GYSO Episode 18 Insomnia

Dr Gould:

Alright everybody! Hello! Looks like we're having a little technical difficulty you're listening to FoRe Radio. This is Dr Joel Gould, and I am here with another episode of Get Your Smile On. We are broadcasting live from beautiful Manhattan Beach, California and I'm pretty excited as per usual to introduce my guest for tonight. We are taking a departure off of the usual Sleep Apnea and Vitamin D train that we've been on and we're going to be speaking with a young lady by the name of Lisa Mayo. She is the graduate of Baylor College School of Dental Hygiene and she's a RDH which stands for Registered Dental Hygienist and she has a Bachelor's of Dental Hygiene as well. As a wellness dentist my talks to my audience had been about various topics regarding health and wellness.

Today I'm here to bring this a little bit around back to why the reason I have the show in the first place and it's because my producer Maria De Giovanni basically somebody that I met through Safe Passage. Anybody listening who doesn't know what Safe Passage is, It's technically much more than a bathroom and shelter. It's an incredible program where victims of violence and abuse can reclaim their lives. They've got a great program where myself and my offices at Modern American Dentistry we do the dentistry for these victims, and we want everybody to have a great smile and help let them get out there and reclaim their lives and get a great job and just generally feel good about themselves.

Now, when it comes to being a dentist everybody has a pretty good idea of what we do and if most likely or hopefully you've all been to the dentist and you've seen the dentist and hygienist. Now, in a dental office there's many different people who we have working. We have the people at the front desk and those are usually our receptionists and we have people who assist the dentist and those are either DAs Dental Assistants, RDA or Registered Dental Assistant, or in the case of my office where I'm very lucky to have some of the best people in the world working with me. I have two assistants who are RDAEF2 all that stands for is Registered Dental Assistant Extended Function 2. These assistants, and there's not that many in California, are legally allowed to and highly skilled at doing a lot of dentistry. My two assistants, they can do almost anything that a dentist can do, except for drill into a live tooth. I think we want to leave that to the dentist. We don't need to get anybody else hating dentists any more than they are.

Now in my office I have several different hygienists. A hygiene program is very different than an assistant program. Assistants go to school and take courses to help to assist the dentist. Hygienists actually have a totally different education, and they actually have degrees. A lot of what they do have to have a basis in science, and it's really important for them to have an educational background in science. When it comes to hygiene my assistants or my hygienists, they will actually give Novocain, and they're really good at it too. So tonight we're going to have Lisa Mayo, and she's a really great speaker. One of the things she's covered for some dental journals is the identification of domestic violence. What do we do? What do we see? When we have a patient in our chair and we suspect violence.

Now to some of my listeners it's not a shock at all to know that most of the victims of domestic violence will suffer in silence, and going to the dentist puts them out of their normal conditions that they're in. Sometimes this could be a really good opportunity to have somebody outside of their normal sphere of influence talk to them, and be able to discuss if there's anything at home that is going on that isn't quite right. So tonight we're going to have Lisa on, and I think we're just waiting for her. We're going to be discussing the things that she looks for and how does domestic violence fit into the dental setting.

Now while we're waiting for her I want to sort of refresh my listeners' memory, and we want to talk about PTSD Post Traumatic Stress Disorder. Now I would say probably 100% of the victims of PTSD who are often the victims of domestic violence. These people we talked about before have almost consistently insomnia and night terrors. And the interesting part that we've discussed about this in previous episodes is that insomnia is thought to be completely psychological by most of these people. They feel that can't sleep because they're too anxious, they have night terrors, and they're afraid of some of the traumas in their past coming back at them.

Now what we found is and if anyone wants to go back to one of my previous podcast where I had Dr Barry Krakow on my podcast. He was the one to discover that in a group of victims of domestic violence who had PSTD insomnia almost all of them and that's over 90% of them had some form of a physical sleep disorder most likely Obstructive Sleep Apnea. What was really interesting to him and to me as well is that, to properly treat these people that much more is required than just psychotherapy or communication therapy or Cognitive Therapy. These people actually need a physical change in their lives, they need to have the airwaves open and having their airwaves open will allow them and their bodies to start to recover in addition to the cognitive therapy that can be achieved through something called IRT Image Rehearsal Therapy. That's something we're going to talk about coming up fairly soon in another podcast. Now I hear we have some callers out there and I would encourage you if you want to give us a call and the number to call. Are we there Maria we have a caller on?

Maria:

Oh I'm sorry your callers would like to ask questions they need to press one. Yes but you have a whole list of callers that are listening. This is a very hot topic as you know especially with FoRe Radio and our listeners PTSD domestic violence so if any of your callers just want to chime in with you, please press one and I will go ahead and let you through.

Dr Gould: Okay I'm ready to take a caller right now while we're waiting for Lisa. Let's go ahead.

Maria: Actually I have a question for you.

Dr Gould: Sure

Maria: As you know I'm a client stumbling across a need to share in my life sleeping is difficult

for me, and recently I had a really bad trigger that triggered something, a PTSD, a memory, and it really has thrown me off as far as my sleeping. So what would you

recommend? I'm sure when your guest comes on, we can ask her more in terms of questions but what you suggest ... really I don't see myself as having issues, but obviously there's something that's keeping me awake, and it's got to be this so what would you suggest?

Dr Gould:

Well, okay, it's a complex issue but basically the idea is that when someone's sleep gets fragmented that it's difficult to repair. There's many, many different things that we need to do to repair it. Now from some of the previous podcast there's three different aspects I treat sleep apnea, and in the case of PTSD insomnia again the statistics are showing that almost all of the sufferers have a physical sleep disorder. Now when I treat this I do a combination of Myofunctional Therapy which are exercises of the tongue and airways to retrain to breathe properly. I do nutritional supplementation with magnesium and Vitamin D, which is critical to repair the actual physical damage that is going on the airway with the poor sleep, and the last thing is we do a device to open the airway.

So the issue really is that we have to look at all these three aspects, and in your case when its PTSD insomnia the cognitive therapy is really critical. How you view sleep and how you get prepared for it and how you deal with it and how you deal with these night terrors is really critical, so there's the cognitive program is something called IRT imagery Rehearsal Therapy. I'll go through it really briefly in a second so it's multifactorial. One really easy thing to do if you could really just take the Ambien and fall asleep for eight hours and have a great night sleep then that would be fantastic. But there's no such thing all sleep medications increase sleep apnea from a physical point of view which is dangerous.

Now some of the ideas about why PTSD sufferers have night terrors is that part of their failing sleep is physical so when they are actually getting into their deeper stages of sleep their body start choking just like everybody else and on some people and I think this is pretty common I know people can't sleep on their back and it's a subconscious thing and the reason is when they sleep on their back they choke. Now why do people have insomnia? Well if you knew that every time you go to sleep you're going to be choking you'd be kind of not feeling great about going to sleep. That was what was so interesting about Dr Krakow's work, is that he works with people flying from around the world to have them treat their PTSD insomnia and it's pretty much the same thing every time that the combination of the physical threat of choking in conjunction with the psychological stress of having the PTSD to begin with is a really bad fit. So to repair this it's a tough road, and I know Maria that we've been working on a few things with you, but I'm ready to go with the next stage with you, and I didn't realize that you were having more acute problems but we can talk about that a little further. Did that information make sense to you?

Maria: Yes. I have Post trauma issues you know why

Dr Gould: Okay, I want to talk about that

Maria:

But it's good this show is just so informative, and I'm learning so much. I have been getting my vitamin D, and I really think that's a lot to do with it, but it would be nice just to sleep

Dr Gould:

Right. Okay. That sleep is possible; it's just that a lot of different factors that come into this. So I want to talk about the IRT right now because I want everybody else out there to understand what it actually takes to get over the night terrors. It's such a simple thing. Basically IRT it stands for Image Rehearsal Therapy. Now, what are you supposed to do if you have recurring night terrors? The theory is that you need to write down the night terror in detail, and then you need to actually rewrite the story in a way that has a much more positive outcome, really any way you like it any type of ending and then you actually rehearse the story and you do it just before you go to sleep, it's a process.

The idea is that just in the same way that horrible terrible fearful thought can recirculate in your brain it can be replaced by actively psychological changing the story to a more successful ending and the better ending. In the same way we have people, we have Dr John Cannell, he was the guy who talked about the false memory syndrome when it came to the McMartin Daycare scandal here in Manhattan Beach. Basically you can create your own memories just by having something repeated to yourself either in writing, or having the story recreated in your mind, so you can recreate the idea that this particular terror is changeable if you practice it. Again there's the combination of things to do just simply making a quick short story on a recurring night terror might not going to work but it's really a combination of the cognitive therapy of sort of delving into the night terror breaking it down saying, what am I afraid of here? What changes could we see? How could this turn out different?

How could we make this a more positive outcome that's the psychological component but you need in addition the right level of Vitamin D and Magnesium to sleep properly. In addition to that if you do actually have a physical issue like obstructive sleep apnea then you absolutely need to have at least a dental device or even a CPAP machine so that you can get proper physical access to oxygen so that you can get a good night sleep. On that note I hope I didn't put anybody to sleep with that answer. We're going to take a short commercial break and come right back hopefully we'll have some more calls. So hang on we'll be right back. Alright everybody we are back. I just want to give you that number to call in. It is 347-857-3760 call that number and press one. Now do we have any active caller ready to go Maria? Okay we're going to go back to discussing PTSD insomnia

Dr Gould:

So anybody who is actually trying to call you need to press one. I want to sort of go back to what's really fascinating about the whole idea of PTSD and insomnia and I want to make this really clear is that when you do not sleep properly, there's a real physical damage that happens to your body. The two things that happen when you're not sleeping properly. Number one: You're not releasing all of the hormones that are required for your body to run normally into your blood stream because your sleep is interrupted that's the first thing. The second thing is when you don't go into your REM sleep that's the time that your central nervous system uses to clear out resort and flush

out all the activities of that day, and let you wake up feeling refreshed for the next day. So when both of those things aren't happening number one you feel crummy.

Number two: Your body starts to fail because the regular way that we stay healthy is that our endocrine glands which are different parts of our body release hormones into our blood stream. These hormones go through all of our tissues and they have all kinds of different actions and make us feel healthy and normal. Insulin is one of those we've got Human Growth Hormone is another hormone that is especially interrupted when you're not getting good quality sleep.

Human Growth Hormone it's the director for all of the repairs of your body and cells. Without Human Growth Hormone our bodies age faster and so it's really critical. So now imagine we have somebody who's had enough trauma as it is and now they're not sleeping properly. Now we have anxiety, depression, and a huge list of issues that come along with sleep deprivation. Definitely anxiety and depression and you know there's so many people who are suffering from this who really need to have their sleep assessed, definitely need to have a vitamin D test. I want to just go on a little bit here about Vitamin D and how critical it is and we talked about this a lot. I'm vitamin D crazy and I'm crazy because it seem that every second day, there's another reputable medical personnel putting out studies showing what vitamin D does. It's just involved everywhere and it's kind of mind boggling to understand it also all this time throughout what we see on TV nobody has really even heard of it. People know more of what their cholesterol number is than they know what their vitamin D number is. And the truth is your vitamin D numbers is so much more important than your cholesterol number, alright?

Now for anyone out there listening who is having troubles with their sleep there are two chemicals that you cannot get any other way than by supplementing somehow. These two chemicals are magnesium and vitamin D without those two chemicals good sleep is going to be out of your reach. Now if you have little vitamin D you can't just take a pill and be better, if you have low magnesium, you can't just take a magnesium supplement and be better. These are two very interesting chemicals that we as humans need to bring into our bodies slowly, there's no quick fix. But the good news is this is something that every single person can do very easily. Now at this point in time with my patients here at all three of my Modern American dentistry location I'm doing something called Vitamin D counseling. And what that really means is I'm helping my patients to achieve what would be considered the ideal level of vitamin D. And I'm just going to real briefly go into why that's so important.

Now when it comes to vitamin D its highly immune supporting mean that if you don't have the right amount of vitamin D. Your immune system does not function at the right level and every single cellular function in your body can be affected by this. Vitamin D is also critical for sleep and it's critical for digestion. If you have constipation or diarrhea or a mixture of both the first place you should look is your vitamin D level, without the proper vitamin D in your body your gastrointestinal system can be completely on the fritz. Your entire gastrointestinal system from your lips all the way down to the other end is lined with vitamin D receptors, so low vitamin D signals all kinds of different

chemicals issues that happen with your gastrointestinal system. And this is something I've been talking about for a while. Anybody who hasn't heard this report please go back and listen to my podcast with Dr. Atasha Gominak, and she is a neurologist. The short story is that she sees women mostly who have migraines and pain, and what she found is that all of the migraine patient all have severe vitamin D deficiency and sleep apnea, because those two goes together hand in hand.

Low vitamin D and poor sleep are completely associated together. Now the idea is that when your vitamin D is very low we're in hibernation mode and hibernation mode means that we sleep more we feel more tired. We put on fats the vitamin D signal to us that we need to put on an extra weight for the winter season to survive and our bodies does not know that there's a 24 hour roust round the corner. Our bodies know that when we get low vitamin D that signals winter and winter means store fat at the expense of muscle. So we see that 90% of Americans are vitamin D deficient. I think it's probably pretty accurate from what I'm seeing in my office. I have yet to have one single patient who came in who was not vitamin D deficient. So for me that's 100% of my people.

Again why is it so critical? Why is magnesium so critical? Melatonin is made from magnesium. You've heard of melatonin before, you just haven't heard of the magnesium component. Magnesium is your stress element. When you are stressed you burn through your magnesium, just as you do with your vitamin D. So having the right amount of magnesium in your body is going to make life easier. Since I started supplementing myself with both vitamin D and magnesium really the changes that I have notice are, it's kind of funny to say it this way, but I feel like all of my rough edges have been smooth. I don't get as upset when something terrible happens and I don't get as frustrated when something bad happens. I don't get as manic I don't react the same way. I feel a lot more calm now and anybody who knows me and this is probably a good thing. Apparently, I've got a big personality, and I'm okay with that. I really like the idea of being able to be more calm really like losing my cool less and I think it's a pretty good thing.

If you have sleep issues we need to look at three things. Number one: Do you have the right chemical balance in your body? Do you have the right Magnesium? Do you have the right amount and vitamin D? Number two: are you getting proper air exchange? And if you're not this actually needs to be treated, alright? And the third thing is going to be just how are you planning your sleep? Do you have good sleep hygiene? Sleep hygiene means how do you behave when it comes time to go to bed. People who have insomnia tend to have terrible sleep hygiene. What that means is they do all sorts of things in bed. Now the expert say that bed is strictly for sleep and marital sex. Of course, nothing else could be involved that's basically it, and really they're not joking. Reading in bed, eating in bed, doing work in bed all bad ideas. You want to train yourself so that when you get to that bed, you're going to be doing one thing and one thing only and that's sleeping.

So for all you out there who do have this insomnia issue do not go to bed at 9 pm thinking that you're going to fall asleep and get more sleep. It doesn't work that way.

Your body is programmed, and now with your sleep totally destroyed you don't have a good system of sleep. It has to be rebuilt. This is something that I highly recommend, again Dr Krakow he's got two books available on Amazon.com, and he is on my podcast, his contact information is on there. Go and look up the information. He writes in a really easy way to read, and the book is so informative to me to learn about nightmares and night terrors and all kinds of issues like that, and just by focusing on your sleep hygiene and doing the right things to get you into the point of sleep. You can have more successful sleep.

The people who really have a hard time sleeping are shift workers. There are people whose schedules are all upside down. The lesson is if you have insomnia you need to set a time that you go to bed and do it regularly. When you do go to bed do not stay there more than half an hour if you're not falling asleep, get up, read a boring book, and I have a few that I can lend to you, and try it again later. It's the frustration and the fear of, "oh God I've got to fall asleep I'm going to feel terrible tomorrow". This is an additional stress on your sleep as well. So it's really about a behavior issue of getting your sleep behavior more fine-tuned, and then addressing the other issues. For anybody out there who doesn't know what a obstructive sleep apnea is, it's something that is readily available on my website and in my podcast to explain it. This is really an epidemic and we're seeing this all over the place, in my opinion because of the magnesium and vitamin D deficiency that we all have.

Okay, so it looks like we didn't have the opportunity to speak to Lisa Mayo. Basically what she was going to talk about was the idea that when you have somebody in our office this is a completely different setting especially with a hygienist that someone is used to seeing. Most of my hygienist have been with me for many years, and my patients have their favorite hygienist. They only want to see Sonia, they only want to see Chrissie and the great part about that is it allows my patients to develop a relationship with someone. When someone cleans your teeth it's kind of like getting a massage or a bartender being a therapist. A lot of people they are much more open and feel more comfortable with their hygienist especially if its someone they've known for a while. This is a great opportunity for the hygienist to recognize the signs of domestic violence and to ask the right questions. That was what our talk was going to be about tonight. We're going to talk to Lisa about how to open the dialogue between the sufferers of domestic violence who are unknown. How can we help to identify who these people are and how can we help them? So, Maria looks like we had a show full of technical difficulties. Did we ever had a caller that pressed one to get in on the show?

Maria: You know what, maybe they didn't, because it didn't come through.

Dr Gould: Okay, I don't know. As we're speaking now Maria you're really cutting out a lot to me, and I've got my headphone on, and I can't really tell if my listeners are hearing you. You are cutting in and out, or if it's just me, but either way I think we're out of time, and hopefully for those of you who are listening and who were interested in the PTSD

listeners. I want to offer everyone free vitamin D counseling. What I mean by that I want you to contact me by email. I want you to get me your latest vitamin D number, and this

insomnia I hope this has been informative, and what I want to offer to all my FoRe Radio

is what you have to ask for, you want your 25 vitamin D test. Do not get a 125 vitamin D test. Medical doctors don't always know the difference. 125V test will always be normal, so if your doctor tells you your vitamin D was normal do not accept that as an answer. That's what my doctor told me. I absolutely requested to have the number, and when he told me the number it was 18. 18 is deficient. Anything under 20 is deficient. Get me your vitamin D score, and I want to hear a little bit about you. I want to know your height and your weight, and I will help you to supplement your vitamin D or your magnesium to get you to the position where you could be open to start working on getting better sleep, the supplementation that is going to make you feel better to get to the point where you can feel like you're going to start to work on this.

Alright. So today was an interesting show for me. It gave me the opportunity to put together all the things that I've learned through my journey, through sleep apnea and PTSD. I really look forward to being helpful as possible to any of you out there to know that PTSD is associated with insomnia and night terrors, and it's not just psychological there is more to it. Alright, everybody until next week. Thank you very much for getting your smile on. I look forward to hearing from you and getting calls from you next week. Maybe if we get our technical difficulty cleared up maybe we can take some calls next week. Until next time we'll see you soon.