. And just high, high reps to lots of blood flow through your legs.

**Nicki:** And have big ass calves when you're done.

**Robb:** Hopefully. Hopefully. It's never worked for me, but yeah.

**Nicki:** I'll also mention there seems to be an increased occurrence of Achilles tendon tear for people who've been previously on antibiotics.

**Robb:** Oh yeah, that's a great point.

**Nicki:** And I don't know if you were recently on antibiotics before this thing, but if you do do a course of antibiotics, I think that's a time to be very careful in the activities that you choose. When we had people at the gym who were on antibiotics, we wouldn't let them do box jumps or double under. There were certain things that they would not do for a while.

**Robb:** Yeah. And we would make them do lots and lots of sled drags, really pushing off of the toe, doing it barefoot oftentimes just so that they get the maximum articulation of the foot and all that. It's not all antibiotics. I forget which class of antibiotics, and it's a good four months post-antibiotic treatment that the tendon rupture potential is there. But if you had been on antibiotics, I would look into what the... Cipro, I think the whole family that Cipro is part of is in that tendon rupture potential. So that's a great catch.

**Nicki:** Okay. Alrighty. Our last question is from Krista about PCOS in a 14 year old girl. "Hi, guys. Love all that you do. 15 years ago, my functional medicine doctor put the Paleo Solution book in my hands to help with my gut issues and I've never turned back." That's really

cool."My 14 year old niece just got diagnosed with PCOS. To back up, she was a very sick newborn, minutes away from an ECMO machine and miraculously made a full recovery. I believe having all those drugs in the beginning of her life while saving her life has really jacked up her microbiome and created an insatiable appetite starting around two years old. She sneaks food, eats until stuffed. She's thrown up in the past from too much food and hence she has steadily put on weight and now is at 195 pounds. She is the most incredible kid and my heart is breaking for her. Her parents have kept her active through sports and helped her keep a pretty clean diet, but nothing super steady. And as she gets older, they lose more of how and what she eats. Her most recent doctor's appointment revealed the PCOS and there was talk of birth control pills and metformin. The next step is an endocrinologist and a natural path. Robb and Nicki, what would you do if this were your kid?"

**Robb:** Do you want to jump in on this one?

**Nicki:** Gosh, this is a tough one. And obviously this aunt, her heart is breaking, my heart is breaking for her too. My thought is she's 14, so she's old enough and mature enough to have a real conversation about what having polycystic ovarian syndrome means, what that means for her health now, what it means for her health in the future, fertility issues, potentially just generally. So I think I would start there. And obviously this is a sensitive subject. She's 14. This is right in the time when you're-

**Robb:** Finding yourself.

**Nicki:** You're finding yourself, you're going through puberty. The comments and opinions of your family and peers really, really matter. It's a tricky, tricky time, but we have a 14 year old or a 15 year old in our life, male. But we can have wonderful conversations with this kid and I feel like this is a time to not try to coerce or figure out some sneaky plan to get her to do the thing.

**Robb:** You want to talk a little bit about that? Because when we first met him, he had some really significant acne. And this kid is pretty remarkable too. He's just pretty buttoned up. But I just threw out there, I'm like, "Hey, man, no judgment, but from my understanding, dairy is a big factor in acne. So if you ever wanted to fiddle that, you've got a lever you can pull. If you ever wanted to be show ready and not have the degree of acne got, I would dial the dairy back." And refined sugar can be a problem too. But I would put it probably like 90% of the problem is dairy, can be certainly exacerbated by sugar. And then we didn't see them for, I don't know, couple of weeks. And when he came back, his skin was stunningly better and it'll kind of vary. We'll see him sometimes and it's a little bit worse. We'll see him sometimes and he's a little better.

**Nicki:** He knows what leads to that. He has control over that. Even Zoe. Zoe's 10 and she'll occasionally get a little pimple here or there. And I've pointed out, because dairy definitely gets me, and if I knew this when I was a kid, when I was a teenager in high school-

**Robb:** Your acne was so bad.

**Nicki:** My whole side of my dad's family has pockmarked faces from acne. And I don't thankfully have a lot of scarring, but I can get the really big cystic kind of zits if I really go after dairy. And so just talking to Zoe, "The cheese can really impact this." And so she gets a little pimple, she's like, "Mom, I don't want any cheese. I'm not going to have cheese on my taco tonight." And so I feel like at 14, you can be having just a real conversation with this girl.

**Robb:** And I think to the degree that we've had success so far with this is we couch this as, "This is a decision you can make. We're not judging you. This is just a lever that you now have control on if you want to pull that lever." And then that way there's not the judgment, there's not the trying to control them. I think you start trying to hide food and stuff like that.

**Nicki:** You don't want to do that.

**Robb:** The kids will wear you down. They will win that battle. They will absolutely win that battle.

**Nicki:** And I think talking... Let's see, this is Krista. Krista's saying her niece has this insatiable appetite. Maybe she does and maybe she's eating in a way that leads to an increased appetite like Robb has talked about in *Wired To Eat* and hyper palatable foods. So maybe talking about protein first and how it's the most satiating macronutrient. If we fill up on protein, then we tend to not want as much other stuff. Or even if you want some, you'll tend to eat less of it because you've gotten a big chunk of protein. And I don't know if her parents are the right people to have this conversation with, what that relationship is, maybe it's you as the aunt, maybe it's somebody else, but she's 14, she's old enough to understand. And again, like Robb mentioned, "I just want to share this information with you because maybe you'll choose to implement it now, maybe you won't, but just so it's in the back of your head and it's something you can noodle on."

**Robb:** And again, not to turn this into political fest, but there will be people out there who would be like, "You're horrible people. Accept her for who she is, healthy at any size," blah, blah, blah, blah, blah. You don't have to make this about the weight. But if she at 14 is being diagnosed with polycystic ovarian syndrome, this bodes terribly for the rest of her health life. The likelihood for being able to be fertile and have children is dramatically altered. And I know that breeders are horrible people because we are destroying the planet, but fuck you to the people who believe that. It's kind of like if somebody... I have been struggling for even an analogy to this, but it's literally like you're walking around and you have a smoldering ember.

Let's say, you have long, beautiful hair and you have a smoldering ember on your shirt that is migrating towards your hair and your hair is going to burst into... You're just arming the person with some knowledge that, "Hey, there could be some really significant problems here." One of the most difficult things to impress upon young people, and I remember this because people tried to help me, looking to the future seems impossible because one day seems like an eternity when you're young. And so that long term thing is difficult. But one thing that kids and young people and really everybody does seem to respond, at least to some degree, is being empowered, like, "You are in control and you can make the decision."

**Nicki:** And even sharing some of this, I mean, I don't know how much she knows about... I mean I'm sure she knew, she was in NICU and all this stuff, but just telling her, "It could be that all of the stuff that went on in the early days of your life has led to this being a big challenge for you. And we can't change that. But here are some things that we could try that could help change. Your life doesn't have to stay-"

**Robb:** "Be defined by that."

**Nicki:** "Here or be defined by that. Here are some things that you could try that could lead to an outcome that you might want." Another thing I'll mention, just because I know y'all have heard us talk about Coach Cinnamon Prime before she's done some things in the

rebellion for us. She's a mindset coach and she's worked with people of all ages, including teenagers. And she might be somebody to talk to too, just from that mindset perspective. One of the things that's been the hugest takeaway or a big help for everybody going through our resets in the Healthy Rebellion is the concept of, "Just for today." So our brains, like Robb just mentioned, are not wired to, "I'm going to eat protein first and I'm not going to have dairy for the rest of my life." You say that in your head and you make this huge goal and-

**Robb:** Very few people do that and make that more.

**Nicki:** It's so daunting that we sabotage and two hours later, you're having dairy and carbohydrates. But if you say, "Okay, just for today, I'm not going to put cheese on stuff. Just for today, I'm going to make sure that I eat my protein first. I'm not going to necessarily not have the potatoes or the rice or whatever, but I'm going to eat the protein first." And then tomorrow, "Just for today, I'm going to do the thing." And so it just allows your brain to really wrap itself around this shorter timeframe and the success that people see when they do that is indescribable. It's really, really huge.

**Robb:** One, Cinnamon is amazing. And we personally know of folks that they would've probably killed themselves or they were in a position to do so and she's been able to work some magic with these folks by just providing them with some tools and some context to be able to-

**Nicki:** Understanding how your brain is working.

**Robb:** And so one, a vote for her or someone like her to do that. And in this really micro goal planning, when I did that I-CAVEMAN! show, it was so miserable. I mean, I was so hungry, so cold, so tired. And the only way that I was able to keep doing it was in my head, I would just say, "Okay, it's morning. Morning sucks. I don't want to do this anymore, but I'll stay here till noon."

**Nicki:** Because you could have quit at any time.

**Robb:** Because I could have quit at any time, but it's like, "Fuck it, I'll just stay here till noon." And then noon would hit and it's like, "Well, I'll just stay here until "dinner time,"" even though there was no food to be had. But I would do that and I was like, "Well, I made it this far. I mean, I don't sleep that well, but I can sleep through the night again." And that's the way I did 10 days of that. It was literally about two and three hour chunks. And each time, it was always with the out. It's like, "Eh, I'll just quit later." And then I would hit the later, I'm like, "Well, I already did that. I'll just keep doing this." And I can't emphasize how powerful that is because trying to think about a lifetime of change is almost impossible, really, really daunting, and so you just have to do it just for today, just for this moment, sometimes just for this hour to be able to get through.

And this is all good tools that would help this young woman regardless of her health. It would help her on so many other levels potentially. I know I would've loved to have better understood this stuff when I was 14. I could have grown up to be somebody then, but yeah. And props to you for caring about this. It's an important thing. And our kids and this next generation are really important and their health is not generally great, and we can't just fucking roll over and accept it. We can't. We also can't go barnstorming in and be the same-

**Nicki:** Finger wagging it.

**Robb:** And finger wag and act like we've got all the answers. We can be facilitators, but at the end of the day, we have to have functional adults who can think and rationalize and understand the limitations of our own physiology and psychology and evolutionary biology and everything and then figure out strategies for how to get out of it what we want.

**Nicki:** Krista, I hope that was somewhat helpful and-

**Robb:** Would love to hear back from you.

**Nicki:** Would love to hear back from you.

**Robb:** Yeah.

**Nicki:** For sure. All right. That is our third question this week. I'm trying to think if there's any other things to share. I don't think so. You got anything?

**Robb:** Nope.

**Nicki:** Nope. Okay. Please check out our show sponsor LMNT for all your electrolyte needs. You can grab those at [drinklmnt.com/R-O-B-B](https://drinklmnt.com/R-O-B-B). Remember, the value bundle is the very best, what did say, bang for your buck. Buy three boxes, get the fourth box free. And you can do that at [drinklmnt.com/robb](https://drinklmnt.com/robb) and hope you all have a fabulous weekend. Get outside. Even if it's not sunny, get outside and hug your loved ones and we will see you all next week.

**Robb:** Bye, everybody.