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**Megan** [00:00:06] Before we get started with today's episode, I would like to quickly read you our podcast disclaimer.

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[00:01:13] All right. And now we'll get started with today's episode. Hi, everyone. It's Megan Ramos here with another episode of The Fasting Method podcast. Today, I'm joined by my incredible co-host, Dr. Terri Lance, and a very special guest. Cynthia Thurlow is a nurse practitioner, author of the bestselling book, Intermittent Fasting Transformation, a two times TEDx speaker with her second talk having more than 14 million views, and the host of the Everyday Wellness podcast. With over 20 years of experience in health and wellness, Cynthia is a globally recognized expert in intermittent fasting and women's health and has been featured on ABC, Fox 5, KTLA, CW, Medium, Entrepreneur, and the Megyn Kelly Show. Her mission is to educate women on the benefits of intermittent fasting and overall holistic health and wellness so they feel empowered to live their most optimal lives. Cynthia, thank you so much for joining us today.

**Cynthia** [00:02:30] Thanks for having me. I've been really looking forward to connecting with you both.

**Megan** [00:02:34] It's been such a pleasure to be a guest on your podcast several times now. I always really enjoy our conversations. There's so much alignment and Jason and I just think you're such an incredible contributor to our community, and it's also really awesome to hear other women talking in the fasting space. When Jason started talking about fasting, intermittent fasting, there is a small handful of people doing it, largely dominated by men, and now we're getting more healthcare professionals involved, but more healthcare professionals that are women, which is so important, I think. Cynthia, you've authored the book Intermittent Fasting Transformation: the 45-Day Program for Women to Lose Stubborn Weight, Improve Hormonal Health, and Slow Aging. Terri and I, we primarily see a lot of women, and these women always feel defeated, that there is no hope for them. And one of the things that we were chatting about before the podcast is this idea that fasting might be too much stress for the female body, especially given all of the stress that we are under today. It's a wacky world that we're living in. Women not only are out there working, raising families, doing everything, and we are told constantly that fasting is just too much stress for our hormonal health. So we thought it'd be a great thing to pick your brain about today.

**Cynthia** [00:04:15] Thank you. Yeah, I think that, you know, I sit in complete gratitude that Jason's work actually brought me to your work and brought me into your space. And intermittent fasting on so many different levels is such an important strategy. I mean, it is

our birthright. We wouldn't be here as a species if women and men were not able to fast. But much like everything in our society, if a little bit of something is good, then more is better. That's kind of the mentality that-- if a little bit of exercise is good, then more is better. If a little bit of restriction is good, then more is better. And the same thing kind of applies to fasting. I've just been able to witness thousands and thousands of women and support them through this process and I've started to see this emerging trend. I really can't fault women for wanting to find a solution to the problems they're experiencing and, certainly, as a middle-aged woman, so many women feel like they're doing all the right things and nothing is working. And so we want intermittent fasting to be the one thing that's going to fix the weight-loss resistance, the fluff that no one is-- or people that are frustrated with, you know, not being able to sleep well, just not feeling like they have as much energy.

[00:05:33] And so I think it's really the message that I think all of us embrace is being gentle and kind to yourself as opposed to trying to force outcomes, which I think has unfortunately become the kind of mainstay. You know, when you look at a broad landscape on social media, there's a lot of forcing of things to make-- either for weight loss or for caloric restriction or macros. I mean, there's a lot of forcing peo-- and I'm saying self-intended forcing to do things. And yet I think that what I've learned is we really have to be attuned to the communication that our body is trying to tell us, whether or not that's, "I didn't sleep well last night. This is not the day to do a 36-hour fast." "I didn't sleep well last night. This is not the day to do CrossFit for the fifth day in a row without a day of recovery." [laughter] "I'm in a particular time in my menstrual cycle. This is probably not the time to ask my body to do these really prolonged, intricate fasts." And so I really encourage women to understand that we are each a bio individual and that each one of us needs to do things a little bit differently.

[00:06:38] And so I've started speaking out more on social media about this, just to say, you know, maybe that OMAD every day, 30 days out of the month, is not serving you. You know, are you able to get to a point where you can consume enough protein or is the fact that your hair is falling out, your thyroid's a hot mess and you're exhausted? Are the things that you're doing strategy-wise, are they serving you? And so really encouraging women to get in touch with what their body is trying to tell them and to certainly-- I'm not suggesting-- I mean, I love fasting. It's going to be something I embrace and I believe fervently in, but I also think that, you know, 12 hours of digestive rest for some people might be all that their body can manage if they're going through a divorce or a move or some other stressful circumstance. And there's no shame in that. And so I'm just echoing concerns of things that I'm seeing within my own clients and, you know, across social media when people are asking us questions to just encourage women to be attuned. And this applies to men as well, but to be attuned to what your body is trying to communicate to you and to not force things. I think I can't say more simplistically than that, that I think in many ways we do ourselves a disservice if we are attached to a particular outcome. And it's not perhaps, at that time in your life, it's not a realistic outcome for you to be pushing yourself towards. Maybe you just have to take some time to rest, regroup, rethink the strategy that you're looking at, and course-correct.

**Terri** [00:08:10] Absolutely. Cynthia, I'm excited to hear you talk about this because I certainly see a lot of people come to us and, you know, they've got six workouts a week, some days two workouts, and they want to increase their fasting. So I'm curious for you and in your work with people, how do you help people gauge what is the right amount of stress for their body and what is pushing their body too far, and how to gauge that that they can do to help themselves in this journey?

**Cynthia** [00:08:44] Yeah, it's such a good question. I think first and foremost, recovery days are important for everyone. I'm all for going to the gym and lifting heavy, but I also know that there's only so many days out of the week. As an example, I usually recommend strength training. And I'm a huge proponent of strength training. I'm also a huge proponent of zone 2 training, which is walking, you know, gentle exercise because we know that that is very, very important.

[00:09:08] So some of the things that will clue me in that someone is probably undergoing too much stress. Sleep is almost the first thing that starts to erode: either people have trouble falling asleep or staying asleep. I would say someone's energy level. Do you bound out of bed or are you dragging all morning long and then you need three cups of coffee to feel like you can get your day started? I think about (especially for women still having a menstrual cycle) are you having a menstrual cycle? Are you in a position where you've so gotten to a point where you have amenorrhea (you're no longer getting a menstrual cycle) because your body perceives you're under so much stress? So if you're still under the age of 40 and you lose your cycle, I think that is very indicative of the potentiality that there's too much exercise. I also think about, are you cold all the time? What's going on with your thyroid? I think about the fact that, especially women in perimenopause and menopause, understanding that your adrenals and your thyroid are going to take a bit of a hit. And that's not a technical word but, you know, I've started hearing more terminology surrounding thyroid-pause, adrenal-pause, menopause, perimenopause. Helping women understand that our endocrine system is so attuned to what's going on in our environment, and that includes perceived and real stress. That includes, you know, how much are you exercising? Are you getting enough sleep? And sleep is not 5 hours a night, six days a week, and then trying to catch up on the weekend.

[00:10:38] And then I also think it's how we choose to nourish our bodies. And I think a lot of people, you know, they get to a point and, again, not a technical term, but they almost break their metabolisms because they start realizing that they're shortening their feeding window more and more and more, they're eating less food in that feeding window. Then they get to a point they're not hungry anymore and they'll say, "Well, I can't eat another meal because I'm not hungry," and it becomes this vicious cycle.

[00:11:04] So I think the things that I really concentrate on is sleep, perceived stress, energy levels. You know, if someone tells me their hair's falling out, their nails are really brittle, they're bruising really easily, their menstrual cycle.

[00:11:20] I also see some thinner women in their late forties who are going into menopause earlier, and I suspect that some of it is lifestyle mediated, that, you know, if you don't have a lot of adipose tissue on your body and you have some type of stressful event, whether it's an illness, a divorce, you move, something stressful. I mean, heck, the pandemic over the last three years has been a source of enormous stress for everyone. Sometimes women are actually going into menopause earlier. And so I think it's-- I go back to that role of hormesis - beneficial stress in the right amount at the right time. And I think for many, many women (and I hate to keep picking on women that that's mostly who I deal with), we're so hard on ourselves that, you know, we want this one strategy to be the panacea to everything else. And so I find sometimes we have to go back to 12 hours of digestive rest and a wider feeding window and, you know, really nourishing the body and making sure we're getting the right macros and getting plenty of rest.

[00:12:21] It all comes back to the mitochondria. It all goes back to the cellular energy. And so I think a lot of it is the n of 1, really, you know, talking to women and finding out-- getting a really good history to find out what's going on. More often than not, it's just a lot of, again, kind of forcing an outcome. You know, they believe that losing weight is what they're they're focused on, but I always remind them that you have to do many things to get your body balanced before it will lose weight. And if your body perceives that you're starving it, that you're over-exercising, that there's too much stress, then it's going to make it much, much harder. And so we're in this society where what you see on social media, what you see in print ads is (many times) Photoshop-filtered. And there's no judgment. I mean, I'm just speaking observationally. So I think people's perceptions of what other people are doing is-- in many instances, it's wildly inaccurate. And I think that adds another layer of pressure. You know, the, "Bounce back from having a baby in one week." I mean, that's not realistic. It's like, enjoy the baby. You know, "Bounce back from having surgery in two days." Well, that's not realistic. It's like I think we've just gotten so far off course from reality in many circumstances.

**Megan** [00:13:35] With all of these stressors that women are facing, I think a lot of the time women look to see what can they control and try to micromanage that and almost be extreme with it. I share with our Community often that, when I was younger, I was going through a lot of stress. My mom was very sick. You're 14. You think that you're 34, but you are still a child. And one of the ways I tried to manage the lack of control in my life was by micromanaging my nutrition and that led me into a lot of health complications at the time. And we kind of see this, Terri and I, in our Community. You know, women are at their wits end - bad marriage, kids, family stress - and they think, "Well, what can I control? And let me try to go 100 miles per hour with that. Oh, there's fasting. It's this tool. You know, I don't have time to necessarily prepare all these great meals. So I'm-- this doctor, Dr. Jason Fung, is saying that it's okay for me to skip meals." And we see them trying to commit to doing two 48-hour fasts a week or three 24-hour fasts a week. Or there's OMAD which I don't think anyone on the planet hates it as much as I do. [laughter] So really trying to teach these women that, you know, there are great health benefits still doing 12 or 14-hour fasts windows every day, especially for woman.

[00:15:08] I was wondering, Cynthia, if you could speak towards some of these great health benefits, like that 12 hours of digestive rest.

**Cynthia** [00:15:16] Yeah. You know, I think you bring up such a good point, Megan, that we lose sight of the fact that this period of not eating, irrespective of the length of time, there are still benefits. I think people get fixated on autophagy. You know, "When does it kick in?" Well, we can't measure it outside of a lab, But when I think about digestive rest, something as simple as not eating from the time you finish dinner to the time you eat breakfast the next day, I think about, you know, basic physiologic processes like the migrating motor complex and understanding that your body needs about four to five hours between meals to really optimize it. It's almost like a street sweeper in the digestive system. But when you're eating with greater meal frequency, it doesn't have the ability to kind of push debris and parasites and other microorganisms that don't belong in the digestive system.

[00:16:02] So some of the things I think about is, you know, optimizing this migrating motor complex, which really can be upregulated at night, but it actually benefits from, you know, digestive rest during the day. I think about a reduction in bloating. How many women tell me, "Oh, my gosh, I didn't realize how bloated I was all the time until I stopped eating so frequently." In many instances, you know, resolution of constipation and diarrhea. I seem

to have a bunch of women right now that are dealing with some bile acid issues. So they've got some, you know, biliary malabsorption problems. Then all of a sudden they're eating less frequently and all of a sudden they're not having diarrhea. So I think about the bloating, I think about the digestive rest. I think about stabilization of your blood sugar because, you know, your body is able to, if necessary, to tap into glycogen stores that it needs to stabilize your blood sugar.

[00:16:52] But on a very simplistic level, in many instances, stable energy, clear thoughts. That digestive rest piece is so underappreciated and undervalued, and yet that's one of the easiest things for people to understand. Like when I'm talking to women, like if I were talking to a pregnant woman, I would say adding 12 hours of digestive rest is fine. Just like the very athletic younger women that are, you know, doing a lot of physical activity and helping them understand like this is actually what all of us should be doing. We've just conditioned ourselves to eat with greater frequency throughout the day, and snacks and mini meals we eat from the moment we get up to the moment we go to bed. So even just 12 hours, for a lot of people, as I know you both know, can be very, very impactful. But I would say that migrating motor complex is my nerdy thing that I like to educate people about, to say, this is this really cool mechanism that goes on that is really optimized when we're eating less frequently. And that 12 hours gives it plenty of time to do its job.

**Terri** [00:17:50] I think you've touched on this, both of you have touched on this, that, you know, if you hear some of something is good, it must be that if I do more of it is even better. And I try to talk with people about recognizing the multi layers of what's going on. And I know in my own journey, my body was not ready to let go of weight because it had so much healing to do at a deeper level that I couldn't see and didn't know was happening. And so I'm curious, you know, moving a little bit out of the stress response kind of way of talking about this, but even just setting a more realistic timeline of giving our body time to heal while also allowing it to get to these next processes where it can release weight, I wonder how you approach that.

**Cynthia** [00:18:39] Yeah, well, this is the million-dollar question, right? You know, everyone-- we're an instantaneous gratification culture. We want everything quick and fast and, you know, the latest potion, pill, or powder has convinced all of us that should we be able to lose 20 pounds in a week. And I have to remind patients-- and this is something I've always said to patients, you know, anywhere from 1 to 2 pounds a week is at most what I would expect. So it's a long game, it's a marathon. I set that expectation upfront so that I'm not having to say three months later, "This is why we-- it's like peeling an onion. You know, every layer of the onion we're trying to figure out what it's contributing.

[00:19:14] So, you know, I always start with the basics. So are you sleeping through the night? And I would say 90% of my patients are not sleeping through the night. So that's the first thing we have to fix. And then we explain physiologically what's going on in the body that is perhaps contributing to why they're weight loss resistant. And we're addressing stress, which I know we've talked about.

[00:19:32] Anti-inflammatory nutrition. And so this is a big one. I think people want to eat like they're 18 when they're 45. And I have to tell them, like, I don't want to be that wet blanket, but I'm here to remind everyone that if we're still eating like we were at 18, we're not going to get the same results. And so we really have to remove the inflammatory foods. And sometimes these are the fun foods. These are the foods that people perceive are their lifeline, they're fun. They feel good when they eat them, at least initially, but helping educate them about proper macros, you know, making sure you're getting off

protein, eating the right types of carbohydrates, the right types of fats, not getting into trouble with the fat trap, which-- I think the two biggest fat traps are nuts and cheese. [laughter] Both are delicious. You know, they're easy to overeat. And so this is another example of too much of any one thing is not a good thing.

[00:20:27] The other piece of that is-- you know, for me, I'm doing a lot of diagnostic testing. So if someone's weight loss resistant, we're looking at thyroid, we're looking at adrenals, we're looking at gut health, we're looking at iron panels. I mean, there are so many nuances and, almost always in conjunction with another integrative medicine provider, you know, addressing things that that are maybe perhaps need to be optimized. You know, for a lot of these patients, they've got borderline insulin resistance. And if it crops up that their lipids are abnormal and maybe their thyroid is off, I'm like, "Okay, we've got to address the insulin resistance first before we try to address these other things." And so for me, it really is mapping out 6 to 12 months of helping them understand that, yes, we can start intermittent fasting, we can start making macro changes but your sleep is the most important thing. You know, even something as simple as hydration and helping people understand that dehydration can contribute to weight loss resistance, which is sad because it's such a basic thing, but many people walk around being clinically dehydrated all the time.

[00:21:28] So I think it's many, many things that contribute but setting the expectation that this is not 'three weeks and we're going to drop 20 pounds and this is all you have to do'. And I think it's kind of reframing that mindset that this is a diet and this is temporary. We want to ensure that patients and clients are able to embrace whatever we're teaching them for the rest of their lives so that it really does become this major lifestyle shift. And there's a lot of freedom when patients start feeling better. They're like, "Okay, well, this reinforces the bad behavior because I don't want to go back to feeling like I did before when I ate hyper-palatable, highly-processed food and I was really inflamed, I had joint pain, I couldn't sleep well, my menstrual cycles were a disaster, I was insulin resistant." All of a sudden, they really-- they feel so much better that they're not willing to go back to where they were before.

[00:22:22] I think all of those things are important, but actually setting the expectation that this is not going to happen instantaneously. And that helps also differentiate who is the right patient to work with me or to work with you all because we're going to teach them the long-- like, this is the long game. This is what we're going to do in perpetuity, as opposed to someone saying, you know, "You're going to lose a bunch of weight instantaneously." And then when you go back to what you were doing before, you'll probably-- that yo-yo dieting mentality, which I think, you know, for so many patients is something that is a source of frustration.

**Megan** [00:22:56] One of the things we struggle with is explaining to people that they are experiencing stress (women in particular) because I think we've really compartmentalized it in the emotional arena that that is stress. So, you know, if I've got a sick relative or my dogs aren't well, something's wrong with my kids, work - that is stress, but other things are not stress. We don't equate positive events like long weekends and vacations as stress. They are a different type of stress. Having a baby, having a wedding - that's stress.

[00:23:33] But sleep. Sleep, sleep, sleep. It's come up several times throughout this podcast. It comes up many times throughout the day. People don't regard poor sleep as a stressor, and it's one of the most common stressors. And, you know, people always refer to it as a pillar of health. I like to say it's kind of a foundation of health. And Cynthia, it

sounds like this is something that you spent a lot of time with your community and group discussing. What are some of the things that you help people reframe their thoughts about sleep and stress, and some of the strategies you implement with them to help them improve that particular area, especially women, as we get older?

**Cynthia** [00:24:20] Yeah, well, I think first it's helping people understand that one begets the other. So if you're chronically stressed, it is absolutely going to impact your sleep. You know, for women that are at the tail end of, you know, their late thirties, early forties, heading into perimenopause, helping them understand what's changing physiologically in their body. So changes in progesterone can exacerbate anxiety and depression but also can impact insomnia. So that's number one.

[00:24:49] I think, you know, the other piece of it is helping people understand that, just like when we have young children and they have sleep hygiene-- we had a very regimented-- my kids knew they got a bath, they got books, they got lavender rubbed into their feet. You know, we sang songs and then they went to bed. And so it's the same thing. Like, we have to get back to a very granular-- like, we wear blue blockers if we have to be on electronics at night, we watch the sunset if it's the time of the year where it's daylight out until early evening. We make sure we get light exposure in the morning because that will actually help. The exposure of light on our retinas will help suppress melatonin and increase cortisol. Helping people understand, you know, you're not eating 2 to 3 hours before bed. You're not getting into-- you're going to avoid getting into an argument or having a heated discussion before bed.

[00:25:39] But the things that I think about that are the biggest game changers for sleep quality. Number one, finding something that brings you joy in the evening. So for me, release of oxytocin. So whether it's hugging my husband-- sometimes my teenagers want to be hugged [laughter] but right now we're at this kind of strange parenting stage where it depends on their mood. But like my dogs love being snuggled with and that oxytocin will actually lower cortisol. So it's important to think about that. I love magnesium l-threonate. That crosses the blood-brain barrier - really helpful. And most, if not all of us, need more magnesium in our lives. I think about inositol. That helps change sleep architecture. It's very safe. It's good for blood sugar. It's not nearly as heavy hitting as berberine. I always like to mention that. Berberine is very good for metabolic health but, for a lot of people, it upsets their stomach and can contribute to-- I know, Megan, you've had some pretty significant side effects from berberine.

[00:26:34] So, you know, from my perspective, the things that I really think about are, you know, reading a physical book, trying to get in bed 30 minutes earlier, saying no to more things on your social calendar. I think we, as women in particular, want to please everyone, want to say yes to everything. You know, from my perspective, the older I've gotten, the more I say no. If something's going to take me away from my family in the evening, it better be something I really, really want to do, otherwise, it's a no.

[00:27:01] And then I also think just understanding things that impact sleep quality, like alcohol. When I'm talking to patients about alcohol consumption, I always say, "Listen, this is a judgment-free zone but the better you can share with me what your habits are, the more I can help you." Helping people understand what alcohol does to REM and deep sleep. For me, it's the only thing that gave me hot flashes, so you better believe I stopped drinking. I didn't drink much, but when I did, it was guaranteed hot flashes and would disrupt my sleep. And so to me, my sleep is too important.

[00:27:32] When we're dealing with stress, it's finding something that people enjoy doing that helps them decompress. And it could be someone goes swimming, someone goes walking, someone connects with their loved ones, someone reads a book, takes a hot bath. You know, it could be simple things. It doesn't have to be something elaborate. Like, I've had people tell me, "Oh, I like to go on vacation." Well, that's great [laughter] but I think for most of us, it's doing something that brings us joy, that allows us to get out of the sympathetic and more into the parasympathetic (that calming side of the autonomic nervous system) and understanding that, on a lot of different levels, when we're relaxed and we're calm, more than likely we're going to have better-controlled blood sugar, we're going to have lower cortisol levels. And I just think that connection to nature piece is also important, both for sleep and also for stress management. So, you know, for me, I get light exposure on my eyes for-- depending on the time of the year-- it's very hot here in central Virginia right now, but most of the year we're walking three to five miles a day with our dogs, we're outside. It really becomes something that you enjoy - that connection to nature. And I think perhaps that's maybe one of the blessings of the pandemic, was that a lot of people started getting outside and walking because there was a lot of things we couldn't do, but we could get outside of our houses and do that and be appropriately socially distanced.

**Terri** [00:28:48] So I'm curious (Megan talked earlier before we started this episode) just about the mindset and behavioral pieces of this journey, and I wonder if you have any kind of quick go-to mindset or behavior things you encourage. Obviously, sleep hygiene's important, behavioral things, stress management, and those things, but any particular mindset things that you work on with people to help them succeed in this journey?

**Cynthia** [00:29:19] I love this question because, I think for each one of us, our evolution of ourselves is really a reflection of the deep inner work we do. And so I'm always a proponent of working on your stuff, is how I would put it. So it's finding a reframe. I think most of us are positive individuals, but we all have moments where we get frustrated, we get upset, and so trying to find the positive, even when the lessons aren't what we want them to be. Maybe it's not getting to a point of-- being in a position where we sometimes have to find a reframe when things do not work out the way we expect them to. So that's number one. And it could be as simple as, you know, "I assumed by two months in I would have way more energy." It could be something as simple as that. So it's always finding the reframe. But let's reflect back on where you started from. That's why I like metrics, I like quantitative data. So I'm always assessing where my patients are so that we have something to reflect back on to say, "This is where we started from and this is where we are now."

[00:30:19] I think that it's important to have support. So, you know, whether it's your significant other, a friend, a loved one, you know, a community where people can come together and they can bounce ideas off of, like, "I had a really hard day last week." I think that sense of community is very important.

[00:30:36] I do think, you know, that inner work that I talk about is so instrumental in being able to enact change. And so I'm down a rabbit hole right now with the holistic psychologist. I'm not sure if you-- Dr. Nicole Lepera, but it's like, I've got the book, I've got the workbook, I'm doing the work. And so I always like to share that, to say even where I am at this stage of my life, I'm still investing in myself because it allows me to show up the way that I need to.



[00:31:03] But I think for the average person, it's finding a positive reframe. It's staying focused on what's your end goal. Because when you start getting overwhelmed and mired down and bogged down, you're having a bad day, it's like, "Okay, wait. Oh, that's right. This is what I'm working towards." Maybe it's, "I want to be able to walk my son down the aisle," or, "I want to be able to be fully present with my children. I want to have enough energy to be able to do that." Or maybe, "I want to do a 5K." Whatever it is that people are working towards, really helping them do so in a way that's realistic and also at the same time supportive of where their needs are.

[00:31:40] But I think it really starts with doing that inner work. And for each person it could be, you know, it could be one step forward. I'm not saying go out and, you know, you're suddenly spouting-- [laughs] you're suddenly the, you know, the next Mel Robbins. But helping people understand that each one of us is on this journey and having the right amount of support and community is hugely instrumental in your success.

**Terri** [00:32:02] I think that's really important, especially important, because I've seen so many people, you know, I don't know, the chicken or the egg debate, like, "Do I need to do this work in order to heal," or, "Do I need to heal in order to do this work?" But I think one of the things that so many people in our Community recognize is, as they are improving their nutritional choices, as they're fasting, as they're making other changes in their lifestyle, the undone work surfaces because so many of us have learned to use those other habits as a way of kind of stuffing down and masking so much of the work and the, you know, the traumas in life, and the limiting beliefs we've had, and all those things. And so obviously I'm very biased on this, but I think people really need to be willing to do that work in order to succeed in their health and weight journeys because it's going to be more and more present as you go through the journey.

**Cynthia** [00:33:04] No, I couldn't agree with you more. And it's interesting because, you know, four years ago I spent 13 days in the hospital. And, you know, at that point in my life, if you had asked me on February 16, 2019, was I fully immersed in my stuff? Yes. Well, I came out of the hospital and it's like the Band-Aid got ripped off. And for me, it's really been-- the past four years have been all about like, okay, the universe let me know that I wasn't done working on my stuff. And so I agree with you wholeheartedly that the way that we show up in the world, being able to serve others, is by working on ourselves and, you know, that kind of selfless reflection, but it also is what mirrors-- you know, whether it's helping people understand that they're not alone, people understanding that, you know, you've walked the walk, you've been through these things, you understand them. I am a huge proponent of continuously working to improve myself. [laughs I'll just leave it there, that I think I will be one of those people that will be doing therapy, Reiki work for the rest of my life because it's allowed me to show up in very different ways in my life and ways that I think inspire others. And so I agree with you that investing in yourself is always going to pay out in huge dividends.

**Megan** [00:34:26] I think this is one of the reasons why we've connected so well and that our communities have so much synergy is because, you know, we're all really students for life. And to what Terri was saying, I joked with Terri, I was saying that, from a young age, my mom was pretty sick and my parents thought I should see a therapist and just have this third-party outlet, this safe space. And so I did therapy for many years. I learned more about myself when I started to change my diet than I did in all of those years having this time to reflect with this individual. We learn so much about ourselves.

[00:35:06] I love what you said about reframing things too. Women in particular are so negative and so hard on themselves. And one thing that you mentioned earlier on is that we need to stop thinking about this as a diet. And then just now, you were sharing some of these great things, like being able to have the energy for the grandkids. And we tried so much - stop thinking about weight loss. Weight loss is a side effect of getting healthier. Why are you trying to get healthier? Really addressing the mindset I think is so critical. And it's such a huge piece, Cynthia, what you're talking about with stress. Several years ago, I went nuclear at San Francisco Airport trying to get back to Toronto because Air Canada had delayed my flight by about three hours and I figured they were going to cancel it because of weather. And my husband said to me, "You cannot control Mother Nature, so right now you are just making yourself more insulin resistant, more hormonally imbalanced. You're going to want to eat garbage and then you're going to feel really bad if you do. You can't control the universe and you just have to kind of roll with it. What can we do in the next few hours?" So I just love what you're sharing about that. I think it's so important for women to hear.

**Cynthia** [00:36:24] Well, and I think we can sometimes be our own worst enemies, whether it's comparisonitis, it's human nature. You know, we're just bombarded with examples of, you know, people that are doing things differently. I was asked recently, you know, why don't I take more photos in the gym, you know, show people what I'm doing in the gym? And I finally said to my team, I said, "I think women compare themselves so much to one another that I'm always happy to be totally transparent and share things that I do but, at the same token, I think sometimes it puts unnecessary pressure on women." You know, they see what someone else is doing and then they're like, "Oh, I should be doing that." And I'm like, "Wait a minute, I've been lifting weights for a long time. I'm in a different position. If I were starting out, I would hire a trainer and I would, you know, commit to twice a week and, you know, just be the student." Like, sometimes it's okay to just be the student. But I think on a lot of different levels, you know, each one of us shows up differently in our lives and professionally, and I think the last thing that I want to do is contribute to someone's stress and angst. It's like I want to be (as I know you both do) a safe resource for individuals that want to learn and better themselves and be inspired to take action and to do it in a safe place, not to feel a sense of pressure or to feel like that, you know, we're not honoring their own kind of bio-individual needs and not feeling like it's a one size fits all. Because I think that's the other piece of where women feel a lot of pressure is that this is what should be happening at X time and it doesn't always work out that way.

**Terri** [00:37:56] Oh, that shoulding on ourselves! [laughter]

**Cynthia** [00:38:01] Yes. Shoulda, woulda, coulda.

**Terri** [00:38:02] That's right.

**Megan** [00:38:04] Well, Cynthia, where can people go to find out more about the work you're doing and any exciting projects or courses that you have coming out?

**Cynthia** [00:38:13] Yeah, thank you. So it's probably easiest to connect with me on my website. So it's [www.cynthiathurlow.com](http://www.cynthiathurlow.com). Actually, our podcast will be coming out together on Saturday. You can get access to my book, Everyday Wellness podcast, all my social media outlets. I would love for you to reach out. I'm one of those people, like, I'm pretty much in the thick of things on social media. My team helps out, but I am generally the one

answering and responding to DMs, so definitely reach out and let me know that you listened to the podcast and that you enjoyed our conversation.

**Megan** [00:38:44] I highly recommend you follow Cynthia, and her incredible podcast as well. Thank you so much for joining us today, Cynthia.

**Cynthia** [00:38:53] Thanks for having me.

**Megan** [00:38:58] All right, everyone, we'll be back next week with another episode of The Fasting Method podcast.