



Addressing the Root Cause of Perimenopause Symptoms:

AN INTEGRATIVE MEDICINE CASE STUDY

WITH EXPERT PERSPECTIVES BY:

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PATIENT INFORMATION



Name: Diane	Race/Ethnicity: Caucasian
Date of Birth: April 3, 1979	
Marital Status: Married	
Problems: Fatigue, low mood, irritability, heavy and irregular periods, low libido, frequent headaches	
Allergies: None	

Social History:
Alcohol: Drinks socially
Smoking: No history

Vital Signs:	
Height: 5'6"	Weight: 165 pounds
BMI: 26.6	Total cholesterol: 180
Blood pressure systolic: 118 mmHg	HDL cholesterol: 50
Blood pressure diastolic: 78 mmHg	Non-fasting glucose: 100 mg/dL

Medications:
None

Health Concerns:
Anxiety



CASE STUDY



Meet Diane

Diane is a 44-year-old stay-at-home mother of three children living in a suburb outside Cincinnati, Ohio. She and her husband, Dale, have been married for 15 years, not all of which have been easy.

Both coming from conservative, religious upbringings, Diane and Dale were determined to make their marriage work even in the most turbulent times. Diane, just 24 when they married and 25 when their first child was born, quickly began to resent Dale as he spent time with friends and worked late while she stayed home.

Raised to abide by traditional gender roles, Diane was hesitant to address her feelings with Dale. However, her resentment only grew, and eventually, they went to marriage counseling at their church. And while it provided them a space to talk through their problems, Dale's behavior did not change, and Diane decided that for the relationship to work, she needed to accept that.

Today, Dale works 50 to 60 hours a week as a contractor, and Diane homeschools their five-year-old daughter, Grace, along with a small group of other preschoolers from their church. Their other children, Michael, age 14, and Luke, age 12, both attend the local middle school.

Diane usually cooks dinner for Dale and the kids every night except Sunday when they get takeout. Between homeschooling five preschoolers from 8 a.m. to noon, driving the boys to and from their various extracurriculars, and serving as a member of the school board, Diane does not have much time to cook at the end of the day. She often makes quick meals like pasta with

frozen meatballs and store-bought red sauce, sloppy joes, or a casserole with whatever she can find in the fridge.

In the morning, Diane makes the boys lunch and snacks on whatever she's making, usually white bread and lunch meat, skipping breakfast. For lunch, Diane will either have leftovers from the night before or microwave a low calorie frozen meal. For most of her life, Diane has cycled in and out of weight loss programs, usually losing five or ten pounds before going off the diet and gaining it all back within weeks.

After having Grace, who came as a surprise, Diane went on the birth control pill for the first time, but she felt the pill made her more emotional, and she stopped taking it after one year. Recently, her sex drive has significantly decreased, and she has been having heavier, more irregular periods. She's also been more fatigued, irritable, and moody, which she attributes to her lack of sleep.



Diane's family has been noticing her low mood, but she denies that anything is wrong. She's embarrassed by having symptoms of menopause so young, and she's hesitant to discuss it with other women because it's such a taboo subject within her family and community. Diane has decided to turn to an integrative practitioner to help better understand her symptoms and improve her overall health. ○



DR. WARNER'S PERSPECTIVE



Wendy Warner, MD

To Dr. Warner, Diane's situation is all too familiar. As a traditionally trained OBGYN now practicing functional gynecology, Dr. Warner is used to treating women struggling with symptoms of perimenopause and menopause. Between working, taking care of the kids, and keeping up the household, women in their 40s and 50s often aren't prioritizing self-care. But for patients like Diane who are becoming symptomatic, Dr. Warner says if they've never taken care of themselves, now is the time to start.

FIRST VISIT

Before meeting with Diane, Dr. Warner would have a health coach or nutritionist do a patient intake, helping Diane complete new patient paperwork detailing her health history, current symptoms, diet, and lifestyle.

During their actual visit, Dr. Warner would ask Diane more specific questions about not only her physical symptoms but her stressors, lifestyle, and emotional well-being, all of which could be contributing to her health problems.

On paper, Diane seems like a typical perimenopausal woman experiencing fatigue, mood swings, and irritability. However, to properly identify the root of Diane's problems, Dr. Warner would need to delve deeper into some of her reported symptoms. For instance, Dr. Warner would want to know more about Diane's menstrual cycle, like how often she's getting her period and how heavy her flow is.

Diane also reported having low libido. When patients report "low libido," Dr. Warner says it's important to distinguish whether they're lacking a sex drive and experiencing sexual dysfunction or if they're simply disinterested in sex. Libido, Dr. Warner says, refers strictly to interest; so, if Diane is unable to have an orgasm or is having painful sex, that's a very different issue.

If Diane is having sex, Dr. Warner would make it clear to her that because she's still menstruating, regardless of whether her cycle is irregular, she could still get pregnant. Dr. Warner would discuss birth control options with Diane to prevent unwanted

pregnancy, which Dr. Warner says is not limited to the pill. For couples who are absolutely sure they don't want any more children, a vasectomy for the male is a good option since it's effective and less risky than female sterilization.

Dr. Warner would also like to learn more about Diane's headaches. With an herbalist background, Dr. Warner knows several different kinds of headaches exist. To get to the bottom of what's causing Diane's, Dr. Warner would ask about the time of day she usually experiences her headaches, if they coincide with her cycle in any way, if they're related to food or stress, what they feel like, and where the pain is most concentrated.

Without proper sleep, Diane's symptoms will not improve. Dr. Warner would address sleep hygiene with Diane, asking her about her sleep schedule and how she settles





DR. WARNER'S PERSPECTIVE



down at night. Dr. Warner would also ask about Diane's sleep quality, including whether she wakes up hot or hungry, which could be signs of adrenal dysfunction and hypoglycemia.

Marital stress can take a real toll on both emotional and physical well-being. Because Diane reports feelings of resentment towards her husband and a history of unsuccessful marriage counseling, Dr.

Warner would explore how those stressors could be impacting her health. Despite Diane's "acceptance" of her situation, Dr. Warner would ask if she still holds negative feelings towards her husband and explain the science behind the physical impacts of that kind of stress. Dr. Warner would not allude to divorce during their first visit, especially considering Diane's religious values, but she may explore coping mechanisms to help reduce any emotional reactions that could be taking a toll on Diane's health.

In addition to her marriage, Dr. Warner would ask more about Diane's workload and household responsibilities. Between homeschooling five children, being on the school board, transporting her boys to their extracurriculars, cooking dinner, and cleaning the house, Diane has a lot on her plate. To ease stress, Dr. Warner would ask what commitments Diane would be willing to give up. For instance, Diane could leave the school board, or if she's not benefiting financially from homeschooling the children from her church, she may want to consider homeschooling only her daughter.

For testing, Dr. Warner would want to first focus on Diane's blood sugar, which is likely unstable and worsening her

symptoms. To assess Diane's glucose levels, Diane would order a comprehensive metabolic panel, hemoglobin A1c, and fasting glucose and insulin test.

For a better understanding of Diane's stress hormones, Dr. Warner would test Diane's cortisol and DHEA levels, which must be tested when a patient is fasting and before 9 am. Dr. Warner says that other, more in-depth hormone testing is expensive and isn't always necessary. After working in gynecology for 30 years, Dr. Warner says she has become familiar with patterns and often doesn't need testing to diagnose hormone imbalances.

Then, to understand the effects of Diane's diet on her body and her levels of inflammation, Dr. Warner would order an advanced lipid panel. Dr. Warner would also order a full thyroid panel, including antibodies, to check for thyroid problems, which commonly begin in midlife. Dr. Warner would also test Diane's levels of vitamins D and B12 as well as Omega-3.

CARE PLAN

DIETARY CHANGES: A big focus for Dr. Warner would be improving Diane's diet, which is currently meat and starch-heavy with insufficient vegetables. Dr. Warner's plan would involve working with a health coach to introduce more vegetables and reduce excess carbs. Dr. Warner says this change is crucial for hormone production and managing blood sugar levels, especially given the impact of cortisol on insulin.

SLEEP HYGIENE: Dr. Warner would suggest Diane reduce screen time before bed and create a calm environment for better sleep. For persistent insomnia or brain chatter, herbal remedies like lemon balm, milky oat top, and passionflower might be recommended.

PERSONAL TIME AND DELEGATION: Dr. Warner would encourage Diane to find time for herself, even if it's a short period before bed. Depending on Diane's family dynamics and beliefs, this might involve delegating tasks to family members or hiring help for household chores.

PHYSICAL ACTIVITY: The care plan would gently incorporate physical activity, such as walking, to help with muscle mass and blood sugar stabilization. The focus would be making time for solitary, non-multitasking walks to provide mental relaxation.





DR. WARNER'S PERSPECTIVE

STRESS MANAGEMENT: Dr. Warner would introduce the concept of coherence and balance in the nervous system through the practices taught by the Institute of Heart Math. These techniques involve breathing and actively creating positive emotions to rebalance stress hormones.



Supplements:

CHASTEBERRY: Dr. Warner would likely start Diane on Chasteberry right away, which can help improve progesterone production and help stabilize periods and mood swings.



SIBERIAN RHUBARB EXTRACT: If Diane were experiencing hot flashes, Dr. Warner would suggest Siberian rhubarb extract, which can reduce hot flashes through a slight increase in estrogen.

HERBAL SUPPLEMENT FOR BLOOD SUGAR: Depending on Diane's lab results, Dr. Warner might recommend supplements for blood sugar regulation, which commonly include a combination of herbs such as bitter melon and fenugreek powder.

MACA: According to Dr. Warner, Diane likely has adrenal dysfunction which can be supported with supplemental maca.



a health coach to develop recipes for the whole family and find ways to include her kids in the meal-making process.

Because Diane has conservative religious values, she may not be receptive to stress-release exercises that Dr. Warner usually suggests to her patients, like mindfulness or qigong. When speaking with Diane about the HeartMath method, which encourages positive feelings and hormone balance, Dr. Warner may relate it to prayer. For instance, a prayer about gratitude is similar to the HeartMath method, whereas a prayer focusing on someone's problems is not as helpful for stress reduction.

LONG-TERM

Dr. Warner's long-term goal for Diane is for her to live more intentionally. Many women Diane's age are so overwhelmed by work, family, and chores that they end up living without much thought, putting everyone else's needs before their own. With more intention, Diane could start making decisions based on her physical and mental health instead of doing whatever is quick and easy, helping her live a happier, healthier life. ○



CASE CONSIDERATIONS

To motivate Diane, Dr. Warner would offer an overview of the necessary changes and allow Diane to choose which aspect to tackle first. This patient-led approach helps prevent overwhelm and encourages gradual, sustainable changes. Dr. Warner would also explain the interconnectedness of Diane's symptoms to provide a clearer understanding of how certain changes can have broad benefits.

Diane lives a busy life, and finding time to cook healthy meals can be difficult. Dr. Warner would ensure Diane worked with



DR. DAE'S PERSPECTIVE



Daemon Jones, ND

Dr. Dae, would approach Diane's care plan holistically, optimizing Diane's mental and physical wellbeing through mainly diet and lifestyle interventions. Dr. Dae would personalize a six-month program designed to address Diane's immediate health concerns and provide her with the tools and knowledge to maintain her lifestyle changes.

FIRST VISIT

Dr. Dae asks all her patients to complete detailed paperwork before their first visit, which she calls a health evaluation. The paperwork involves various questionnaires on the patient's current symptoms, health history, recent labs, home life, and most importantly, their personal health goals.

After reviewing the completed questionnaires, Dr. Dae can gauge the timeframe of the patient's care plan, what lab work may be needed, and the cost of treatment. During their first visit, Dr. Dae is upfront with the cost and timeline of her patient's care plans so they understand what they're committing to.

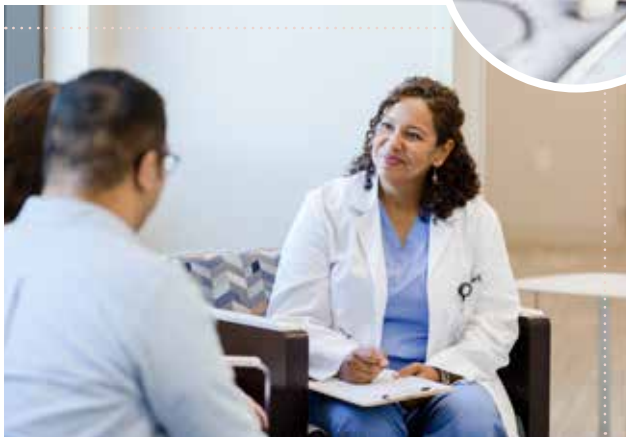
Dr. Dae often encourages her patients to bring their spouses or partners to their health evaluation. Because one

individual's lifestyle changes usually impact others in the household, spouses must understand why the changes are necessary and be supportive. Dr. Dae says spouses also can provide valuable insight into the patient's condition and highlight issues not initially disclosed by the patient. For instance, Dale could give more intel on Diane's mood and behaviors, her lifestyle habits, and an outside perspective on what interventions would be realistic and sustainable for Diane.

The most crucial part of Dr. Dae's health evaluations comes when she helps patients determine their health goals. Often, a patient's goals are different from what Dr. Dae's goals would be for them. Dr. Dae always centers her care plan or program around the patient's needs to prioritize what matters most to them.

Then, depending on Diane's patient paperwork and health evaluation, Dr. Dae would order lab work. Tests Dr. Dae would consider for Diane include,

- **Comprehensive Thyroid Panel:** To evaluate thyroid function, including all thyroid markers, not just the basic ones. This is important for understanding metabolism, energy levels, and possibly mood.
- **Cholesterol and Lipid Profile:** To assess cholesterol levels and related markers, which are important for cardiovascular health.
- **Liver and Kidney Function Tests:** To evaluate the health and functioning of the liver and kidneys involved in detoxification.



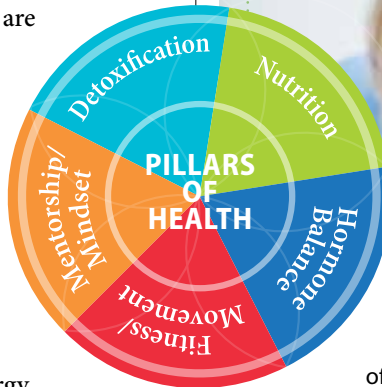
DR. DAE'S PERSPECTIVE

- **Inflammation Markers:** These tests can help identify any ongoing inflammation in the body, which could be contributing to symptoms like fatigue or headaches.
- **Complete Blood Count (CBC):** A standard test to check for various disorders, including anemia and infection.
- **Glucose and Insulin Markers:** To assess blood sugar levels and insulin function, which are crucial for energy and overall metabolic health.
- **Female Hormone Panel (DUTCH Plus Test):** This would include testing for cortisol, dehydroepiandrosterone (DHEA), estrogen, testosterone, and progesterone levels. It's especially relevant for understanding hormonal imbalances that might be affecting Diane's menstrual cycle, mood, and energy levels.
- **Organic Acids Test:** To provide insight into nutritional deficiencies and metabolic function.
- **Tests for Nutritional Deficiencies:** These would be based on her dietary habits and could include testing for vitamins, minerals, and other essential nutrients.
- **Zonulin or Other Gut Health Markers:** To assess for leaky gut syndrome, especially if gastrointestinal symptoms or food sensitivities are suspected.
- **Food Allergy Panel:** Depending on Diane's symptoms and diet, a food allergy panel might be considered to identify any allergies or intolerances contributing to her health issues.

CARE PLAN

Following her patients' health evaluations, Dr. Dae outlines a program right away, which includes educational modules, community classes, and health coaching appointments scheduled in advance, all at once. Between modules and classes, patients have check-ins every two to three weeks.

Dr. Dae's programs are grounded in the principle of "doctors



as teachers." Considering Diane's hectic schedule, Dr. Dae would design a six-month plan not to overwhelm Diane with appointments and educational material. Modules assigned to Diane would focus primarily on what Dr. Dae calls the pillars of health, including detoxification, nutrition, hormone balance, and fitness/movement.



Detoxification

Dr. Dae would conduct comprehensive lab tests to assess liver and kidney function, inflammation levels, and potential nutrient deficiencies. These labs would help Dr. Dae determine if Diane's body is effectively eliminating toxins and give more insight into how her diet impacts her health issues.

Many of Diane's symptoms, such as anxiety, fatigue, and heavy periods, could be related to detoxification. Through analysis of Diane's stomach acid levels and other lab results, Dr. Dae could identify problems with digestion and metabolism.

According to Dr. Dae, deficiencies in metabolites such as magnesium could be a source of Diane's headaches. Depending on Diane's lab results, Dr. Dae may suggest specific supplements to support detoxification pathways and address deficiencies.



Nutrition

A cornerstone of her approach, Dr. Dae emphasizes the importance of understanding Diane's current diet through diaries and journaling. This would help with tailoring a nutritional plan based on Diane's needs and lab results.



DR. DAE’S PERSPECTIVE

Diane’s consumption of processed foods could be another contributing factor to her frequent headaches due to their lack of essential nutrients and harmful additives. Food allergies may be another cause of Diane’s headaches, so Dr. Dae would instruct Diane to avoid any food intolerances found in her food allergy panel.

Dr. Dae would likely recommend an anti-inflammatory diet with whole, unprocessed foods and an emphasis on increased vegetable consumption. A health coach would provide Diane with practical advice on meal preparation, recipes, and other resources to make healthy eating more accessible and sustainable.



Hormone Health

Depending on Diane’s lab results for cortisol, estrogen, progesterone, testosterone, and DHEA levels, Dr. Dae would create a plan to normalize Diane’s menstrual cycles and address related symptoms like heavy periods, headaches, and mood swings.



Because stress has such a significant impact on hormones, paramount to Diane’s care plan would be stress management. Dr. Dae may suggest mindfulness practices and getting help with cooking and household chores.



Fitness/Movement

Dr. Dae’s program would involve an exercise regime that aligns with Diane’s fitness levels, preferences, and goals. With help from her health coach, Diane could find ways to integrate more movement into her day-to-day routine, such as walking, stretching, or other activities.

Increasing her levels of physical activity could help reduce Diane’s stress and anxiety. In addition, exercise could alleviate Diane’s fatigue, increase her energy, and encourage weight loss.



Mentorship/Mindset

Through regular follow-ups with her health coach, community classes, and educational videos, Diane would also be encouraged to participate in self-care practices, hobbies, and relaxation techniques to address her mental and emotional health.

Dr. Dae would also address Diane’s sleep, asking questions about her sleep quality and bedtime routine. If Diane has trouble falling asleep due to a racing mind, Dr. Dae may consider supplements. Otherwise, Diane would receive help from her health coach on how to wind down before bed and create an optimal sleeping environment.





DR. DAE'S PERSPECTIVE

CASE CONSIDERATIONS

As a busy mom and homeschool teacher, Diane cannot be expected to immediately and seamlessly implement strict diet and lifestyle interventions. Dr. Dae would design the program around Diane's personal goals, tailoring it to her lifestyle so it's both achievable and sustainable.

During their last two appointments, Dr. Dae would check in with Diane to see what improvements she had made and whether there were things she still wanted to work on. If Diane were satisfied with her results, Dr. Dae would help her devise a plan of action to ensure she could continue her lifestyle changes related to sleep, stress, diet, and supplements.

However, if Diane was not ready to stop the program, she could continue with maintenance options, which are typically monthly appointments, until she achieves all her goals and feels comfortable and confident moving forward.



LONG-TERM

While Dr. Dae's long-term goals for Diane would be centered on Diane's personal goals, in general, Dr. Dae would strive to optimize Diane's overall health and wellness. Dr. Dae would like to see improvements in not just Diane's physical health but also her emotional wellbeing, lifestyle, and personal fulfillment. Specific goals Dr. Dae would include in Diane's program involve,

- **Engaging in Hobbies and Personal Time:** Encouraging Diane to pursue activities and hobbies that she enjoys independently, fostering personal growth and fulfillment.
- **Improved Sleep Quality:** Ensuring Diane achieves better sleep, which is fundamental to overall health. This involves both the quantity and quality of sleep.
- **Increasing Energy Levels:** Addressing potential factors like sleep and adrenal function to boost Diane's energy levels.
- **Better Menstrual Cycles:** Balancing Diane's hormones, mainly focusing on normalizing her menstrual cycles, possibly linked to her stress and cortisol levels.
- **Mood Improvement and Anxiety Management:** Assessing and addressing Diane's mood, especially her anxiety, and understanding its potential links to her menstrual cycle or other health factors.
- **Eliminating Headaches:** Investigating and treating the root causes of Diane's headaches, which could be related to diet, stress, or other health issues.
- **Education on Nutrition and Meal Preparation:** Providing Diane with the knowledge and skills to prepare healthy meals, understanding her nutritional needs, and addressing any deficiencies.
- **Weight Management and Insulin Sensitivity:** Ensuring Diane's weight is within a healthy range and treating any potential insulin resistance issues.
- **Strengthening Connection with Her Husband:** Enhancing Diane's emotional and intimate connection with her husband, including addressing issues related to libido and mutual support. ○



DR. MINICH'S PERSPECTIVE



Deanna Minich, PhD

With a clinical focus on nutrition and therapeutic nutrients, Dr. Minich's priority would be to increase Diane's intake of nutrients. Instead of overwhelming Diane with aggressive diet and lifestyle changes, Dr. Minich would first recommend adding supplemental nutrients into her daily routine and increasing her water intake. Then, once Diane started to feel better, Dr. Minich would help her improve her diet, working on meal prep and easy recipes to help Diane maintain healthy eating in the long-term.

FIRST VISIT

In the first visit, Dr. Minich would take a functional medicine approach of listening to Diane's story. Her goal would be to establish trust, rapport, and an understanding of what she can do with the physical, emotional, mental, and social resources Diane has available to her. Without this context, Dr. Minich could not create a sustainable healing journey.

Dr. Minich would also like to understand which symptoms are most bothersome for Diane. If it's anxiety, as mentioned, Dr. Minich would like to know when she experiences anxiety, where she experiences it in the body, and how often she has it to assess whether it might be related to a nutrient deficiency like magnesium or even certain amino acids.

Depending on Dr. Minich's assessment during Diane's first visit, she may order laboratory tests to look closer at Diane's hormone status. Although, according to Dr. Minich, in-depth hormone testing is not always required. She says symptoms can provide enough information to proceed forward with a plan.



CARE PLAN

Dr. Minich would like to get Diane on a path to eating better for herself and her family. According to Dr. Minich, with an increased intake of quality nutrients, Diane's symptoms would start to improve and she'd be better positioned to implement more diet and lifestyle changes, benefiting her whole household. Since Diane had already expressed being overwhelmed, Dr. Minich would plan different stages of the care plan with her.

First and foremost, Dr. Minich would want to ensure that Diane is adequately hydrated and drinking quality, purified water throughout the day. It's a simple and essential first step, yet it could have a profound impact on her symptoms related to mood and energy level, according to Dr. Minich.

Secondly, rather than try to overhaul Diane's diet, Dr. Minich would start by introducing some convenient nutrition in the form of a basic protein powder with some fiber (a non-expensive quality protein that she can tolerate) plus a phytonutrient-dense powder to help reduce some of Diane's symptoms. This would also give Diane a boost of nutrition in the early morning when it's needed most, even if it's a quick shake consisting of the two powders in a shaker cup. Protein and phytonutrients are essential for healthy



DR. MINICH'S PERSPECTIVE

detoxification and enable better liver health and function, all of which could help Diane with her hormone status and symptoms.

To increase Diane's phytonutrient intake, Dr. Minich would encourage her to use products she may already have at home, like herbs, spices, and herbal teas, which are reservoirs of phytonutrients at a lower cost. In addition, Dr. Minich says these products all favorably affect the sensory qualities of meals.

Once Diane started to feel better, likely in the first four to six weeks of treatment, Dr. Minich would discuss options to go further with a more targeted, therapeutic way of eating. The whole family could embrace these dietary changes, including making swaps from gluten to gluten-free options or bringing in more vegetables and fruits.

CASE CONSIDERATIONS

Since Diane is stressed in body and mind, Dr. Minich would want to make her healing journey manageable. Dr. Minich says it would be important to set the expectations lower and get Diane to feel better, starting with minor changes. Then, Diane could move on to make more significant changes, like doing an elimination diet or even taking steps to increase the nutrient density of her and her family's diet.

Dr. Minich might also ask Diane if she could "let go" of the responsibilities zapping her energy, such as being a school board member.

LONG-TERM

Dr. Minich's priority would be to get Diane on a nutrient-dense dietary plan full of whole foods of many colors and varieties, that is anti-inflammatory, sustainable, and enjoyable. Dr. Minich believes that if Diane began to eat better, it would inspire her to be physically, emotionally, and mentally healthier in her choices. Dr. Minich says she'd undoubtedly start to sleep better, have more energy, and less moodiness.

Another long-term goal of Dr. Minich's would be to provide Diane with resources to prepare healthy meals in advance. Dr. Minich would introduce a time of the week when Diane can batch and cook soups and other meals to have on hand.

Finally, Dr. Minich would strive to reduce Diane's symptoms related to menopause by increasing dietary protein and perhaps including specific supplements that would help with endocrine health, such as taking a specific maca phenotype concentrate clinically tested to help with menopausal symptoms. ○





ABOUT THE EXPERTS



Wendy Warner, MD

Dr. Warner is a functional medicine gynecologist and hormone expert. After 14 years of conventional ob/gyn practice, Dr. Warner founded a collaborative holistic medical practice in suburban Philadelphia. There she focused on a functional integrative approach to health and healing, working alongside practitioners from many different backgrounds and offering a wide variety of therapeutic options. In the fall of 2022, she moved her practice to fully online, providing telemedicine exclusively. She is board certified in gynecology and holistic integrative medicine, is a certified Functional Medicine practitioner, an herbalist and a mesa carrier. She is a nationally recognized speaker and educator and is faculty for the Institute for Functional Medicine as well as David Winston's Center for Herbal Studies. She authored a chapter in the current edition of Rake!s Integrative Medicine textbook and is the co-author of "Boosting Your Immunity for Dummies". She is a Past President of the American Board of Integrative Holistic Medicine.



Daemon Jones, ND

"Dr Dae," graduated from Northwestern University and earned her naturopathic medicine degree from Bridgeport's College of Naturopathic Medicine. She is an expert in using lifestyle as medicine to reduce chronic disease. Her Replenish. Restore. Reclaim. framework proves that diminished health and energy can be reversed with proactive choices, at any age. Dr. Dae works with individuals who are struggling with health issues such as weight gain, diabetes, thyroid problems, and issues around menopause. She is a licensed naturopathic doctor in Washington, D.C., and treats patients from across the D.C. Metropolitan area, as well as through virtual appointments all over the world.



Deanna Minich, MS, PhD, CNS, IFMCP

Dr. Minich is a nutrition scientist, international lecturer, teacher, and author, with over twenty years of experience in academia and in the food and dietary supplement industries. Throughout the years, she has been active as a functional medicine clinician in clinical trials and in her own practice (Food & Spirit™), which has now become oriented towards groups, workshops, and retreats. She is the author of six consumer books on wellness topics, four book chapters, and fifty scientific publications. Her academic background is in nutrition science, including a Master of Science (M.S.) degree in Human Nutrition and Dietetics from the University of Illinois at Chicago (1995) and a Doctorate (Ph.D.) in Medical Sciences (nutrition focus) from the University of Groningen in the Netherlands (1999). She is Chief Science Officer at Symphony Natural Health, where she leads the medical advisory team, oversees scientific communication, and provides educational leadership for the company's plant-derived nutraceuticals. She is passionate about helping others to live well using therapeutic lifestyle changes that impact their physical, emotional, mental, and spiritual health.