

HPA-D: Diet - Part 1

Hey, everybody. At long last, we're going to dive into treatment of HPA axis dysfunction. Before we get into specifics, I want to first discuss some general considerations.

The first is that you cannot successfully treat a patient with chronic illness without addressing their HPA axis. I really strongly believe this now, and I hope you do too after going through all of the information on the etiology and pathology of HPA axis dysfunction and all of the triggers of HPA axis dysfunction. I think you'll be hard pressed to find a patient in your practice who isn't dealing with one of those four primary triggers, and very often patients are dealing with two, three, or even all four of them.

That said, getting your patients to buy into this idea and focus their energy and attention here will be one of your greatest challenges. Most patients, and clinicians for that matter, have a pretty limited view of stress, what stress is, and what its relationship to disease is, so part of your job as a clinician is to explain what I hope I've explained clearly to you in this unit and get patients to start to take this more seriously in their lives.



Remember the four key drivers of HPA axis dysfunction: perceived stress, circadian disruption, glycemic dysregulation, and inflammation. Even if someone's perceived stress is low, which is what most people think of when they think of stress, if they have any of the other three factors or a

combination of them, HPA-D will be contributing to their problem, and addressing the HPA axis will be part of the solution.

Also, it should go without saying that treating HPA axis dysfunction from a functional medicine perspective means addressing the core pathologies that are causing it, such as dysglycemia or inflammation, and this requires a more holistic view. It's not just about the adrenals. It's not just about taking steps such as modulating exposure to light, resting, or reducing physical activity, although those all may be part of it. It's a much more comprehensive holistic approach.

Consider the typical patient. It may be a mom with a few kids who is also working. She is staying up late using the iPad or computer after the kids have gone to bed because, you know, she is so busy during the day and doesn't have enough time to get everything done. Maybe she's not getting to bed until midnight for that reason, and she has to wake up at six to get the kids ready for school. She's eating a poor diet because she doesn't have time to cook for herself. Maybe she already has an autoimmune disease, which is causing some chronic inflammation. Maybe she has SIBO, *H. pylori*, or a parasite that is causing inflammation or GI malabsorption. So this is a pretty typical presentation, right? That ticks off all four of the primary drivers of HPA axis dysfunction.

Another key principle to be aware of when addressing HPA-D is that patients cannot supplement themselves out of HPA-D, and it's key to explain this to patients, because if you don't, they won't make the necessary lifestyle and behavior changes such as slowing down, cutting back on caffeine, modifying their exposure to light, or getting enough sleep. Making these changes asks a lot of us, as anyone who has tried to do this themselves knows. We know this as clinicians because we are also patients, and it asks a lot of our patients. It's much more difficult than just taking a pill or changing our diet because we have to change our relationship with ourselves and the world around us in order to make these changes. Sometimes having a really good therapist who understands working with patients in this way can be a helpful thing to have on your team, if not within your clinic, then someone who can you can refer to and who you've developed a working relationship with.

So I'm going to purposely start with a discussion of diet and behavioral and lifestyle modification before moving into botanicals, supplements, and specific protocols because it always starts with diet and lifestyle changes. We have to start here with patients and make sure they're doing these things as a foundation, or whatever else we're doing is not going to work, or it is certainly not going to work as well as it could. If I could only choose diet and lifestyle changes or supplements, I would choose the former. Now having said all of that, supplements can be extremely helpful and even necessary for recovery, but I'm just emphasizing here that we should never use them without making the necessary diet and lifestyle changes.

Okay, so let's move into a more specific discussion of diet.