

## Parents Are Hard To Raise® S01 Episode 105 Transcript

[00:00:00] The world is becoming a dangerous place for us women. Lipstick bodyguard looks just like an innocent little lipstick but it will instantly drop any attacker to his knees so you can get away unharmed. Lipstick bodyguard fear no evil. Get yours today only at lipstickbodyguard.com.

**Announcer:** [00:00:23] This week on Parents Are Hard To Raise® health and wellness expert, Dr. Felice Gersh, is back with more great advice to keep our aging parents and us living our lives to the fullest.

[00:00:50] Join 180 million monthly subscribers who can now listen to Parents Are Hard To Raise® on Spotify.

**Diane Berardi:** [00:01:09] Welcome to Parents Are Hard To Raise®. Helping families grow older together without losing their minds. I'm elder care expert, Diane Berardi.

[00:01:18] Longtime listeners will recognize my next guest, mostly because she's among my favorite guest medical experts. Dr. Felice Gersh is a true pioneer in her field, a rare combination of an award winning physician, double board certified both in OBGYN and integrative medicine, and a tireless champion of women's health. She holds degrees from Princeton University, the University of Southern California School of Medicine, and the University of Arizona School of Medicine. Dr. Gersh serves as medical director of the integrative medical group of Irvine California. She also writes and speaks internationally on integrative medicine and women's health. You can hear her weekly broadcast A Healthy Perspective on KRLA Radio AM 870 in Los Angeles.

Felice, Welcome back to Parents Are Hard To Raise®.

**Felice L. Gersh, MD:** [00:02:10] Well I'm so happy to be here and join you and your wonderful audience.

**Diane Berardi:** [00:02:15] Well thank you. And we were just talking about... Before the show Felice asked how my parents were doing and actually it's been a good week for both of them. But I... I as the crazy caregiver, you know sometimes you're so preoccupied, and I was not able to go up to see my parents this weekend because I got this crazy cold bug whatever has been going around and it kind of goes away and then comes back and so I didn't want to infect them and they are doing good right at the moment.

[00:02:54] So I said to my husband, we had a few errands to run. So we went to one store and we parked in the first slot. And you know right near the store. So then we went to another store and I said to him, you know I really would love to have a glass of wine and I just don't have any wine in the house. So I said, just let's go to the liquor store and I'm just going to run in. He said oh OK I'll just wait in the car.

[00:03:22] So we parked and he parked. And I see where he parks. And I'm like Okay I'm just going to run into the store. So I went into the liquor store and I run in I get the wine and I come out and for some reason I see in the first slot a car that's the same color as my car. So I go to the back passenger side, the back door and I said you know what I'm going to just put the bottles of wine on the floor there. So I open the back door and I see legs. [laughing]

[00:04:01] And this woman there's four women sitting in the car, two in the front and two in the back. And the woman where I opened the door she jumps back and she goes, "Oh!" And I look and I say, "Oh my God, I'm so sorry!" I said, "I came to the wrong car." And so, I said, I'm so

embarrassed. I said I'm so sorry. You know my car is the same color. [laughing].

[00:04:30] They said to me, Oh what do you have there? [laughing]

[00:04:37] They said, Don't worry about it. Come on in. They said just let's pop the wine.

[00:04:45] So I could not remember where the car was.

[00:04:50] I had to call my husband and say, where are we parked?

**Felice L. Gersh, MD:** [00:04:54] So, you know it's these little stories that just liven up every conversation and just give us so much joy. And when you have a happy ending like meeting some nice stranger women sitting in a car. That's it. I love it.

[00:05:11] You know we need we need to have some always some lightness in our life. You know when. Because you know it's life is peppered with this very serious and then we had these little fun moments so that is beautiful.

[00:05:23] It was. I got to my car where my husband was, I could not even tell him the story. I was laughing and crying so hard.

[00:05:33] And he's looking at me like, "What's going on?" I was like Oh my God you're never going to believe what I did this time. But anyway.

[00:05:39] Yes so...

[00:05:40] So Felice, you have something. One of my favorite topics, male versus females differences for us to talk about.

**Felice L. Gersh, MD:** [00:05:49] Yes I'd lecture all over on the differences between males and females because it's a very sad thing for women that almost all the scientific studies have been done on men. Because up until actually 2015 it wasn't even required that women be in any studies and that they even acknowledge what the gender makeup was of the study subjects. And so they didn't. And men are simpler. Young men are not in menopause or out of menopause using hormones or not. They can't get pregnant they can't you know have cycles the way women do so they just which is to use men and there really are some dramatic inherent differences between men and women. And what I wanted to talk about were these really basic differences that they go even beyond the hormonal differences, that are built into our genes. Those amazing genes called the sex chromosomes.

**Diane Berardi:** [00:06:43] Sure yeah, let's do it.

**Felice L. Gersh, MD:** [00:06:47] So, many, many, many millions and millions of years ago there was the very beginning of the first sex chromosome the Y chromosome and it is a very amazing thing there is very specific gene that developed the SRY gene that actually enabled the testes of the male to develop. But it was more than that, it turns out that it's not really used to think until very recently that it was only involved with sexual function and making hormones like testosterone. It turns out that this gene the SRY is actually embedded in the brain and it's different.

[00:07:25] This gene is actually one of the reasons why males have more Parkinson's disease than women. So there is these very basic inherent differences built into our sex chromosomes. So if we go back to the Y chromosome. It's much much smaller than the X chromosome and what happened

was that it stopped relocating the genes on it and it didn't cross over.

[00:07:48] So many of the genes became mutated and eventually were deleted and it became a very short little chromosome but very essential. So it happened then you'd have with a male an X and a Y and the females would have two X's so they would have far more genetic material. So it would be a very big imbalance. So what happened is over time one of the X chromosomes in a female would, it would be a random thing, would be Deactivated. So you'd have only one X chromosome in both a male and a female that was actually working. But it turns out that about 15 percent of the genes on the inactivated X chromosome are actually still active and many of those genes are involved with the immune function, in immune health.

[00:08:38] And as well it turns out that during the embryo logic stage of life that there is actually a period of time when neither of the X chromosomes was inactivated and both are working and it actually programs the body and the brain of the female to actually be a little bit more effective in a lot of ways. It turns out that in the embryonic stage that females can do certain very important functions that they call methylation, acetylation.

[00:09:09] So these are things that help to preserve DNA and the female embryo has this more robustly going on. So it turns out that at every stage of life including during the fetal life that females have a survival advantage now and live you know there's more females born than males more male fetuses die. And even in childhood, if a child, a boy child is actually more prone to getting viral infections and is more likely to actually die. Of course nowadays fortunately those kinds of things are rare, but if you go back before we had modern medicine there were. If you had a little boy child gets a girl a little girl the little girl had a substantially better chance of surviving. And it goes throughout the whole life.

[00:09:58] And one of the most interesting ways that you can look at this is also the fact that we females have chromosomes on the X chromosomes from both the male or dad and also the mom. So it turns out that we have sort of a balance so if you have a bad gene on one X chromosome from one parent the other one probably doesn't have that bad gene. And so it balances it out that's why only males have the sex linked diseases like muscular dystrophy or hemophilia, because we have another gene. Even if we have one bad one we have another good one that helps to balance it out. And it's in the way that you can actually see this actually in action is a calico cat.

[00:10:41] So a calico cat which is going to be partly orange and partly black. What it means is that one parent was a black cat one parent was an orange cat and in one one X chromosome is inactivated in every cell. And so you have this black and orange randomness. So you have you know it's completely random. So parts of the cat or orange in parts of the cat are black it's approximately 50/50. And that's what happens women.

[00:11:09] So we had this really interesting balance between the X chromosomes coming from the mom and one from the dad. So we do have this innate advantage which we should just be aware of. And then we can also think about well what can we do for our males, because they don't have this advantage. So what can we do?

[00:11:32] And you know of course this is statistical. When we talk about survivability because certainly there are men who live to be well over 100. But if you go to nursing homes you do see or you know you go to retirement. Yeah. I live near a place called Laguna Woods which is used to be called Leisure World and it's like I love that name, Leisure World. [laughing]

[00:11:56] Like in our dreams, right? Leisure World. But yeah.

[00:12:01] And so if you go and hang out at what was formerly called Leisure World you do find a preponderance of elderly women. It's like, so what's with that?

[00:12:12] Well it's really when you think about it, if you had an epidemic you know some kind of viral epidemic and you had a very significant part of the population die or succumb to it and you ended up with 10 males to every female surviving. Well that's the end of the human race. You know if you have one female to every 10 males that would be a problem. But if you had 10 females to every male. Well to be interesting. The human race could definitely repopulate and continue.

[00:12:48] So nature builds in this female advantage and it really I believe about reproductive success and perpetuation of the species, because you know everything evolved for the purpose of, whether we like it or not, of creating new life.

[00:13:06] You know everything is about creating new life and surviving to raise the children and then letting them get to the age that they can then create new life. And you just you just have to have those females to their... Oh you know, for raising children, having children. So nature built this little advantage in it for us.

[00:13:25] But things are changing now, as well. They used to be a case of males statistically are more prone to having non reproductive type cancers. Of course, you take breast cancer out of the picture ovarian that type.

[00:13:40] When you look at common organs, you know that we have in common. Like lung, kidney, that type of thing. In the past they were very dominant male cancers. Much more prevalent in males.

[00:13:55] But now we're finding women... It used to be when I was in medical school, I was taught that kidney cancer was and bladder cancer for example were almost always in men. But that's not true anymore. Because one of the other advantages that females have of course has been estrogen. And estrogen modulates the immune system as well. But we live in a very interesting challenging world now that is filled with endocrine disruptors, these chemicals you know that are challenging our body's ability to function properly.

[00:14:30] So suddenly, we're getting women having what we're used to what used to be predominantly male cancers at much, much higher rates. So now there are plenty of women getting kidney cancer and bladder cancer, pancreatic cancer. All of these cancers that used to be far more prevalent in males are happening much more commonly now in in females.

[00:14:55] And it really is really a challenge and we have to think like why is this happening? Like what's changing? Because are our chromosomes in our genes aren't changing. But what happens is they are changing in their expression.

[00:15:10] So there's this whole thing called epigenetics. And the fact that we females have this advantage in utero. We're way back when we're a little embryos when we have two X chromosomes, before one gets inactivated and two are working very robustly for that little bit of time, and they're doing these amazing processes called methylation and acetylation which actually programs our genes in a different way. They call that epigenetic. So it's not just about having the genes it's how they're expressed.

[00:15:44] And so, even without changing your DNA you can change how genes actually work. And if you have modifications because of nutritional deficiencies, environmental toxins, you can actually then reprogram the genes, in what we call epigenetics, to then perhaps work in a less

favorable manner. Which makes women more unfortunately instead of bringing the men up to the female, you know where they have higher survivability, it's taking the women down to the males and giving them reduced survivability. Because their innate benefits are being taken away by our ubiquitous environmental toxins. And this starts of course in utero and then during critical periods of life. And after menopause women are more susceptible to just about everything, because of their loss of estrogen.

**Diane Berardi:** [00:16:41] Wow. It's amazing. But when I think about it I always remember in school we were always more females in school, you know in classrooms. And then of course, in all the retirement communities and in the nursing homes there's always more women than men.

**Felice L. Gersh, MD:** [00:17:00] Yes. And you know what there's actually been some recent articles that more female babies are being born now than ever. And what may be happening is that in the very earliest stages of pregnancy before even a woman maybe knows she's pregnant. That just you know the first week or two after conception after the egg is fertilized that the little embryos, these really tiny just beginning embryos that are male. They're not making it, they're like dying off. And so women may not even recognize that she's having a miscarriage or she may have like a period that's late something like that and she doesn't even realize it.

[00:17:39] But the number of female babies being born is increasing. It was always just a tiny bit more. But it seems like it's increasing that we're going to have a world of females. We got to get more males here. You know it's going to be... You know we don't what we did.

[00:17:54] I really was kind of joking that we've had 10 females to every male. I really didn't want that. You know, we have to nurture and take care of our males. Extra extra carefully.

[00:18:05] But it really is. It's a challenging thing and it really just brings unfortunately really to focus that we have to take care of our earth and you know what's happening in the whole world at large. You know you look at plastic oceans and things like that and then you wonder where it's all gonna lead.

**Diane Berardi:** [00:18:23] Yeah. So what do we do about our men?

**Felice L. Gersh, MD:** [00:18:30] Well I think we should start from the very, very beginning and recognizing that male babies are less likely to... They have the survivability disadvantage. They actually do some studies that show that male babies are more likely to be re hospitalized in the first couple of months of life, after birth. So all male babies hopefully should be breastfed and really nurtured you know and get everything when they get started.

[00:19:01] I mean this females too of course is the same but it just sort of like with an extra emphasis on male, that they have all organic baby food. Because these are very critical developmental times. I mean every time in life is important, but this is like the most critical. The time when you're being made and when you're a fetus, and then the first few couple of years of life. Those are the years. Those that that's the time when your immune system is developing. You know and it's really amazing that the first two years is when the gut microbiome, which we've touched on, the gut microbiome is being created which actually creates immune tolerance. It allows your body to know what food is and what is not food. And that's one of the problems and sure you've heard that the incidence of food allergies skyrocketing now it's like crazy.

[00:19:57] When I'm sure it was the same for you when I was a kid. It's like who is worried about eating peanuts, you know. No one. You know you went to the baseball game, you watched the Yankees... You know because I came from New York. So you know I was a Yankee fan and you

know we'd buy the peanuts and then the peanut shells were everywhere. Nobody was worried that somebody would have anaphylaxis at the baseball stadium because they were peanut shells everywhere and everybody was eating peanuts. You know it was just not a problem.

[00:20:27] Now it's crazy, it's so common. Every school has EpiPens everywhere. So it's so important.

[00:20:36] And baby boys have a much higher incidence going all the way to puberty. So it's not just babies all the way through puberty of asthma now.

[00:20:47] Asthma in little boys is far, far more prevalent than in little girls. There's so many little boys now with asthma. But both boys and girls have tremendous problems with food allergies. So we have to do everything we can to try to create that special thing called immune tolerance. And one of the reasons that people get all these allergies is that the food is mixed with things that never used to be in food you know flavors and colors and emulsifiers and herbicides and pesticides.

[00:21:20] Crazy stuff that is in food and it binds some of the proteins from these ingredients bind to the food and then because people don't have healthy guts the immune system sees these, because they have leaky gut and they don't recognize it as food anymore, because it's been modified by these added proteins and things from the chemicals that are now in our food.

[00:21:42] So we got to keep this out of children's bodies. We just have to teach them because they're around other kids who are having snacks and junk food. It's not to eat it's really hard. What a challenge this is to keep only real food being put into our children's mouths.

**Diane Berardi:** [00:21:59] You're not kidding. We're going to continue talking with Dr. Felice Gersh. But if you're a woman or there's a woman in your life there's something you absolutely need to know.

[00:22:11] I want to tell you about my friend Katie. Katie is a nurse and she was attacked on her way home from work. She was totally taken by surprise. And although Katie is only 5 feet tall and 106 pounds she was easily able to drop her 6 foot 4, 250-pound attacker to his knees and get away unharmed.

Katie wasn't just lucky that day. She was prepared.

In her pocketbook, a harmless looking lipstick, which really contained a powerful man stopping aerosol propellant.

It's not like it was in our grandmother's day. Today just going to and from work or to the mall can have tragic consequences. The FBI says a violent crime is committed every 15 seconds in the United States. And a forcible rape happens every five minutes. And chances are when something happens, no one will be around to help.

It looks just like a lipstick. So no one will suspect a thing. Which is important since experts say, getting the jump on your attacker is all about the element of surprise.

Inside this innocent looking lipstick is the same powerful stuff used by police and the military to disarm even the most powerful, armed aggressor. In fact, National Park rangers used the very same formula that's inside this little lipstick to stop two-thousand pound vicious grizzly bears dead in their tracks. It's like carrying a personal bodyguard with you in your purse or your pocket.

Darkness brings danger. Murderers and rapists use darkness to their advantage. We all know what it's like to be walking at night and hear footsteps coming at us from behind. Who's there? If it's somebody bad, will you be protected? Your life may depend on it.

My friend Katie's close call needs to be a wake up call for all of us. Myself included. Pick up a Lipstick Bodyguard and keep it with you always.

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**Alexa:** [00:24:40] Getting the latest episode of Parents Are Hard To Raise®. Here it is for my iHeart Radio.

**Announcer:** [00:24:45] It's as simple as that.

**Diane Berardi:** [00:24:47] You're right Dolly. There are really so many cool new ways to listen to our show. It's hard to keep track. You can join the one hundred eighty million listeners on Spotify. You can listen in your car at the gym or pretty much anywhere on your smartphone with Apple podcasts and Google podcasts. You can get us on an Apple TV, Direct TV, Roku and like Dolly said, you can even ask Alexa to play the show for you. It's great because you don't have to be tied to a radio anymore. You can listen when you want, where you want, for as long as you want. And if you're listening to the show one of these new ways, please do me a big favor. Share this new technology. Help someone else learn about the show and show them a new way to listen.

[00:25:32] So Dr. Gersh we were talking about the poor male babies. [laughing]

**Felice L. Gersh, MD:** [00:25:38] I know. I just want to hug 'em.

**Diane Berardi:** [00:25:38] Yes. I know. I feel so bad.

[00:25:44] So how about women? Do we have any disadvantages?

**Felice L. Gersh, MD:** [00:25:51] Well we do tend to live longer statistically and have certain advantages... But we do have a lot more prevalence in terms of emotional problems. Anxiety, depression is doubled in females compared to males. We are more sensitive to pain. We actually feel pain more than do males. We have more insomnia than males. And then in terms of other types of conditions, after menopause we have far more osteoarthritis, osteoporosis, irritable bowel syndrome. And that's at every age, we have more irritable bowel syndrome. And then we have more acid reflux after menopause. So we have a lot of chronic issues.

[00:26:39] We tend to get fewer episodes of certain types of cancer. We have statistically less Parkinson's disease. We have fewer heart attacks and strokes earlier before the age of menopause than than males.

[00:26:56] And we tend to live longer. But we have a lot of other things going against us that we need to realize. And it really just brings home the point of how males and females are really

different. And and it's not about inequality you know in terms of my abilities or anything you know what they could do for their careers or pay, but if we don't acknowledge the differences and then address them we're going to really we're not going to help people properly.

[00:27:22] So I think understanding that women do have more sensitivity to pain and emotional trauma. Women are more prone to develop post-traumatic stress disorder. Not that men can't get all these things, we're all talking about just prevalence. And so women have very high prescription use of anti-depressants and pain pills. And it's really been a problem because sleeping pills, I can't tell you how many women I see in my practice and there is a lot of complications from these medications.

[00:27:58] In fact a lot of elderly people... I'm sure a lot of your listeners out there, this will resonate with them. They have an elderly mom who has trouble with mood and sleep and a lot of osteoarthritis and they go from doctor to doctor and they end up on a pile of pain pills and sleeping pills and anti-depressants. And these things have a lot of medical side effects that are really harmful. They also increase the risk of instability for example getting lightheaded right falling. So you're you're giving some of the most high risk populations drugs that make them the most unstable on their feet and these are really problematic. So, so many of those elderly women at Leisure World are being drugged.

**Diane Berardi:** [00:28:46] Right.

**Felice L. Gersh, MD:** [00:28:47] I know. So that's a big big problem.

[00:28:50] So you know there's the solutions are of course not easy. But we've found that just eating a high plant based diet, there's magic in vegetables. And for example rheumatoid arthritis is far more common in females as they age than males. There is a much higher prevalence.

[00:29:11] Just eating a very high vegetable, varied vegetable diet for one month. In a study, published... If someone eats like nine, and it's a lot granted, but it's better than being on all those drugs. If a woman eats like nine cups of varied vegetables over one month her pain from rheumatoid arthritis will decrease by 50 percent.

**Diane Berardi:** [00:29:36] That's phenomenal.

**Felice L. Gersh, MD:** [00:29:38] It is. It is so it is really amazing what you can do using food as medicine.

[00:29:45] I mean Hippocrates was so clever way back you know all those thousands of years ago. And then it's and we've gotten away from it, because Big Pharma has so dominated the medical scene that we forgot about lifestyle issues.

[00:29:58] When you get outside in the sun and you take a walk, really just taking a nice brisk walk in the sun, can actually dramatically improve mood and help you sleep.

[00:30:10] Walking barefoot or if you don't walk barefoot you know just putting your bare feet onto sand or grass just like if you go to a park and you take off your shoes and just put your feet into the grass and on the ground, that will reduce your free radicals which create inflammation. And you can have neuro-inflammation, this inflammation can be in your brain, and then you can sleep better.

[00:30:34] So the problem with women is that they live long. In general they live longer, but they live with so many disabilities. And that is not what we call "health span." You know living every

day of your life with a high quality of life.

[00:30:50] And so we need to look at our males and it starting at a very young age to try to help them to have a robust immune system so that they don't acquire you know cancers and asthma and that type of thing. Or develop heart disease at young ages. I mean everything, something's going to happen to everybody, but we don't want things to happen prematurely. We don't want people to have bad things happen when they should be having the best times of their lives.

[00:31:20] So we need to, for everyone... We need to look at the source of food, you know to try to have real food. You know the expression is "farm to table."

**Diane Berardi:** [00:31:30] Right.

**Felice L. Gersh, MD:** [00:31:31] Like you know what do we need a factory for? You know how many... let's think of the history of mankind. How there was always this beautiful balance. There were the right number of males to the right number of females. Everything was balanced and nobody had to worry about food allergies. And I mean there were plenty of other things that they could worry about like trauma, infection. And so it's not like it was you know it easy you know...

**Diane Berardi:** [00:31:58] Yeah... go of it.

**Felice L. Gersh, MD:** [00:31:58] It wasn't the utopia.

[00:32:00] But there was definitely not a lot of the problems that we're suffering from today these chronic disabilities and early aged onset of diseases that really you know it's like accelerated aging. We don't we definitely don't want that.

[00:32:15] We live in a world where the incidence of suicide is really dramatically increasing, because mental illness is not always addressed. And in the elderly this is a very big problem. We can talk about it definitely on other show you know that there's a difference in that respect for males and females as well. As males get very elderly and they're if they're lonely and sad, they have a much higher suicide rate. So there's a difference is it between males and females in just about every aspect of life and you know what we want is for couples to be together hopefully for the duration. I mean one of the things that my parents both lived into their 90s my dad couldn't believe it, because no one in his family was long lived, really. They never got past maybe 70.

**Diane Berardi:** [00:33:07] Wow.

**Felice L. Gersh, MD:** [00:33:07] And he got to 98. And my mother in law's birthday is coming up in two days. She's turning 100.

**Diane Berardi:** [00:33:18] Oh, fantastic!

[00:33:19] I know. So we.

[00:33:22] So there you go. But living long but not living well is not our goal. So you know recognizing that women are going to have higher rates of a lot of these issues and men will have their issues. And but acknowledging these differences and then addressing them is really going to be the key to enabling everyone to live the longest life possible with the highest quality of life.

**Diane Berardi:** [00:33:50] Yeah. You know we don't think of our diet or food. The first thing we think of is, oh call the doctor get a pill, you know get a prescription for something. And I mean

that's amazing with the vegetables and rheumatoid arthritis.

**Felice L. Gersh, MD:** [00:34:06] I know. You know it's like how did we get so brainwashed that we think that there's... Well there is no magic pill that is going to fix all the issues of aging. And we now we know as I've lived through what I call the heyday of big pharma where there was a blockbuster drug coming out it seemed like every other week. And many of them fell by the wayside. They got black box warnings. And you know we're losing our ability to prescribe antibiotics. And many of the mainstay antibiotics are not really approved now for elderly people, because they're more likely... Like Cipro, that you may have heard of, ciprofloxacin. Levaquin. Those kinds of antibiotics are not supposed to be given to elderly people unless it's life and death, because they degrade the collagen and so they can cause tears and rips into ligaments and tendons. And it can also cause arrhythmias.

[00:35:02] So a lot of our mainstay antibiotics like Zithromax like the Z packs. They also have black box warnings that they can cause even fatal arrhythmias. So we definitely have to understand that we have to try to not take a lot of pills. Because there's so many pills said you know the NSAIDs that are used for osteoarthritis, the joint pains, that they triple the risk of a heart attack or a stroke after just three days of use. Drugs like ibuprofen. They are very, and naproxen. And then all the other family ones, like Mobic, they significantly increased the risk of heart attacks and strokes and they are harmful to the kidneys.

[00:35:48] So you know if we can work with nutrition for our elderly you know it's so much better. And the side effects are all benefits. So if you think about you know, men have more certain types of cancers. Well why would that happen? What can we do? Well if we keep them filled with antioxidants it's inflammation that drives DNA to break. And that happens in a chronically inflamed environment which can be triggered by nutritional deficiencies among other things.

[00:36:19] Well we can't address everything, like air pollution. We definitely should have air purifiers, but we can't help it when outside there's air pollution. I have to go outside there is a limit to what we can do you know and you know when we have to go to the store you know we're going to go outside.

**Diane Berardi:** [00:36:35] Right. Exactly.

**Felice L. Gersh, MD:** [00:36:35] But we can certainly reduce a lot of the inflammation by eating tons of vegetables. And maybe we can stall or maybe completely prevent the onset of a cancer. So nutrition is really the foundation of every health program. And then exercise is magical.

[00:36:57] Elderly people need to move.

**Diane Berardi:** [00:37:00] You're right. Yes.

[00:37:00] And you know the osteoarthritis, the pain, they've actually shown that if you don't gain weight and you eat a healthy anti inflammatory diet and you keep moving you know moving those joints will actually help them. We don't want to just sit, sit, sit.

[00:37:18] So you know we can have fun things. Get all the elderly people that we're going to be some day, get them moving. So these are lessons for our elderly parents and these are lessons for ourselves. You know that we need to have the foundation.

[00:37:35] We can't start trying to get healthy, we can but it's not the optimal, you know when we're eighty. Set the foundation when we're younger by enjoying the fruits of the earth. You know maybe

having a home garden, where suddenly when you pick the vegetables or you... Nothing like growing your own tomato you're, right?

**Diane Berardi:** [00:37:55] Exactly.

**Felice L. Gersh, MD:** [00:37:56] And putting it on the table and slicing it up in front of everyone. And how about like for the kids, so that because the foundation of health for when you're elderly of course starts from the very beginning, the very very beginning, even before conception.

[00:38:09] That's why I work with my women patients to get healthy before they conceive. Because you actually, now we know you know there's things that happen in utero that set the stage for the rest of a person's life.

[00:38:23] So it's really, it's complex and it's beautiful to celebrate the differences between males and females, right?

[00:38:31] You know and say, OK we are different.

[00:38:34] We are different. Yes that's right. Thank you. Thank you so much, Felice.

[00:38:39] And your new book, we want to tell people how can we get that, purchase your new book?

**Felice L. Gersh, MD:** [00:38:46] Well my new book is called PCOS S.O.S And it's all about naturally restoring health to women with the most common endocrine disorder polycystic ovary syndrome. And it's available on Amazon.

**Diane Berardi:** [00:39:00] Perfect. And how can people e-mail you?

**Felice L. Gersh, MD:** [00:39:04] Well I have my Web site which is Felice L. Gersh M.D.

[00:39:14] I always forget it has my middle initial in there. So you got to remember the L... FeliceLGershMD.com. And you can contact me through my Web site.

**Diane Berardi:** [00:39:23] Perfect. Thank you again so much for being here.

**Felice L. Gersh, MD:** [00:39:26] Oh my pleasure.

**Diane Berardi:** [00:39:28] Parents Are Hard To Raise® family... We love getting your e-mails and questions, so please keep sending them. You can reach me at [Diane@ParentsAreHardToRaise.org](mailto:Diane@ParentsAreHardToRaise.org). Or just click the green button on our home page.

[00:39:39] Parents Are Hard To Raise® is a CounterThink Media production. The music used in this broadcast was managed by Cosmo Music, New York, New York. Our New York producer is Joshua Green. Our broadcast engineer is Well Gambino. And from our London studios, the melodic voice of our announcer, Miss Dolly D.

[00:39:57] We love our parents, but parents sure are hard to raise.

[00:40:01] Thank you so much for listening.

[00:40:04] Till next time... May you forget everything you don't want to remember, and remember

everything you don't want to forget.

[00:40:12] See you again next week.