Holistic Tools for Achieving Optimal Health
Guest: Jill Valerius

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Dr. Mark Menolascino: Welcome back to the Women's Heart Health Summit. I'm your host, Dr. Mark Menolascino, medical director of the Meno Clinic Center for Functional Medicine in beautiful Jackson Hole. This is your chance to hear from the world's experts about women's health, women's heart health, and how you can reach optimal vitality. We're joined today by Dr. Jill Valerius. Thank you so much for joining us.

Jill Valerius: Thank you for having me here, Mark. It's great to be able to chat with you.

Dr. Mark Menolascino: Well we've known each other for many years. You're one of the cofaculty for the Institute for Functional Medicine. I've always enjoyed our conversations about health, wellness, life. I think you have a great perspective living up in Alaska, taking care of women and men. And I'm really excited to hear from you today.

Jill Valerius: Great, I'm super stoked for the opportunity.

Dr. Mark Menolascino: So let me tell everybody about you a little bit. As a little girl, Dr. Jill Valerius knew she wanted to be a doctor. She told her second grade teacher that was precisely what she was going to do. Jill spent the first four years of her medical career working as a certified athletic trainer with high school and college athletes. Empowering people drove her to

complete her medical degree from the University of Minnesota Medical School in 1998.

She completed her residency in family medicine in Duluth, Minnesota. And after residency she worked in several emergency rooms and urgent care centers prior to moving to Alaska in 2003. This is where she's practiced full scope family medicine care with functional and integrative medicine delivered in a holistic way. She quickly realized a more holistic approach to medicine was needed to really help her patients achieve optimal health.

She finished her training in functional medicine. It was the real aha moment for her in how to practice optimal medicine. And she looks forward to helping you reach your health, lifestyle, and activity goals. It's never too late, in her opinion, to start living in health and achieve optimal wellness. Again, thank you so much for being here, Jill.

Jill Valerius: Happy to be here and talking with you Mark.

Dr. Mark Menolascino: We've talked in the past. I see you as one of my favorite athletes. You're an athlete physician. And most of our friends in functional integrative medicine, they walk the walk and talk the talk. They eat clean. They exercise. They take good care of themselves. But you really do this at a higher level. And I really respect that. How do you balance performance athletics and performance medical? How are you delivering both?

Jill Valerius: That's a daily challenge to be able to do that. And some days I'm better than others. And some years I'm better than others. So it just depends kind of what I'm focusing on, whether I'm cycling or running or just trying to hike and ski and be really balanced about my approach. So it's an every day thing, just like it is for everybody else.

Dr. Mark Menolascino: Well it's easier to stay in shape than to get in shape. When clients first come see you, what are some of the low hanging fruit you'll recommend for them? How can they get started if they're way, way away from their health goals?

Jill Valerius: Oh, I'm super stoked you asked me this. So I have a favorite thing that I really just picked up just last spring when I was studying for my integrative medicine boards. There is an exercise program called the Key 3. The Key 3 is a squat, a chest press, and a single arm row. And you hit 85 percent of your muscle groups doing those three exercises. So over the years I've given all kinds of advice, but now I hand a little handout that I made. And

bam, it's your three exercises right here. Everybody looks at it, and they're like I can do this. And I'm like I know you can do this. So really concrete, that simple. The other thing I like to do is really just have people mostly focus on walking. If you're going from nowhere to something, walking is super important to me, whether it's ten minutes three times a day if you've got to walk around the building before you go into work or at lunchtime and park further away from the store.

I think in this day and age everybody's stress levels are pretty high. So if you're not doing a lot of things, to kind of go I'm going to go do high intensity interval training, or I'm going to train for a marathon, that kind of stuff, I just feel like for a lot of people it actually adds stress. And I like to explain to people your body just has stress, whether it's mental stress, if it's psychological stress, if it's social stresses, whatever it is, if you add physical stress onto it, it's stress.

So I love to just get people going with some simple resistance, which I think is super key, and most of us seem to neglect, and then some aerobic, like walking, or if you like to bike. I love to ask people what do you like to do. And we have so many things to do. We can hike and ski and bike and snowshoe and all of those things.

Dr. Mark Menolascino: And we're both fortunate to live in these beautiful places. And for a lot of people it's a simple walk. Walk with your dog. Walk with your lover. Walk with your kids. Walk with your best friend. It's doing that together.

You and I have talked a lot about the adrenal glands and particularly in women the adrenal gland, as women age with their hormone depletions. How do you explain this concept of adrenal fatigue to your clients?

Jill Valerius: I like to talk to them a little bit about you achieve a point where you just start to burn out, and you tire. And I think if we really just keep cranking and cranking and cranking, that's when I tell people, just like you get tired, kind of your body gets tired too. Your adrenals are going to get tired.

And I think what feeds into that more so, fortunately, I think, Mark, you and I are old enough that we grew up in the day when we didn't have cell phones. We didn't have all these things. And we look at all these things as conveniences now. However, we really have to also just see how much we're always on. We're always available. We get dopamine surges. These things are just wired so that we're constantly picking them up and looking at them. And I

think that's contributing, as well, as part of the problem. So yeah, it's just getting run down.

Dr. Mark Menolascino: So when someone asks you, "Dr. Jill, how do I restore my adrenals, what should I be doing?" do you have some go-to strategies, lifestyle strategies, nutritional recommendations, supplement changes? What would you recommend there?

Jill Valerius: The biggest thing that I like to do is I really like to work with people in terms of just lifestyle nutrition. Supplements certainly can help. But really, honestly, number one, I find people aren't eating a really good diet. And if you're going to eat fast food three times a week, I can give you all kinds of supplements and have you do all these things and meditate for two hours a day, it's not going to help.

So number one, just really kind of clean up and get to a clean diet. And what I would say about that is I want people to limit, kind of, carbs, white things, lots of vegetables, and clean proteins, fish. And I really like to talk to them, too, about buying non-commercially raised meats that you're going to buy at the grocery store. And also my favorite app is the dirty dozen.

So in terms of that stuff, I like to do, whether it's prayer or meditation, whatever their spiritual or down time kind of thing is, or if it's just reading, I really like people to get back to and recommit to that for themselves. And again, I kind of talked about this already with exercise. I want people walking. If you're dead, training for a 400-mile bike race or a marathon, that's not rejuvenating. And I like to use nature. We need to get out in nature. It's a little hard to get out barefoot in Alaska, but a little grounding is good if somebody's going to go. We get to fly to Hawaii in a five-hour flight, direct, so we can get our feet on sand.

But I really think that nature can really help. But we've just got to get people out of artificial environments, eating crummy food. We all have things, if we stop and think, what are things that feed our soul. And whether it's playing with your kids, whatever, we all have to commit to taking some time to slow down and do those things.

Dr. Mark Menolascino: This is kind of an offbeat question, but having been to Alaska 29 times - I go in the summer - and it's light for nearly 24 hours a day. And we've always talked together about having this routine, about going to bed at a set hour, waking up at a set hour. How do you do that in Alaska when it's light 20 hours a day?

Jill Valerius: It's hard. I mean work, so I have to get up in the morning. So that's one thing. I think one of the challenges is I live right in town, so little kids are out playing late, really late. And I'm kind of like I've got to go to bed people. So I mean I just try to stick more to my schedule. I mean many people would probably not believe me, but I probably go to bed between 8:30 and 9:00 if I can. I like to get up in the morning.

So I probably get to bed a little bit later during the summer. And it seems that I will go, it always seems, like three week cycles. And then all of a sudden I'm just crashed out for four days. So I'm in bed at eight o'clock. You use blackout curtains. Yeah, I mean I think you start to get used to it. But I have friends that have gown up there, and some of them, they don't need blackout curtains. I grew up in Minnesota and Wisconsin. But I need blackout curtains.

Dr. Mark Menolascino: Right, right. I know one of your passions is helping women throughout the life cycle with PMS problems, with perimenopause problems, with menopause problems. What do you see in your clinic are really some of the sabotagers to women's hormones? Is it toxic load on them? Is it stress on them? Is it not optimal food they're eating? What do you feel are the easy things you could help women throughout the hormone life cycle?

Jill Valerius: So boy, I mean food, food, food, food for sure. That is key in terms of just stress and our optimal body function. But certainly I think head on stress is really huge for people. So many families, both people work. They have kids that are busy in things. So they just don't have the time. I guess we all have time. We all have to allocate our time.

So I think food, exercise is a big thing; the stress management is really big. And some of it, too, is just more prep in terms of just helping people reframe thinking about it too because I feel like they're actually misnomers, but there's just a lot of stuff in the media.

And it's just every other thing. If you go for a colonoscopy, you only hear about the people who had a perforation, which we know doesn't happen very often. But everybody's like oh my God, I don't want to do that. And I think unfortunately women get into that too, and significant others. Guys are like oh my God, you're going to go into menopause.

Dr. Mark Menolascino: Jill, when you talk about nutrition and hormones, what are some of the things women should do nutritionally to support their hormones? And what are some of the things they do foodwise that are sabotaging their hormones? Are there some hints you can give everybody?

Jill Valerius: Yeah. So one of my favorite things, and I think one of the easiest things for women to do in terms of hormones, is I love getting Brassica family vegetables into people. Cauliflower, broccoli, Brussels sprouts, cabbage, kale, those things all help us basically process estrogens.

Certainly for a lot of people wheat and dairy can be really inflammatory foods. For some women I'd also say lots of meat and saturated fats, those can also be sabotaging what you're trying to do just because if you go back to thinking about dairy and you think about animal meat and certainly animal fat, these are all hormone related things.

So those things definitely can be a pitfall. And certainly if you're eating lots of sugar, that's going to put your hormones in a tizzy. I certainly tell people if your blood sugar's going up and down, until I help you stabilize that blood sugar, we're not going to be able to affect your hormones in a meaningful way.

Dr. Mark Menolascino: And a lot of women deal with low blood sugar called hypoglycemia. And when we talk about it, they're thinking of diabetes. But it's actually the opposite. Do you see this a lot? How do you identify it, or how can our viewers identify it in themselves? And what do they do about it if they see it?

Jill Valerius: So I think what people will feel is they just feel their energy ebb and flow. Certainly a lot of times they feel better right when they eat. And then they rash. And a lot of that, it is different than diabetes, but it's blood sugar disregulation is what's really happening.

Dr. Mark Menolascino: Great point. Great point.

Jill Valerius: The key is really, man, eat fruits and vegetables. Eat some protein and fat with every meal because having your toast and coffee and orange juice in the morning is going to tank you for your day. So I think really concentrating on what it is you're eating.

And we have so many tools, certainly that I utilize through the Institute for Functional Medicine, in terms of just helping people think about how many of different things to be eating a day, and just kind of putting that together because I think if we can get off of the roller coaster of the mocha frappa whatever from Starbucks, people drink them because you feel good, and then you crash and you go get another one. And that's where…

Dr. Mark Menolascino: It's a vicious cycle, yeah.

Jill Valerius: Yeah, so you're getting hypoglycemic, but probably in the in between, your blood sugar's going up before it crashes.

Dr. Mark Menolascino: So Jill, you said a glass of fruit juice, "Which I thought was good for you," everyone will ask you, and, "I'm having whole wheat toast. How can that be bad for me? And everybody needs caffeine." So what's wrong with those three things?

Jill Valerius: Oh, boy. So whole wheat toast, a piece of toast is like having a tablespoon of sugar, when your body processes it. So that's sugar. Fruit juice, unfortunately, even if it's the pulpy good stuff, that's sugar.

Dr. Mark Menolascino: So a glass of fruit juice is like a can of soda pop.

Jill Valerius: Coke, yeah, like soda pop. And all right, we just were…

Dr. Mark Menolascino: Oh, that caffeine, everybody needs caffeine.

Jill Valerius: So caffeine doesn't have to be an evil thing. I think that there's a place for it. But really, honestly, if you're getting really run down, and the people that are getting really run down generally don't sleep well, that caffeine is just a spiral. So if somebody's really starting to get run down, that's another kind of low hanging fruit to get out, is just to go all right, we've got to limit the caffeine. Maybe you have one cup in the morning.

I've done enough different detoxes with folks over the years, and everybody at first is like oh, I gotta do this without caffeine, whatever. And people are so liberated. I've had friends and patients be like wow, you know what? I thought I had to have that caffeine every morning. And once you break free of that cycle, people are like I don't need it.

Dr. Mark Menolascino: So Jill, how do you see these high and low blood sugar swings affecting women's hormones, particularly in that perimenopause menopause time?

Jill Valerius: The hormone swings are just going to cause things to go up and down. The way I kind of explain some of the hormone flux is when we go into menopause, our ovaries are kind of shutting down. We still create all of the hormones that we need, but our adrenals kind of take over this whole role. So as we evolve along this path, if we have blood sugar fluctuations and stress and all of that stuff, now your adrenals are kind of amping up and down. And they feel like pushing things. So it's really key.

I also see with my folks that tend to have higher stress levels and maybe type A - I don't know if type A's right - but people that have more stress and anxiety, I like to help get them to be able to relax and meditate, those kind of things, because the more amped up you are during that time, too, I just find that people have more menopausal symptoms, like hot flashes and sleep disruption, all of those things. And that all goes along with that blood sugar disregulation as well.

Dr. Mark Menolascino: Well I think for women it seems so difficult for them to understand where the weak link is when they are wired and tired and sick and tired of being sick and tired and walk around with the brain fog. And we weren't taught in medical school how to identify those types of symptoms. And I think a lot of doctors, I don't think they hear it. They don't see it. They don't have a strategy for it. What are some of the tools that you feel that you are using now that you didn't get taught in medical school, besides all of them?

Jill Valerius: Yeah, most of them. We didn't have nutrition education then that I have now, knowledge that I've just learned and different ways of thinking about things, working with different practitioners in terms of thinking about our autonomic system, which is basically our system that just runs in our body, as you know.

And we have this sympathetic fight and flight. And we have this parasympathetic, which is our calming. So we're always go, go, go, go, go. And to be able to slow those things down totally helps us. Yeah, I mean I just think being able to explain those kind of things, talk to people about nutrition and how that all ties in, I mean I just think from medical school standpoint, menopause is an estrogen deficiency state, and you give somebody Premarin. I mean that's what it was then.

And now I know certainly also in that perimenopause state we're also dealing with more just imbalance between progesterone and estrogen, not so much in estrogen deficiency state until you're well through menopause. So I think for me it's just being able to talk to people about, number one, describing what's happening; number two, talk about nutrition's role in it; talk about being able to balance our own autonomic system is super important. And that's where that prayer or meditation or whatever, reading, journaling, those kind of things come into play, and doing something simple like walking.

Dr. Mark Menolascino: I can see you as a clinician, as a great listener and a great communicator, and being so authentic with your patients. And I think that's such a strength. And frankly, Jill, you have that gift. That's not

something you learn. As a doctor, how did you get educated in nutrition? What were some of the things that you looked at and you went and did that helped you to understand more about the body and more about nutrition?

Jill Valerius: So the biggest thing I did once I was in med school and on this whole journey and then, honestly, into practice, because I was nearly ten years into practice when I really… ten years in is when I made the change; before that I was just thinking about it, because I got to a point where I didn't feel like I was helping people the way I wanted, so really key for me was the Institute for Functional Medicine.

Dr. Mark Menolascino: Me too. It really was.

Jill Valerius: Yeah, and so that is where I have learned so much. And from there I've been to a lot of different conferences and also had just the opportunity to talk to so many different colleagues, like yourself. And I've made all of these great friendships. And each of us, whether we're MDs or DOs or naturopaths or acupuncturists or chiropractors, all of this nutrition, all of these different people that we worked with together, we all have a different angle and way of looking at things and a way of treating things.

So the Institute for Functional Medicine was really my core structure, but from there, now, it's been a lot of different things. I've gone to just different conferences, from that, and learning things from other people. I mean it's incumbent. And certainly I read and I study and I do all of those things as well. But I really find making the links that we have through IFM, through these conferences, and through our colleagues, has been super, super important for me, and continues to be today.

Dr. Mark Menolascino: Well you're at a conference right now. So here's someone from Alaska that flies all the way across the continent to go to a conference, taking time out of her clinic, taking time away from your personal life to learn more. And that's a real passion I know that you have. And I really admire that. It's something that keeps you on the cutting edge. And your clients are very fortunate that they get to come see you and experience someone who is staying on the cutting edge.

How do you, as a physician, besides going to conferences, particularly being in Alaska - for those that don't know Alaska, it seems so far away and somewhat remote - how do you stay up to date, up to speed? What are some of the tools you use in your day to day? You mentioned the media. You just can't trust it. How do you stay ahead, and how do you encourage your clients to stay tuned

on all the medical information? Do you share with them a newsletter? How do you do it?

Jill Valerius: I try to share things on Facebook mostly right now because that's where a lot of people are. My own learning, I think a lot of it arises out of day to day things that I come up with. There's rarely a day in my clinic where I don't come across well I don't know about that. Or I'm not exactly sure. So that makes me look and read and learn, so just my own interest. I read a lot of books. I read magazines, articles. I read all kinds of, I guess, journals, I would say. I'm not reading *Oprah* magazine or something like that for my medical education, but yeah, to be able to read.

And a lot of it is very patient driven because I come across things. And I think if any of us are listening in our clinics, we are coming across things. There are probably some things almost every day that I'm like hmmm, I better think about that again or reread it. Or when I have somebody do something, and we don't get the response that I would anticipate, those are the things that make us think again and kind of say wow, did I miss something? Do we need to think about this in a different way? So I try to communicate that to my patients. I'm not the best newsletter person. I try once in a while.

Dr. Mark Menolascino: It's a lot of work. You're doing it on a person by person, day to day basis. And that's a big part of it.

Jill Valerius: Right.

Dr. Mark Menolascino: I think what I hear from you is that you're open minded. And so you'll have people come to you. It seems for me, a lot of my female clients come see me. They already know what's going on. They've done their homework. They've done their research. They talk to Dr. Google. They're actually quite knowledgeable. They just haven't had the guide to help get them from point A to point B. And no doctors ever really want to listen to them. Of course they don't want to see that big pile of papers they printed off the internet. So do you find that just being open and willing to listen and talk with people, you learn from them as well?

Jill Valerius: Oh, absolutely. I had this conversation with somebody earlier this week. I'm like you just told me what was wrong. It's unfortunate because what's the statistic? It's like 7 seconds or 15 seconds or something.

Dr. Mark Menolascino: It was 11, now it's 17, before a doctor interrupts a patient.

Jill Valerius: Yeah, so I like to think that I'm not doing that. And, well, I think most of my patients would say I'm not doing that. But it's so incumbent on all of us. And I love when I have a student working with me because I'm like let's just listen, because if we listen we can ask some key questions.

And you know what? Most of the time, like you said, they know what's wrong. It doesn't matter to me if you're a male or a female or even a kid. I love asking little kids. I'm like, what do you think's wrong? And a lot of times they'll say something. And it's great. It might be something random, but it's all about engaging people and I think not shutting them down. And I think, unfortunately, a lot of people don't feel heard. And I think they're probably not heard.

Dr. Mark Menolascino: I don't think they are.

Jill Valerius: Yeah, and I think it's key, just like you said. Let's listen. And I'm a woman, so we think about things a lot, not that guys don't have intuition too, but we just have to ask people.

Dr. Mark Menolascino: Well I tell my clients a woman's intuition is the smartest thing in the room. And you'd better listen to it because it's usually right. And our first question is tell me your story. And no one's ever asked them to hear their story. And a lot of times it brings tears. And they're not really sure where to start because no one's ever allowed them to hold that space and to hold the talking stick to communicate at that level. And it's powerful. It's really where the energy exchange happens. That's where the medicine, I think, and the healing, really occurs, is that connection.

Jill Valerius: I totally agree with you.

Dr. Mark Menolascino: Are there any fun traditions you do in your clinic? Are there things you do to keep your staff engaged, to make it fun for your clients? Because medicine's so serious, but we've got to make it fun. We've got to make it exciting. How do you, on a day to day basis, keep that verve and that joy that you bring to everything I see in you?

Jill Valerius: I think we just have fun. I don't know that I have anything really specific. I've been in my area long enough that I know a lot of my patients pretty well. So it's always fun. I mean it might be sad or tearful or whatever we're dealing with, but I think usually people leave with a smile and a hug. And my staff is awesome because we're a team. And so everybody's invested in one another, us and each other and us and our patients or clients. So we

don't have anything in particular that we do, but I think we all really like what we do. And I think people feel that. And that feels good to us, and it feels good to everybody that we come in contact with.

Dr. Mark Menolascino: So many people when they go to the doctor, it's a sterile environment. The front staff's not very happy. The doctor's an hour and a half late. Everybody's kind of grumpy. No one wants to be there. And I suspect if I walk in your clinic I'd see some happy people. I'd have people asking me fun questions. I'd see them eating good food, probably drinking a smoothie, talking to the dog.

Jill Valerius: No dogs.

Dr. Mark Menolascino: But it's that kind of energy that I think our clinics engender and bring out in ourselves, our coworkers. And it's contagious.

Jill Valerius: Some of it, too, I think is probably the setting. If you think about if either you or I were in a larger clinic with ten other providers, that kind of thing, not that there aren't functional medicine and integrative medicine clinics operating like that, but the key is, my clinic's tiny. I mean it's really quite small.

Dr. Mark Menolascino: And personal.

Jill Valerius: It's personal, yeah. If you haven't figured out who everybody is in two visits… you were there one day when… one of the gals is gone their day off each week. So yeah, there are right now five of us in the clinic. It's hard not to know everybody.

Dr. Mark Menolascino: Yeah, that's exciting.

Jill Valerius: It is. It's fun. We're in a small town. And we're right downtown. And so when we go to get soup for lunch, or a salad, we know everybody.

Dr. Mark Menolascino: And you get the oh my gosh, Dr. Jill, can I ask you a question while you're in the coffee line?

Jill Valerius: Sometimes.

Dr. Mark Menolascino: But that's the beauty of it.

Jill Valerius: It is.

Dr. Mark Menolascino: What are you excited about in your world next? What's on your horizon? What are you excited about as far as adding to your clinic or doing uniquely for your clients or adding to your skill set? Is there anything you're working on right now?

Jill Valerius: Oh, I'm working on lots of things right now. So I am going to introduce a membership component to my practice. I'm super stoked about it, really going to help dive a little bit deeper with people and really focus and help people, which is what I love to do.

Dr. Mark Menolascino: Can you tell us what does that mean, a membership model? What does that look like?

Jill Valerius: So a membership is going to be basically where we kind of… how do I explain this well. Basically to be part of the clinic you'll be a member. And so what that will be inclusive of is a far more detailed well visit each year. It's also going to be inclusive of different ways to contact me, which a lot of times the insurance won't reimburse. We can have more fun visits, allow us for email. I think it's just going to allow us to move into this next century, this current one. There are things that we need to see each other beyond the Skype visit.

And certainly things we need to see each other for face to face. But there are many things that we can do outside of that, which right now the medical system's not set up for that. And the other thing it's not set up for is helping you create health. And so my goal with this membership is really to be able to work with people in a closer relationship and really be able to work and have the time to work with people on diet and lifestyle and exercise.

And as we evolve we'll have different membership events and different goals and be able to make some partnerships within the community too. So I'm structuring it right now. We're kind of trying to figure out how this all entails. And so in the new year, that's where we're headed. And I'm super excited to help people and, I feel like, bring the functional medicine that I've learned over the last eight years that I'm piecing into different things, but to really be able to apply it.

Dr. Mark Menolascino: Well it sounds like what you're moving toward is being able to deliver a wellness model not an illness model.

Jill Valerius: Right.

Dr. Mark Menolascino: And I think that's exciting. That makes a lot of sense to have that, where people have a commitment to you as well. That's one of the first things we ask them when people come see us, are you ready? Are you ready to make some changes? Are you sick and tired of being sick and tired? And is your health important enough to you that you're willing to make some nutrition changes?

Someone said something interesting the other day, Jill. When we talk about nutrition - and I'm going to ask you the tough question about diets next - that we really have people make this therapeutic change, which is hard, to allow them to get to an easier maintenance phase. And I never really thought about it like that, but that's really what I do. And it's an easy wording. I've used it just the last couple of weeks. And people understand that. It's a little harder work to get the therapy part done. But once we get you over this hump and get you on a maintenance plan, it's a little bit easier to do.

Jill Valerius: Right.

Dr. Mark Menolascino: What do you tell patients? I'm sure they come ask you every single day, Dr. Jill, what's the best diet, ketogenic, paleo, intermittent fasting? What do I do? What's my best diet? How do you address it?

Jill Valerius: What I tell people is I like a plant-based diet, for sure, right there. And then beyond kind of plant based, get rid of sugar and soda pop and all of that kind of stuff, but plant based, lean proteins. And I think it's really important for people to slow down and eat and listen to their bodies because I've had four people in the last two months come in and be like Doc, I've been doing keto, and I know I'm supposed to do keto, but I feel really bad. And I'm like why are you supposed to do keto? Well, that's what everybody should do. And I'm like no, not everyone can tolerate keto.

So one thing that I really like to employ with people beyond just a good balanced diet, it's going to depend on what your issues are which direction that I push you. But one thing that I would say I feel like there's good science behind is intermittent fasting. And so I'm a pretty big fan of that, and especially just to get people… I mean unfortunately I was one of those people, too, at one point in my career where you've got to eat something every two hours. You just have to keep feeding yourself all day long.

And now I'm like I don't know if that is necessarily the right thing. So I try to get people to slow down and tune in because certainly if dairy makes you sick,

don't eat dairy. And some people just don't tolerate high fat. So to go keto with them, they feel miserable. So I guess my biggest thing is there's not a one size fits all for any of us.

Dr. Mark Menolascino: Absolutely.

Jill Valerius: Mostly plants, get rid of processed foods, certainly get rid of fast food, clearly.

Dr. Mark Menolascino: Well I know the area you live in, the Matanuska Valley in Palmer, Alaska, they grow some of the best vegetables in the world. It's an amazing microclimate to grow things. What do you do in the winter? How do you get the good veggies, the fruits? How do you sustain that in the wintertime there?

Jill Valerius: That's challenging sometimes. I mean we have grocery stores. So most of the time you can get staples. But certainly there are times when you can't get what you want, for sure. Obviously root vegetables, that kind of stuff, all get stored. A lot of people use Full Circle boxes, that kind of stuff, to get food. I mean we can get fresh food. It's just going to depend on what day is the shipping day at the grocery store. And sometimes the spinach comes in; it's all frozen.

Dr. Mark Menolascino: It's expensive and not very good. We get that here, too, in Jackson Hole.

Jill Valerius: Yeah, absolutely. And maybe that makes us slow down and think a little bit about more regional kind of things. And you can look back at old diets like macrobiotic diets and that kind of stuff. So we're doing different things at different times of year too. I mean certainly to try and get greens, we generally can get things up there. It is more challenging than in the summer.

Dr. Mark Menolascino: And can I ask you, how do you eat? Have you found a food plan that works best for you because I know in the past I used to eat every couple of hours and thought I had to just feed the machine like that. But I'll do intermittent fasting. And I just feel better when I break it up like that.

Jill Valerius: I would say for me right now, intermittent fasting is big. I like it. And I feel better. Otherwise really more plant based. It's taken me a lot of years. I grew up in Minnesota eating cows, and Wisconsin. But it turns out I

don't tolerate that stuff as much as I thought I did. So the more I stay away from that kind of stuff and stay away from carbs, I just feel better.

Dr. Mark Menolascino: Yeah, well my favorite food group is bacon. And so that's my favorite Brussels sprout recipe. I used to tell people I'm a doctor of moderation. Everything legally you can have a little bit of. But listening to Tom O'Brien and Dr. Rajani, and looking at some of these food sensitivities, there are people that just can't have any of this stuff because it triggers this autoimmune response and this whole concept of inflammation and nutrition. As an athlete, do you find that intermittent fasting works for you when you do your big performance days?

Jill Valerius: I do. I haven't tinkered enough because I haven't done any big endurance events, anything like that in several years. So I haven't really monkeyed with that to play with how fat burning's going to work. But certainly I know enough that if I was going to do that or somebody came to me wanting to do that, I know some dietitians and nutritionists that I would hook them up with because that's not something I think you can mess with if you are an endurance athlete, and now you want to be more keto or fat burning, low carb.

There are some nuances there that I definitely would be like okay, I've got a couple of different people, choices for you to talk to about this, because that's something that I want somebody else on board to help us with. And I would do the same for myself.

Dr. Mark Menolascino: Yes. What you just said, I don't hear a lot of physicians say, is you know your limits. You're good at what you're good at. You know what you don't know. And sometimes, like Mark Twain said, it's what you know that just ain't so is what gets you into trouble. And so it's being good at what you know, so being confident in what you know but not cavalier that you think you know everything. And I've respected that in myself, in you, and in a lot of our peers that have followed this path of functional integrative medicine, that walk the walk and talk the talk. And we're always looking for better for ourselves as well as for our clients.

Jill, I super appreciate you being here today. It's always a pleasure to talk to you and hear about the things that you're doing and the new innovations you're bringing to your community and just the level of wellness that you're achieving in yourself and in your patient base. What are you excited about? How do our listeners and viewers connect with you? How do we learn more about what you do, what you think, how we can connect with you?

Jill Valerius: So I would say if somebody wants to connect with us, look at Now Health Palmer on the website or on Google, whatever, internet. And Facebook, I've got Now Health in Palmer, Alaska. I've got a Facebook page too. So we post pretty regularly there.

My favorite thing to do is to work with people that want to make a change. And I think most of us would say that. But I do. I mean I love helping people make changes. I love seeing that. And I think one thing that I really learned from the Institute for Functional Medicine and from yourself and our other colleagues, I've really brought into encounters with people, what are your goals.

Nobody ever walks into a doctor's office like well, what do you want? I mean beyond I don't want to feel sick anymore. Okay, well what does that mean? What does not feeling sick mean? What does that mean? Does that mean I just want to play with my grandkids? Does it mean that I want to run a marathon or do some ultra bike event? What does it mean? And I think a lot of that healing journey and the listening is also us asking that question so that it helps refocus patients on just life and what matters so much. So I mean those are the things that drive me. That's what I love to do. And that's what I love to help people with.

Dr. Mark Menolascino: Well I love to ask, particularly women, wave your magic wand. What would you like to be? And what would you like to get out of this life? And it's a great question to ask them. And I love that you're asking your clients too.

Jill Valerius: Yeah, I love it.

Dr. Mark Menolascino: Dr. Jill Valerius, I thank you so much for joining us. Safe travels, safe adventures, look forward to seeing you again.

Jill Valerius: Thank you, Mark, totally appreciate this. It was good to speak with you.