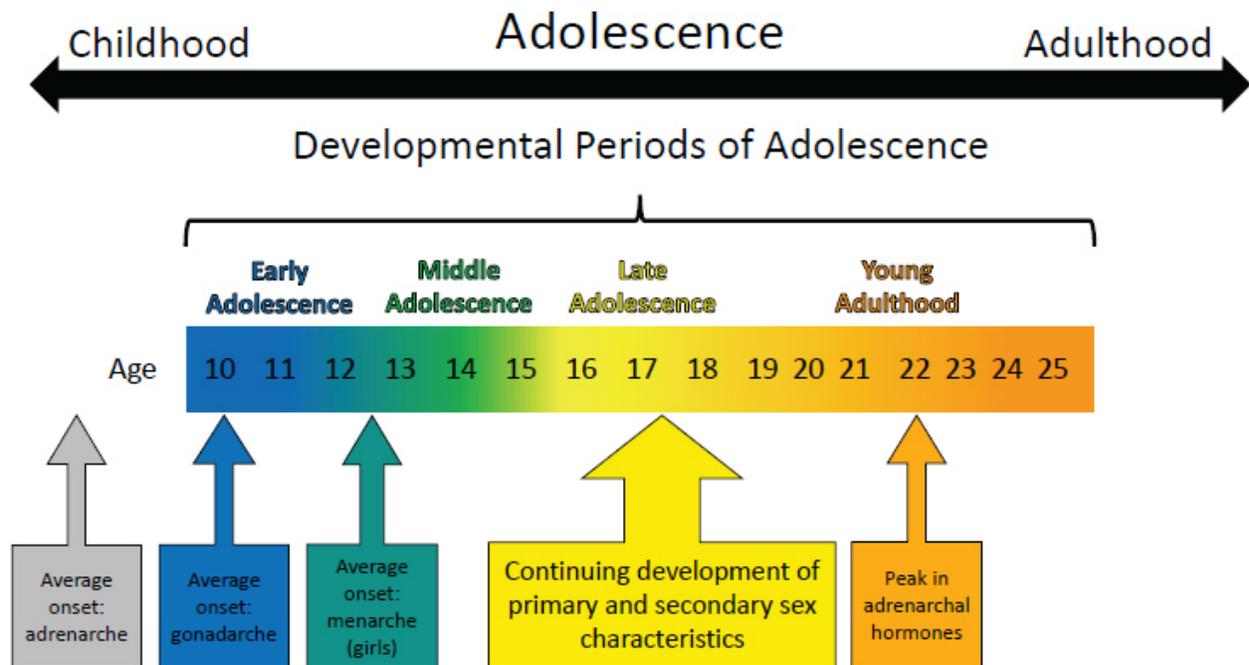


Most of us don't have free access to PubMed, so when searching for answers to questions, I recommend always starting with "NIH" then what you are looking for to get valid information. Can also use Google Scholar

Puberty, Developmental Processes, and Health Interventions
<https://www.ncbi.nlm.nih.gov/books/NBK525269/>



<https://www.ncbi.nlm.nih.gov/books/NBK545476/>

Mindfulness techniques for eating:

- Food as love
- Food as pain
- Food as obsession
- Food as addiction
- Learn to identify hunger: are you eating because: habit, angry/emotional, loney, tired?

GJN: evaluate: <https://www.westsidenutrition.com/links-resources/>

Tools for tracking cycle: free apps, I have used "Menstrual Calendar FMC" for over 10 years

Labs for testing/monitoring osteoporosis:

Bone density scans



Blood: calcium, phosphorus, Vitamin D, platelets/Vitamin K, Osteocalcin
See if OsteoStrong is in your area

Labs for Iron:

Serum iron, TIBC, UIBC, Saturation, Serum ferritin, CBC with dif.

Supplement: whole food based iron (capsule or liquid forms), food based MVMM (these are well absorbed and do not cause constipation) have them take with food (so have acidic stomach), can take with vitamin C as this helps absorb iron and away from coffee/tea/wheat as these inhibit the absorption of iron

Weight loss:

Avoid using “exercise” use “movement” instead...less intimidating/negative to patients

Start with 5 minutes in the morning and work up amount of movement

“It’s not that you can’t have _____, it’s that you don’t want _____.”

If having a “vacation meal” and want dessert...limit to three bites. “1,2,3...that’s enough for me!”

Discuss intermittent fasting...flexible, free, and effective for balancing hormones and weight loss; important to have them stop eating at night...best to stop around 6 no later than 7 pm.

Hormones must be evaluated - see Dysglycemia handout; blood sugar issues are often missed and often the underlying issue for many hormone imbalances

Check for autoimmune...this is also a common cause of inability to lose weight. Right now about 12% of the population + for Hashimoto’s thyroiditis; most of these are women. Percent will be higher in the office because they are seeking answers they cannot get from conventional MD

Remember: “Everything that is worthwhile, is uphill!”