

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh Davoodi: You are listening to episode 32 of the Redefining Health & Wellness podcast. You may have noticed that over the last few years diet culture has seized on gut health as being the new thing we should all be worrying about. Probiotics seem to be everywhere, Instagram influencers are hawkking supposed food sensitivity tests, and restrictive diets are the blanket recommendation for any kind of gastric distress. Today on the podcast I have Beth Rosen, a non-diet registered dietitian and digestive disorders expert to help set the record straight on our guts.

We talked about what it means to have a healthy gut, what fads should be ignored, the low-FODMAP diet, and what it means to be an intuitive eater when you have gastric issues. To access the show notes and a full transcript of this episode, head to shohrehdavoodi.com/32. That's shohrehdavoodi.com/32.

Before we get started, I wanted to let you know that my intuitive eating group coaching program, The Snack Pack, is open for enrollment now through February 14th, or until spots fill. If you're familiar with intuitive eating but haven't had a chance to put the principles into practice and dig a little deeper, this eight week program will give you the chance to do so as part of a supportive online community.

Together we'll work to figure out what kinds of diet culture thinking remain in your brain, and how you can realistically eat in a way that is satisfying and enjoyable, given your unique circumstances. Through actual steps you can practice each day journaling assignments, discussion threads, and group coaching calls. This program will guide you away from your diet and food obsession days to help you become an intuitive eater.

If you're interested in joining us, you can go to shohrehdavoodi.com/groupcoaching to get all the details and sign up for the program. That's shohrehdavoodi.com/groupcoaching. And if you're listening to this episode after February of 2020 and I'm not currently enrolling new participants, you can sign up for the group coaching wait list on my website to be one of the first to know when enrollment reopens.

And with that, let's go chat with Beth.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

[Music plays]

Hey y'all, welcome to the Redefining Health & Wellness podcast. I'm your host, Shohreh Davoodi. I'm a certified intuitive eating counselor, and a certified personal trainer. I help people improve their relationships with exercise, food, and their bodies, so they can ditch diet culture for good, and do what feels right for them.

Through this podcast I want to give you the tools to redefine what health and wellness mean to you. By exposing myths and misconceptions, delving into all the areas of health that often get ignored, and reminding you that health and wellness are not moral obligations. Are you ready? Let's fuck some shit up.

All right y'all, so today we have Beth Rosen on the podcast. She is a non-diet dietitian who specializes in digestive disorders and because gut health is just all over the news and in diet culture right now, I figured it was really important to have her on to set some things straight. So thank you so much for being here Beth.

Beth Rosen: My pleasure.

Shohreh: I am really excited to get into the details here, but first I'd love to just hear how you came to do this work?

Beth: So, I've been a dietitian, I'm totally dating myself now, but I've been a dietitian since the mid-90s and I didn't start out in this work. I started out in worksite wellness because there was a part of me that just really wanted to avoid weight management and helping people lose weight because I knew that I didn't have the tools to help them do that. I didn't find that I learned that in school, like the calories in versus calories out didn't really work, and the extra exercise didn't work.

And I know this because I was a dieter since the time I was nine and it didn't work, so I didn't want to do it. So I went another route. But then as I got further in my career, I found intuitive eating in the 90s, but I thought, that's good for someone else, not necessarily for me. But then I got to the point in my own dieting where I was trying to figure out the virtue of an apple.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

So I was trying to decide is an apple a good food or a bad food because in some diets it was a good food and some diets it was a bad food. And I really just had this eye-opening moment where I was like, what the F am I doing here [laughs], it's an apple. Eat the apple!

Shohreh: Yeah.

Beth: It's fruit, eat the apple. So that sort of sparked me to open a private practice and start working with people who were on the diet cycle and get them off. So, at the same time that that was happening, in my personal life, around 2010, I developed C. diff, which is a bacterial infection. And that led me to be diagnosed with post-infectious Irritable Bowel Syndrome. And that's not just like a, oh you have this and now you have this. It took like two years to get a diagnosis. So I was suffering with all of this belly pain, and discomfort, and loose stools - I'm gonna get real gross with you because this is what I do all day.

Shohreh: Please do, that's what this podcast is all about, being honest here.

Beth: Awesome! I love to be gross! So, dealing with all that and I realized, there's really nobody who gets what I'm going through. I keep getting patted on the head and sent out the door, and I wanted to be that advocate for people who were suffering from digestive disorders, but I also still wanted to do that work with people who were trying to get off the diet cycle.

And I was sort of able to create a Venn diagram of my passions where you have people with digestive disorders that might have developed from an eating disorder or disordered eating, and then you have people with eating disorders or disordered eating that develop a digestive disorder. So I was seeing a lot of the same people walk in, so it made sense, okay, let me hone my skill, let me get more education on this, and then really my practice just started to boom.

There are so many people out there who need this kind of help and it just fit really well into my own story, so I can really empathize with people who are going through some of these things because I've gone through both of them. And that seems to be what draws people to me, which I love. But then I also like, as my husband puts it, I heal people out of a job. So I help people feel better and then they don't come back [laughs].

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh: Right!

Beth: So that's really the long of the short of it, where my private practice started and where my fuel for wanting to help others turn on that light to realize that dieting is bullshit and good or bad foods is bullshit and start to think of food as a way to fuel myself or how does it make my belly feel, all those kinds of things. So that's where I switched gears and became this dietitian that I am today.

Shohreh: See, you're a New Yorker, so you have no problem throwing around the word 'bullshit,' Other people come on my podcast and they're like, "Am I allowed to curse?" I'm like yes, please! Please do so [laughter].

Beth: You said I could, so now you're gonna hear it! [Laughs]

Shohreh: Exactly. I know you were kind of joking about dating yourself, but I actually love that you were practicing around the time of the inception of intuitive eating because since it has become such a big thing in the last few years people think it's like this brand new idea, when the reality is, it's actually been around for a long time now.

Beth: It really has. I read it when I was in grad school. Like I remember being on spring break, laying on my bed in my grandmother's house in Florida, reading the book and saying to myself, "This is great, I don't think it'll work for me, but this is great!" [Laughter] And I had read a few other books at that time. There was one called Overcoming Overeating, and there was one called Like Mother, Like Daughter, which was really like a mindful eating practice. But they were all rooted in diet culture.

So the way that I see how it's all grown over the past 25 years with the fat acceptance movement through Health At Every Size and then intuitive eating and those two intertwining, almost marrying each other. It's been wonderful to watch, to see people realize that they can just really listen to their bodies and eat, and move on with their day. The same way they do when they urinate, or when they poop, or when they breathe, right? Same thing.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

So when you see it in the big picture, like, I can't really imagine, again, listening to food rules that didn't come from within me, because it doesn't make sense. Like who decided that?

Shohreh: That's so true. Once you've adopted intuitive eating and it's just a part of your life, like looking at people who are dieting, you're like wait, what? Did I used to do that? Why did I used to do that? Why are there people walking around doing this? It's just very confusing.

Beth: Yeah, I think about it every time I have ice cream, which I stopped eating when I was 15 and didn't eat again until I was in my 40s. That I used to fear it and now I'm just like, ooh, look, there's ice cream, I'm gonna have that. Whenever I have the opportunity now it's like, ooh, ice cream! I didn't even know how much I liked it until I started having it again.

Shohreh: I love that!

Beth: Yeah, and then going through some other foods that were restricted, like other fun foods like cookies. I realized I never had cookies because they were on the 'bad list.' And when I finally had cookies, I'm like, eh, I don't really like cookies, so I don't know what I was so concerned about when I saw them, I don't like them anyway. And so part of intuitive eating is also figuring out what foods do you actually like and what foods don't you like, and it doesn't have to necessarily be related to a rule, or a diet rule, or a restriction based on making yourself smaller.

So I was able to realize, I really like brownies, but I also like baby carrots, and those are two things that might have been on the opposite ends of the spectrum of good and bad foods, but I was able to realize that even though my baby carrots were like a 'diet food' for me, they were my go-to food for a long time, that I can incorporate that into my eating because I really do enjoy them.

Shohreh: Yes, exactly. Those are some of my favorite aspects of intuitive eating. Is this idea that when we get rid of the concept of 'diet foods' and when we get rid of the concept of 'bad' or 'forbidden' foods, you're just left with food, and it turns out you just get to decide if you like it or if you don't. Just like you would with anything else in life, what computer you're gonna choose or what pen you want to use that day. Food can become the same

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

way and be more neutral in that you just get to decide what makes the most sense for you at any given time.

Beth: True, that's so true. And for the most part, for most people that's really all they have to do, right? But then there's people who come to me with digestive disorders and there's another layer to it, right? So it's not just about food being food, but it's what food is gonna make me feel bad. What food is gonna harm me or zap my energy, or make me sit in the bathroom all day, or give me bloat and cramps and gas, and all that kind of stuff. Right, so there's a difference between restricting to be in a smaller body and restricting to feel good.

Shohreh: Exactly! And we are going to deep dive into that as it pertains to gut health today in particular.

And let's first talk about just this idea of gut health because this is something that I feel like is a term that I've seen all over the place in the last few years. It's showing up in a lot of headlines. I'm seeing it for a lot of ads of things that we're all supposed to be purchasing to have a healthier gut. So I'd love to start first by just having you talk more generally about the gut. What does it do? How does it work? What even constitutes a healthy gut?

Beth: Okay, so your gut runs from your mouth to your anus and from that 30 foot length of digestive space a lot of things happen. There are enzymes and digestive juices, and there's muscle movement, and there's breakdown of food into smaller particles. Then there's the absorption of all those things into the blood stream for use for energy or to create other things in your body, whether that's hormones, or collagen, or healing properties, or even immune properties.

And so all of that happens in our gut. And living within our gut, which is a pretty new science, living within our gut are microbes. And these microbes, there's about 10 times the amount of microbes in our gut than there are cells in our whole body! That's a lot of guys in there, right? A lot of little critters running around in there!

So, part of gut health is keeping those microbes, which are made up of different kinds of organisms. So I say 'microbes' and not 'bacteria' because

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

bacteria does live in there, but then there are other things that live in there. So microbes are the bugs, right, and their habitat is called the microbiome. So it's really how they live in the gut, how they work in sync, what their functions are, what metabolites they give off - so what they poop, or what they create right [laughter] - and how that affects our body.

So gut health is making sure that our microbiome is healthy, but also that the system itself, that the structure of our gut is healthy, whether that's reducing acid production if we have reflux, or managing ulcers and polyps if there's colitis, getting tested for colon cancer, all those kinds of things. Or even functional, which is really where Irritable Bowel Syndrome comes in because you don't see anything, it just doesn't work right.

Same with gastroparesis, it's a delayed gastric emptying, so the muscle system isn't working well. We wanna make sure that the muscle movement is working well. That the microbes are healthy and they are thriving because they help with our immune system. They are the communication system to our brain. There's a lot of other things they do, but those are the two main ones.

And so we want to make sure that everybody's in sync and they're working well, because when they're not, that's when our health may decline or something may not feel well.

Shohreh: And as you said, there's like this literal 30 foot length of space, which first of all, is baffling to my brain to think that there's 30 feet of anything inside of my body [laughs].

Beth: And like just in your trunk!

Shohreh: Right, exactly! But because there's so much of it and there's so many pieces, it sounds like that's what some of the complexity can be when we have different gut problems, because there's a lot going on there. So there's a lot of areas where things might not be working as best as they could be.

Beth: Correct, and that's where the problems come in.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh:

And the other thing I'm really interested in too, is I've been doing a lot of reading lately about the brain/gut connection. And this is something that intuitively make sense to me. As you said, we're gonna get honest today. I get horrible performance anxiety and I have my entire life, and when I have that, I'll go to the bathroom like three/four times before I have to perform. So for me I'm like, oh yeah, there's definitely a connection between what is happening in my brain and what's going on with my gut. But scientifically, I'd love to hear what we know about that now.

Beth:

So, we know a couple of things. There's something where our bodies can have a lot of stimuli, react to something in the body and have no reaction that we feel. And then there's times when our bodies can react to a little bit of stimuli by having a big reaction. So people who have 'nervous stomachs.' This bit of adrenaline is released, right, because you're anxious. And instead of it just being a little bit of jitters, your connection is saying, "Oh my goodness, a lion is chasing her," [laughter] whatever it might be.

And pump her full of this fight or flight, and make her go, and because you're not gonna be running, your system will just be moving faster and it'll make you have to go to the bathroom or vomit or whatever your reaction is, or just nauseous or that flipping feeling. So there is that brain and gut communication from just normal, some people have 'nervous stomachs,' and that can happen.

People who have Irritable Bowel Syndrome, they have something called visceral hypersensitivity. And that's where a little bit of stimuli creates a big reaction, when in other people that same stimuli creates no reaction. So for instance, you eat something and that something the microbes feed off of and they create a gas. And somebody who doesn't have IBS might just pass the gas or might not even feel the gas, and somebody who does have IBS, the body, that brain/gut connection is misfiring and it will say there's something awful in the gut and all of a sudden the stomach will blow up, and the gas will come.

And it feels much different than what's actually happening in the body because some bodies don't respond to it that way, but other bodies do. Does that make sense?

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh: Yeah, it does, that is really interesting to me.

I'd love to hear what some of the biggest myths and fads you're seeing around gut health right now because as I've mentioned already, it seems to be everywhere, and everyone is selling products for it. And I've seen a lot of people kind of falling for a lot of this diet culture stuff and thinking like, oh yeah, I struggle with that, I need to cleanse my gut, or I need to take probiotics in absolutely everything. And I have to think that a lot of this is a money thing and not actually products that anybody really needs?

Beth: I would say the money thing is right on the money. So the diet industry makes about \$72 billion, last I saw the number. So of course they're going to benefit from any fad diet that comes to market. Any fear mongering that comes with any new product. So for instance, probiotics. Those came to market under the guise of helping you create this healthy gut that will create longevity and thinness and all these different things that they promise.

But really what probiotics are meant to do is to help make the microbes healthy, right, so to keep them well. The only issue with this is that not all probiotics are created equal. We don't know all of the different strains. I said there were 10 times the amount of microbes in there than there are cells in our body, so we don't know all the strains yet of those microbes. So we may not be feeding the right ones when we have a probiotic.

So, not every host microorganism will do well with whatever we're feeding it. What probiotics do is that they sort of help those specific strands do well. But we don't know yet if those strands have partners that we don't know about, that they work together in. We don't know if it's not the strand that does well, but the metabolite, the thing that it gives off that we do well with. We don't know all of this yet.

So to take probiotics just to take probiotics isn't really helpful. There are certain situations where a probiotic may work and help you feel better, but those are few and far between and actually there's been some research to show that there are some digestive disorders where the use of probiotics has a negative effect. And we certainly wouldn't want that to happen.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

So if you want your hand lotion or your shampoo to have probiotics, go for it! I don't think it's going to do anything. But before you take a probiotic, I would check with an expert, or a professional that understands what these are and who should be taking them, and which strands would benefit you most.

Shohreh: So what else have you been seeing as far as myths and fads in the gut health world?

Beth: So, one thing that's a wonderful addition to helping digestive disorders, but isn't such a wonderful addition to the food industry are prebiotics. Prebiotics is something that's defined as a substrate that is selectively utilized by a host organism to confer health benefits. So basically what that means is it's food for the microbes, right? So instead of just boosting a couple of microbes using the probiotics, the prebiotics is like the food that feeds all the microbes. And they all feed off of it, so they can all be diversified and proliferate, and all these different things, right?

So prebiotics are a wonderful addition to our diet. So prebiotics are usually fibers and sugars that come from our food. But the problem with prebiotics is that for a number of people, especially those with Irritable Bowel Syndrome, or who have that hypersensitivity in their gut, what happens when people eat prebiotics is that the microbes ferment it and use it. And for some people that fermentation can cause pain, bloating, gas, diarrhea, or constipation.

So there are some prebiotics that are better than other prebiotics for your gut health, and some that are just better for the general population. So, to know which ones are gonna cause pain and aren't gonna cause pain, again, that would be important to speak to your dietitian about.

Shohreh: I think there's this idea out there now that if you have any gut issues, or if you ever experience diarrhea, or bloating, or anything, then that automatically means that you have an unhealthy gut and you need to get on some kind of rigid protocol. And it seems like that's not something you wanna just go off and do on your own.

Beth: No, and it also depends on how you got there in the first place. So we're talking about myths and fads. And for a while now one of the fad diets has

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

been a low carb diet. But if we're cutting out carbohydrates from our diet, we're missing out on the source of prebiotic fiber, right? So you could be having issues with your gut because you're not feeding it. You know, when you don't have a well-rounded diet, then you're missing out on certain nutrients and now we're learning that fiber isn't just for bulking up stool, and reducing cholesterol, and helping you feel satisfied with a meal. It's actually feeding our microbiome.

Shohreh: Right, and of course, the gluten-free fad rages on as well and I feel like it's worth mentioning, even though hopefully more people are kind of becoming privy to this now, but who should be doing a gluten-free diet?

Beth: Okay, so I'm going to steal this from a doctor who presented at a conference that I was at because it is one of my favorite things to say.

Shohreh: Excellent!

Beth: So, there are four groups of people who follow a gluten-free diet. People who have been diagnosed with celiac disease, which is done, the gold standard is an endoscopy with a biopsy. But there are blood tests to see if you have the gene for celiac, so you can start there first. People with celiac disease.

People with non-celiac gluten sensitivity. This is a thing. It's measured by antibodies, not that IgG test that a lot of the health coaches and naturopaths are putting out there. And I don't have any ill will towards them, but this test has no basis in science. So people who have actually been diagnosed with non-celiac gluten sensitivity.

The third group are people who have a fructan intolerance which is the fermentable fibers in certain foods, including garlic, onion, wheat, beans, things like that. So those are the three.

The fourth one is people from California! [Laughs] And the reason why he said that is because that fad diet is so big there that it's on, every menu is marked with gluten-free things. There's gluten-free restaurants, there's a huge amount of gluten-free products out there. So I will say the silver lining to that fad diet is that people, the three groups that actually do have to

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

avoid gluten containing products, are benefiting because it's in the stores and it's in restaurants, so it makes it easier for them to eat.

But I will say that the people who don't need to be on a gluten-free diet, which is everyone else, including Californians [laughs] is that they're missing out on fiber, because a lot of gluten-free products are made with rice or tapioca, it's not a whole grain. So they're missing out on some of the fibers that could make their gut healthy if they could have the full fiber versions of the grains that do include gluten.

Shohreh:

Well, and I know a lot of people who don't need a gluten-free diet, but decide to go on it anyways, they say, well "oh, I'm going to keep doing it because I just feel so much better doing it." And it's often because they have also changed a lot of other things in their diet in the process of going gluten-free, that maybe those changes had something to do with it.

It's rarely that you just cut out gluten in a vacuum. And so I always caution people that just because it seems like something made you feel better when you tried it as a restrictive diet, there are still consequences to that choice and you want to be really clear if that's something you actually wanna do.

Beth:

Yes, and if you go off of gluten, then it's really hard to test to see if you have the allergy or the intolerance. So it's important to stay on gluten until you've been tested, and then you can go off it if you need to. But to just go off of it, you're missing the opportunity to see if you do have celiac disease, which is a gluten allergy that can cause damage. And when you take yourself off gluten, you're not necessarily doing all of the cross-contamination work, and that's important too, for people with celiac disease. Miniscule amounts can cause issues in the gut.

Shohreh:

Well, and you mentioned health coaches and naturopaths and kind of some of these tests and things that they're doing, and that reminded me that the other thing that I've been seeing so often is people taking these 'food sensitivity tests,' getting back these long lists of things that they are supposedly sensitive to and shouldn't be eating and then cutting all of this stuff out of their diets as a result of that. And my understanding is that

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

most of those are not scientifically sound tests that we know for sure can show food sensitivities. And yet they're everywhere.

Beth:

That's one of my biggest gripes, with professionals that are not staying in their lane, meaning that they're not nutritional professionals. We know from science and from research that IgG testing is not accurate and it really shows the foods that you can tolerate over time, not that you should be avoiding. And it also puts an extra level of food fear in people and it causes more restriction, which can lead to more digestive issues. So it's really, when people bring it into my office I say, "Are you giving this to me to shred, because I'm not reading it!" [Laughter]

To create another set of rules really just exacerbates the issue. But there is a dietary intervention that can help you figure out what's causing your dietary distress, especially if you've been diagnosed with Irritable Bowel Syndrome, or small intestinal bacterial overgrowth, and in many cases colitis. And that's called the low-FODMAP diet. FODMAP is an acronym and it stands for Fermentable Oligosaccharides, Disaccharides, Monosaccharides, and Polyols, which is a fancy way of saying fermentable carbohydrates.

So, by going on the low-FODMAP diet, with the help of a professional, because there are phases to it, and figuring out what your specific food triggers are, if any, is probably the best way to go.

Shohreh:

Yeah, and the low-FODMAP diet is another one of those things that I see people just, it'll be like Instagram influencers being like, "Oh, here's how you do it, you just cut all this stuff out, you go on this diet," and I think it's really important again to note that the low-FODMAP diet is something that you want to do, ideally, with a registered dietitian who can guide you through that process.

Because the other thing too, is I think people get confused with the low-FODMAP diet, that the goal is to just cut everything out and keep it out forever. And my understanding is that's not the case.

Beth:

That's right that is not the case. The low-FODMAP diet is a three phase diet. The first phase is an elimination phase, but it's only meant to be for two to six weeks. If you don't feel a difference in those two to six weeks,

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

then you abandon the diet. But if you do feel a difference, then you move onto the next phase, which is called the Reintroduction Phase, and there's a systematic way of reintroducing foods, specifically over a couple of days, with a growing portion size, to determine if that food is a trigger for you.

And once you go through all those foods and you figure out which ones are triggers and which ones aren't, that's your Personalized Phase. That's the last phase, and you live that way. And so that really, what that can do for you is liberalize your diet to the biggest degree possible and minimize food fear so that you're not concerned that food is always the cause of the stomach. Right, so you, for example, how you said that you have performance anxiety, you can either blame it on what you ate before you performed or you can blame it on the fact that stress caused it, or anxiety caused it, right?

And a lot of times it's not just food that causes digestive issues. It's stress, it's lack of sleep, it might be certain medication, it might be restrictions, so people who diet or people with eating disorders, or maladaptive eating, those people will develop digestive issues as well. So, sometimes your reason for having digestive issues is not from the food, and yet it's so easy to blame food because it makes sense. It's what you eat, but it's not necessarily what's causing the pain.

Shohreh:

And that's something I know that Christy Harrison has spoken a lot about on the Food Psych podcast too is how she thought that she had a gut health issue and so she just kept cutting out more and more foods, when in reality it was the fact that she was not properly nourishing herself and she was restricting so much, that was causing those gut issues. But it's so easy to get kind of caught in that cycle and have it be a self-fulfilling prophecy. I feel like we're like, oh, it has to be this food, we'll just keep cutting things out and eventually you're not gonna have anything left to eat.

Beth:

Right, and I'm a huge proponent of the low-FODMAP diet, there's 10 years of research that back it up. That said, it is not for everyone, and that's why it's important to seek out somebody who understands who it's right for, and screen people, especially for eating disorders. And then have the opportunity to give them other options, other than just limiting foods.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

So for someone like Christy, if she was my client at the time, knowing that she has a history with eating disorders, I certainly wouldn't have put her on that diet. I might have looked through what she eats on a day-to-day basis, since people are typically habitual, and maybe pulled a few of the high FODMAP foods out, not letting her know that those were what I was pulling out.

And coming up with substitutions, so there wasn't a negative space where food should be, and then help her to realize that eating carbohydrates is an important way to fuel your gut because that's what our microbes feed off of, so we need to be eating fruits and vegetables and whole grains and lentils and beans, and things like that, and try to increase the food repertoire.

Shohreh: And that's so important because I do think there can be a real lack of sensitivity to disordered eating and eating disorders in this particular area, because it's so easy to blame the food and say, "All right, we'll just take it out." And I love what you said about how there's more nuance to this. It's not necessarily that simple. Even if that might be the thing that would make somebody feel their best, would be to just straight up go on the low-FODMAP diet, if that's going to trigger your eating disorder, that's a real consideration.

Beth: Yeah, and in some cases I won't even do a dietary intervention. I will suggest cognitive behavioral therapy because that's been shown to help with gut health. And also gut-directed hypnotherapy; both of those have shown to be as impactful as the low-FODMAP diet. So while I wouldn't want to necessarily work with somebody on changing their diet when they're going through an eating disorder, I'd more likely to work on the eating disorder first, a lot of times when the eating disorder has gotten to a place where it's a little bit safer, then the digestive disorder sometimes goes away.

But if not, then we can work on that after. But there are other tools. There are alternative tools that don't involve diet that can help people who have eating disorders deal with their digestive disorders.

Shohreh: Mmm, and that's so important,

Redefining Health & Wellness #32

Featured this episode: Shohreh Davoodi & Beth Rosen

Specifically too, I wanna talk a little bit about the difference between, say, going on a diet for weight loss or to change your body versus something like going on the low-FODMAP diet with a registered dietitian to help your gut issues or food issues that you're having, and kind of how intuitive eating works its way into there.

Beth:

Yeah, this is a great question. The way I work with my clients a lot of times is I explain when I want them to track what they're eating or keep a food log, since that sometimes feel real diet-y, is really coming from a place of curious observation, and we're doing data collection. We're looking for what might be causing the pain, what kind of day is it coming, what are the symptoms, is it getting better, is it slowly getting better so we can see little changes.

People tend to remember the negative rather than the positive. So when you put the data down, it's just objective, right? On this day I felt like this, on this day I felt like this, and I ate this, right? So we do that. I really want people to get in touch with what makes their body feel good and what causes them to feel pain.

And then they have the choice at that point, if they don't have celiac disease or some allergy to a food specifically, to decide whether or not they want to eat that food. So for instance, I personally know that one of my triggers for my Irritable Bowel Syndrome is onions. So I tend to avoid them on a regular basis. But, if I'm someplace and I know I'm going to be home later and somebody offers, well, if my mother offers me her egg salad and I know she puts onions in it, I may just eat it because it's so good, I love her egg salad. She like cooks the onions first, delicious [laughs].

So I've been asking her to make me my own batch without onions, which isn't as fun, but if I'm going to eat it, I have a choice. I know how I'll feel when I'm done, because I always feel that way from onions, or I can choose not to eat them and find something else to eat. So, it's not just about how does this food feel in your body and now you need to stay away from it forever. You have the choice of whether or not to feel that way or not feel that way, right?

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

It's not me saying you can't have. This is what we've discovered, and now it's your choice. The way I look at it is, let's find the best way to liberalize your diet, rather than taking it out and saying it's going to hurt you, let's see what else we can do, right? Same thing with the onions. I may not be able to eat onions, but I can have the green part of scallions and the green part of leeks, and so I still have that onion flavor, but I can't have the specific onion if I want to be able to button my pants [laughter].

Shohreh: Well, and I love that because I feel like if you work with someone who is a professional and knowledgeable in those areas, who can help you see, here's all the different choices for you, let's find the one that works best for you, that's gonna feel so much better than just immediately jumping to, well, I have to cut it all out and be miserable for the rest of my life.

Beth: Yeah, and if there is that reason why you need to eliminate a whole food group or specific food, then hopefully that professional can help you find a substitute that's gonna give you the same nutrients. Maybe the same mouth feel or the same texture, something that will bring that enjoyment to you. So I'll give you again, an example from my life. I do not do well with lactose. So I'll typically use a pill when I have dairy products, and I can tolerate ice-cream, but believe it or not, I can't tolerate yogurt, even with the pill.

So I've switched to a plant based yogurt, but a lot of them don't have calcium, they don't have protein. So it doesn't really make sense to have this product that doesn't fill the need of milk. So I found one that's made with flax milk, it has protein, it's got calcium, boom, I got it right? So that I'm very happy with, that I have that. And there are lots of substitutes. Maybe you do like the soy milk yogurt, that has the protein and it has calcium, but not everybody does.

So playing with it and really looking at food from a curious standpoint rather than a judgmental standpoint will make it easier to figure out what's going on with you and your relationship with the food.

The last thing I wanna say about that is that a lot of people will have a reaction to something and automatically cut it out, when maybe it wasn't the food to begin with. And I'll go back to that, you know, your

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

performance anxiety again. Maybe you had ice cream before then and then you had performance anxiety and maybe you vomited and that experience was so traumatizing to you that you said, "I'm never eating ice cream again because it caused me to vomit." When really it wasn't that, it was the nerves.

Shohreh: Right, which thankfully I never jumped to that, so I could easily see over time, oh, there's a connection between every single time I have to perform and my bathroom activity [laughs].

Beth: Right, right, and there are plenty of people that come to me and say, I can't have this, this, this, this, and this. It's like, okay, why? [Laughs] You know, it's like, if I tell you this food is safe, that this food typically does not cause that reaction because it's low-FODMAP, there's no gluten in it, there are no fructans in it, there are not saccharides in it, will you be willing to try it?

A lot of times when people come to me, I have to get them to the point of eating foods that are on the low-FODMAP diet before we can get to the elimination phase. Like we have to do like a pre-build up your diet again because in some cases people come to me and they're just eating like chicken and rice because they don't know what else to eat.

And when you have that level of food confusion and food fear, first we have to build people up to realize, not all food is going to cause us pain, to trust, to be able to take things in small amounts and see how they feel, and really start to analyze the data of what they're eating, to see if it's really the root cause of their pain.

Shohreh: Mhmm, absolutely. Well, we have come to my final question of the podcast which is, how do you define health and wellness for yourself at this moment in your life?

Beth: So, I see it as eating for my gut health, joyful movement to keep my body moving, just for the sake of wellbeing and not for the sake of making myself smaller.

Shohreh: I love that! Nice and succinct.

Beth: Yeah.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh: Well, thank you so much for being here. How can people find you, work with you? I know you have some resources and courses out there you wanted to share as well, so feel free to tell me all about those.

Beth: Okay, so my website is www.goodnessgraciousliving.com. That's all one word. So on there you can find lots of free resources. If you are looking to heal your relationship with your body, I have something called Inner Girl Power Challenge, which gives you a good jumpstart to moving away from diet culture and towards intuitive eating. If you wanna take a deeper dive on that, I also have a course called Inner Girl Power: The Non-Diet Mission, which covers it in a broader aspect, and that's sort of the work I do with my private clients and I put it all on an online course, since I can't reach everybody.

And then on the other end is the digestive side. I have two really good freebies on that side. One is something called the Tell Your IBS Story and it's a PDF, it's a five page PDF, for you to, it prompts you to fill out all of the information to share with your providers so that they can get you a diagnosis and treatment quicker. And that way you don't have to repeat yourself or spend all that time trying to remember all of that information. You can do it in the privacy of your home and then give it to your providers.

I will tell you that came out of me going to doctors and wanting to give them my information, but also having clients come to me and wanting to know their whole stories. And then I also have another freebie which is a webinar, 3 Strategies For Success with the Low-FODMAP Diet. So if you've been put on it, and you're having trouble with it, this webinar will help.

And then if you do wanna take a deeper dive on that end, I do have an online course called How to Get Your Gut In Sync and it does go through the low-FODMAP diet in detail. It also gives alternatives to the low-FODMAP diet, plus some complimentary therapies to help with that.

And last I'll say that if you do wanna connect with me, you can do that on my website. You can also connect with me on Instagram and it's @goodnessgraciousliving. that's where I'm mostly. I am on Facebook and Twitter, but you'll find me on Instagram most of the time.

Redefining Health & Wellness

#32

Featured this episode: Shohreh Davoodi & Beth Rosen

Shohreh: Fantastic. I will link to all of those in the show notes, especially for those of you guys who have been having gut health struggles, it sounds like go get your hands on those freebies, work through those, see what you can learn about yourself in a non-diet culture way, which is hard to find out there. So I'm so glad that your work exists.

Beth: Thank you so much.

Shohreh: Yeah, thank you for being here.

Beth: Oh, my pleasure.

[Music plays]

Shohreh: And that's our show for today. I appreciate you listening to and supporting the Redefining Health & Wellness podcast. If you enjoyed this episode, it would mean so much to me if you would subscribe and leave a review with your podcast provider of choice. It will really help other people who might benefit from the podcast to find it more easily.

I also love chatting with listeners, so feel free to screenshot from your podcast player, post on social media, and tag me. And if you're looking for more information on what I'm all about and how to work with me, head on over to shohrehdavoodi.com. I hope to see you for the next episode."