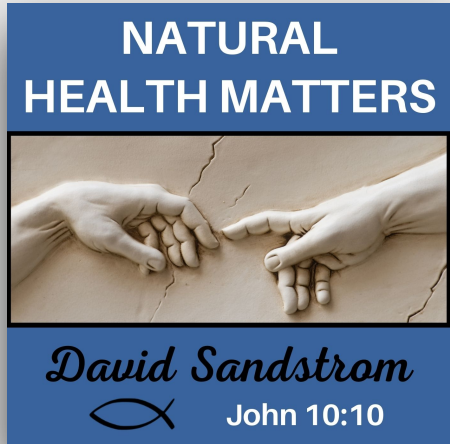


NHM - 45 Managing Blood Sugar Naturally w/Esther Onyoni, PharmD



David Sandstrom 0:00

Here's a sample of what you'll hear on this episode of natural health matters.

Esther Onyoni 0:04

One of the myths that I've seen go around is as long as I'm taking a medication, and I'm busy, I'm gonna be fine. But it's not necessarily that it's what else is going on in your body that is affecting you. Because if you're just fine then then you wouldn't need more and more medication, obviously. And so I talked about

lifestyle changes, so I expand on that part where the doctor did not maybe have enough time to expand on.

David Sandstrom 0:32

Welcome to the Natural Health Matters podcast where it's all about maximizing your health potential so that you could pursue the abundant life more effectively. I'm your host, David Sandstrom, naturopathic doctor and biblical health coach, and this is episode number 45.

Esther Onyoni 0:53

This episode is brought to you by us wellness meats, our bodies have to take what we eat and turn it into us. All of our 75 trillion cells are constantly being replaced through a series of divinely complex processes. If we don't give our bodies the raw materials they need to replace cells efficiently they struggle. The number one rule for healthy eating is eat food as close to its God given natural form as possible. The trouble is, when we shop at the grocery store, it's hard to find quality animal products produce the way God intended. Factory farmed food is just not healthy for us. That's why I've been protecting my family's health for many years by shopping online with us wellness meats. They deliver quality animal products straight to your door. They have pastured grass fed beef, free range poultry, sustainably raised pork, raw cheese, and more. If you're ready to take your health to the next level with quality products, head on over to my website, David Sandstrom comm forward slash resources, click on the US wellness logo, you'll be supporting the show financially by using my affiliate link. You won't pay any more, and I get a small commission. Today we have Esther,

on Yoni on the show. For the last 13 plus years, Esther has practiced and advocated for patients as a results focused and forward thinking pharmacist. She has advanced knowledge in compounding, patient counseling, and medication fulfillment, her curiosity to see how she can help individuals to heal instead of constantly being on medicine led her to become a certified health coach. Esther also believes individuals should be proactive participants in their health care. Esther, welcome to the Natural Health Matters podcast.

Esther Onyoni 2:42

Thank you for having me here today.

David Sandstrom 2:44

It's my pleasure, very curious to hear about your story. I always love having somebody on the show that's been trained in a traditional medical fashion as you are, and you have extensive training as a pharmacist, and then you made a transition saying, you know, I think my patients could actually use more than what I got in school. And then you take the initiative on your own to get a further to further your education, so that you can be of more use for your patients. So tell us a little bit about that journey for you.

Esther Onyoni 3:12

Well, not, from the United States Originally, I came to the United States after high school, where you from? And from Kenya, Kenya. Okay, great. Yes. So I've been here, I feel like I've grown up here because I've been here longer than I lived in Kenya. But just growing up. I had the dream of being a pharmacist, but I don't think ever thought that it's something that ever come possible for me because we had our own challenges, you know, thinking about, we don't have the money. We know the kind of people who succeed in that area because of our socio economic standing, obviously. And so that's something that we put aside and I didn't talk about it, but then the opportunity to come to the US come in and that opened up everything for me. So yes, I did. Go to school and be trained to be a pharmacist so that

David Sandstrom 4:15

Where did you go to school?

Esther Onyoni 4:16

You I went to UNC Chapel Hill, North Carolina, and have practiced for the past 14 years now.

David Sandstrom 4:26

It's a very well respected school.

Esther Onyoni 4:30

It is a prototype. Yes, I've lived in the states as well, pretty much since I've been in the US. And so I've practiced as a pharmacist and have made my own observations obviously, as far as how I became from a pharmacist to being a health coach. We trained in the conventional way to treat disease, any condition obviously we thought okay, this is your These are your symptoms. And this is the treatment that goes with that. And that was clear and concise, you know the mechanisms of actions of medications. And then in my practice, in the community setting, as a pharmacist, I saw that patients who are diagnosed with diabetes, they just did not drive as much as I'll give them all that medication. Because first, they would get a diagnosis, and then they would get on medication. And a couple months later, they will be on a second one, maybe a third one. And then you wonder what else is next for them? Because they are probably now on the eighth medication. And so that's how I thought about this gotta be more to

Esther Onyoni 5:47

Let me interrupt you right there that that sounds like there's a term that people use, sometimes it's called polypharmacy. So someone gets on a medication, and that has some side effects. So they go back to the doc say, yeah, this thing, actually was causing some nausea. Well, let me give you medication for the nausea. So then they get on that. And then they say, Well, yeah, you know, but now this thing cause irritable bowel? Oh, let me give you something for that. So you, you get on this roller coaster, have more and more medications. And what you end up doing is treating the side effects from the previous medication.

Esther Onyoni 6:19

Completely my observation? And so that's completely what happened. And every time I saw this happen, because I had gotten familiar with some clients, I would think, okay, had we hit the reset button, because sometimes it's not from seeing one doctor is probably several doctors, and they don't connect the dots and know that this is probably causing the other thing. Yeah. And also, so I, that's how I felt like, okay, it's gonna be more than I could do here. And so I started going into learning about health coaching and functional medicine, which is more of getting to the root cause of their condition. How did they get here? Which is more of what I started being called to do? Yeah, yes. And so as far as stepping forward to pursue that, I just, I just remember, growing up, it took a lot, basically, because as growing up, I know that my parents get a lot and I felt like I'm too little, I can't interact, I cannot speak up. So it's kind of a parent that followed me up, follow me as I grew up, and I felt like, I don't know how to speak up to these people. So it's something that was holding me back. So I had to recognize that and put myself to a place where I know that I can speak up because I can see the problem. But I'm not taking a step. So then I decided to

take a step and speak up and I started consulting with this patients who had diabetes and telling them, teaching them about their condition, basically, that this is really what's happening. Yes, you are on medication. And you definitely need to stay on medication. So I don't ever tell my patients to get off medication, but rather look at their condition and understand it so that they know what to do. Because

David Sandstrom 8:24

Yeah, that's an important point, I want to interrupt you there. And just just add to that, and that is if you're on a prescribed medication, and you want to reduce it or get off of it, you've got to talk that over with your prescriber. You go to the healthcare practitioner that prescribe that medication, express your desire and let them work with you on getting off their medication. People like myself, I can't give advice on medications and our laws. Are the laws the same for a pharmacist?

Esther Onyoni 8:51

Yes, because obviously, they are on that medication for a reason, you can just step out of it and say I'm no longer going to take it. But what you can do is empower them to know about their condition. And that way, when they know what to do, I know that and they can they're able to keep up with that they can easily get off their medication because their data will have seen the differences they have made and they'll be in a comfortable place to get off a medication or if necessary,

David Sandstrom 9:24

and when they when you educate them, they'll be in a better position to have a more intelligent conversation with their prescriber.

Esther Onyoni 9:31

Yes, absolutely. And that's more of where I concentrate on. So I go with Why are you on a medication, it is definitely helping you lower your blood sugar, but why is it up there? So let's explore what's going on. I have seen clients say they don't know what to eat. You know, somebody called and said, I'm only eating lettuce and my blood sugar is elevated and is the only thing I can eat. So You could see how much education is needed there. Yeah, do you know somebody saying they, okay, so there is the food aspect of it. And then the part where they say that they don't need the medication, but they weren't diagnosed with the condition. So if they don't take it, it's gonna get worse. And so you have to teach them around the what the elevated blood sugar is doing to them. And that way, they will get to the part where they know what to do, definitely take the medicine, medication, and then take their own initiative at home to help control the blood sugar.

Esther Onyoni 10:40

So let me interrupt you. So for those for the benefit of those listening, let's talk about what exactly diabetes is and talk about or fill in the gaps on how the content what the conventional treatment looks like. And then let's get into talking about what people can do about it. So explain for the listener that may or may not know exactly, well, yeah, I know, I've heard the term diabetes, but what exactly is what's going on in their bodies?

Esther Onyoni 11:06

Thank you, I get excited and start talking about it. I didn't even introduce the topic. Definitely. Yes. So diabetes is when one is actually diagnosed with the blood sugar being elevated. And usually they have a term A1C that the doctor checks or a series of labs that the doctor test, A1C the fasting blood sugar, those are all if you have been diagnosed, you are familiar with those. But once you're diagnosed, there is always in the conventional world, once you're diagnosed, your doctor will definitely tell you to watch what to eat, you know, kind of mentioned the change your lifestyle aspect of it. But in the office setting, there's not usually a lot of time to expand on that. And so you end up you're also given medication, because there are guidelines on how to treat a condition or manage it. And if your blood sugar is at a particular level, you're either given medication or they wait and have you do something else at home. But then you definitely do get medication, if it's at a particular level to help control it because it's that important. So that's the convention away. And then if it's not controlled, definitely in your next visit, you probably get another medication, or whatever else is going on. So that as we spoke earlier, that's kind of how it builds up to where you end up having polypharmacy. The conventional way of treating it kind of contributes to that out there.

Esther Onyoni 12:41

So in a nutshell, I'll just summarize. Their body is having a hard time processing the carbohydrates, they're they're eating, and they become insulin resistant, our bodies release insulin to help bring our blood sugar down after a meal. But their insulin receptors are not responding the way they should. So as a result, their blood glucose levels spiking out of control, and they need some medical help to bring it back down. Am I right? That's right. Okay. So the conventional way to treat that is pharmaceuticals that will help control the blood sugar. So what do you tell your patients that come to you when they're on that?

Esther Onyoni 13:20

Okay, first of all, yes, they'll take the medication, but then I know that when they diagnosed, they are overwhelmed. Maybe they do not know what questions to ask their of their doctor. They just went with what the doctor said. And when you

get home, you, you have all these questions that come unto you like the one I mentioned, what am I going to eat, because I feel like I'm no longer able to eat anything. So when they come to me, then we look at what else can be done besides taking the medication. Because one of the myths about that I've seen go around is as long as I'm taking a medication, and I'm busy, I'm gonna be fine. But it's not necessarily that it's what else is going on in your body that is affecting you. Because if you're just fine, then then you wouldn't need more and more medication, obviously. And so I talk about lifestyle changes. So I expand on that part where the doctor did not maybe have enough time to expand on and I look at what else you can do at home. So there is what are you eating? What's the plan for your eating? Obviously, that's a big problem for a lot of people. And then physical activity. So what do you love to do? We don't go into you have to work out three times a day or what kind of exercise do you have to do it? We start because obviously somebody at this point is overwhelmed and maybe if you mention exercise, it's already thrown them off. They're already thinking maybe they need to ever do it or they don't like to do it at all. So we'll go with, where can you start? And then we'll expand from there

David Sandstrom 15:13

is your experience that most people that are diabetic, are averse to the gym and exercise? Do they not have an exercise,

Esther Onyoni 15:22

actually, very generally, everybody in terms of exercise, if everybody has, now, they're not necessarily exercise averse, it's more of what else is going on in their life, because now they have, they feel like they have to implement this if they were not doing it before. And they already have their own daily stresses their routine that they have to deal with. And if they don't know how to approach it, it can be overwhelming, and maybe something they don't want to do, even though we know that that's something that's going to be very beneficial to them. at any level, even if they did just a little bit of it, or, you know, it will be helpful to them.

Esther Onyoni 16:07

Yeah. Let me ask you this question before it slips my mind. I know that Type One Diabetes is considered a disorder of the pancreas where you're not able to produce enough insulin. And that's generally an autoimmune is considered an autoimmune disorder. But I've read in the research recently that they're calling type two diabetes, autoimmune today. Do you agree with that?

Esther Onyoni 16:29

type two being autoimmune? Well, okay, so there is, I haven't seen type two, but I've seen something in the line of type 1.5 1.5, meaning after somebody's gotten has got type two, maybe for a while, and maybe if it's not under control, you

know, at the beginning, you have the insulin resistance, where there's so much insulin in your body. And then with time, with a lot of inflammation, obviously, caused by a lot of sugar in your blood system. With time, your pancreas stops producing enough insulin. And it's also a process that can happen with aging, less insulin is produced by the pancreas. And so I would say, with that somebody might have started taking medication, and then now they're gonna need insulin. And I think that's how it goes to being similar to type one. So it can i don't know that i agree necessarily that it's autoimmune, but it does progress to where it can become type one because you become more insulin dependent. If it's not well controlled.

David Sandstrom 17:44

Yeah. So what's your position that type two diabetes is more lifestyle related than it is genetic?

Esther Onyoni 17:50

Yes. I to the studies show, it's more like 90% of it is lifestyle related, and maybe 10% is genetic. So there is a genetic aspect of it. But as far as autoimmune, I think it's when it goes to the type 1.5.

David Sandstrom 18:08

Okay, so the lifestyle changes that people should make if they if they're on diabetes medication, would be lower your sugar intake in your diet,

Esther Onyoni 18:16

lowered the intake of their sugar. Yes.

David Sandstrom 18:19

And and I think that's an individual thing. Probably some people have more wiggle room than others exercise. What about fasting? What about time restricted eating and intermittent fasting, does that play a role,

Esther Onyoni 18:29

it has shown to play a role, actually, they have different intervals to 16 eight, the ones I've seen, the weight helps out is that when when you're eating your body produces insulin to keep your blood sugar under control. And it's just that it's shown that too much insulin in your body can cause your body to store fat and, you know, just make diabetes worse. By fasting, you're kind of eliminating that where you're, you have this constant spikes of insulin, so that your insulin is probably higher when you eat whenever it's the last time and then there is a long stretch where you're you don't have insulin spikes, and that keeps the pancreas more sensitive. And it makes the condition more controllable in that aspect,

because you're not having all these blood sugar spikes. So there is benefits to that.

David Sandstrom 19:33

Yes. So anything else any other lifestyle changes people should make?

Esther Onyoni 19:37

Well, when you say eating less sugar, Yes, that's true. And also just something that is easy to implement, for sure. For instance, if you feel I see a lot of people say it's expensive to eat healthy, but I would say okay, try going to the freezer and a section of the grocery store and get the frozen veggies, not necessarily the packaged food. But the frozen like the frozen peas and frozen veggies that you can cook at home, it makes it

David Sandstrom 20:10

a single ingredient frozen vegetables that you can get organic, pretty reasonable.

Esther Onyoni 20:14

Yes. And that way doesn't feel expensive, doesn't take a lot of time to prepare, I have a staple of just mixing onions and tomatoes and throwing in the veggie and it's ready to go. So it doesn't take long to cook and it still tastes great. Put some curry in it, and it's good to go. So we definitely go with planning on what would be easy to do, because we know that this is not easy for people to pick up and change because they are already overwhelmed in the thought of Oh, I am. I've been diagnosed. So it's they have to get past that of this thing. And then there is exercise for sure. And then we talk more about what how much sleep they're getting. Because obviously there have been studies showing that depending on how much rest you get, it affects how much insulin your body produces. So sleep we address that literally go through a whole module of how much sleep What are you doing? How can you increase it, what's causing you not to sleep, all of that, because one of the major complaints I also hear about is I'm not able to sleep well, because I had to make all this bathroom trips, or I just can't sleep, you know, because of the blood sugar being high, you just your body's not able to rest well. Yeah, so we implement that. And then we address stress. Like I said, being diagnosed is just one more thing that you have to deal with. And so we have to deal with the stresses through the day, because we know that when someone is stressed, they produce this hormone called cortisol, which causes your blood sugar to go up. And that can with constant stresses that can keep it elevated. So can keep your blood sugar up and keep your condition not well controlled. And so by addressing stress, allowing somebody to see what they're able to let go, it makes it a bit easier to keep up with their own lifestyle that they are working on implementing.

Esther Onyoni 22:22

Yeah, stress is huge in and I got to say this and I'm just gonna be shameless plug. Stress is not just having a difficult boss or a traffic jam. Stress goes far deeper than that there can be hidden underlying infections that cause stress to the body. It microbes like a bacterial infection, or fungal infection or a parasitic infection, these cause chronic stress in our bodies 24 hours a day, seven days a week, and those sometimes need to be addressed. And there's also the mental emotional component, but also the spiritual component. And I believe that we maximize our health potential when we align our lives more fully. With God's design for spirit, mind and body. God has a preference for our spirit, and he has a preference for our thought lives. And he has a preference for the way we treat our bodies. And when we align our lives more closely with that ideal, we reduce our stress on all levels of the human condition and, and that's what I write about in my book, the Christians guide to holistic health. If that sounds of interest to you, I encourage you to pick up my book. That's awesome. So we have reduced sugar, exercise, practice intermittent fasting, work on your sleep, reduce your stress levels. Anything else.

Esther Onyoni 23:37

One more I'd like to talk about is the toxins in the environment, because you'll be surprised but the way I like to say it is if you carried your healthy lunch to work, did you carry their babies with you? Basically, the one of the common toxins that is the toxin in plastic, because we kind of like to pack our lunch in a beautiful plastic container. But it's mentioned there's a compound called BPA Bisphenol A. And I see a lot of places where they write no BPA, but what it does is it's 34% of people who are who have pre diabetes have been shown to have a lot of that toxin in their body. But what it does is it affects the pancreas, so maybe it makes it less puts it into dysfunction and that can trigger diabetes. So that's just one aspect of it. But you know, there's different other toxins in the house that we have to look at what's in the food to just make sure that it's not the one thing that triggers the triggers your diabetes.

Esther Onyoni 24:45

Let me let me elaborate just a little bit more on not BPA. BPA is found in plastic bottles most people know that there is a plastic that's BPA free. The the the opaque plastic that's like it the milk jug. That plastic is okay, I still wouldn't let it get hot. Because anytime you heat up plastic, it starts to melt, and you're making plastic tea. The least harmful plastic is the one found in the in the milk jug, the opaque kind of whitish plastic. Also, you'll find BPA, inside of canned goods, manufacturers will put BPA in there so that the the flavor of the food is protected from the metal of the can. So that's another source of BPA that people don't think about. And it absolutely will attack the pancreas. That's a big problem.

Esther Onyoni 25:36

Today, yes.

David Sandstrom 25:39

So what are some of the mistakes people make? You talked about people feeling overwhelmed. So I guess, you know, taking baby steps is important. But what mistakes do you see people making as they try to shift and make these lifestyle changes?

Esther Onyoni 25:54

Definitely making these changes so drastically. I've met people who, after the diagnosis would say, Okay, I, since I was diagnosed, I go to the gym twice a day, and I have stopped eating whatever it is. But this is too drastic too fast, because you end up being burned out, you didn't get to this place, in what overnight fact it takes about five years before when he was diagnosed with diabetes. So what one needs is a plan for success and a change in mindset. Because taking these drastic changes. And if you get burned out, you easily stop taking care of your condition, because now you do feel hopeless,

David Sandstrom 26:49

right, you give up get overwhelmed,

Esther Onyoni 26:52

and then not knowing the true depths of your diabetes. So luckily, for someone who's diagnosed, sometimes they'll have they're almost at a time they have blood glucose meter. And so they know to check their blood sugar depending on their activity. So and they will know, if they worked out how it affected their blood sugar, they will know if they ate something, how it affected their blood sugar, or whatever they're doing, how it affects them. So just knowing what their trigger is important. And I think just even using their blood sugar, blood glucose meter helps them know that.

David Sandstrom 27:33

So what you're saying is, it's more than just the food you eat, you can you can have a stressful event, maybe it's an argument with your spouse, that will cause that cortisol release that will spike your blood sugar as well.

Esther Onyoni 27:43

Yes. And Western if it's constant, you know, then you have this chronic release and keeping your condition out of control.

David Sandstrom 27:52

Yeah. So pursue peace, pursue peace,

Esther Onyoni 27:55

totally. And then just just knowing that you're your own advocate, because so kind of changing, changing mindset quickly will help. Because otherwise, if you stay in denial and do the same thing continuously. It just gets worse.

David Sandstrom 28:14

Yeah, you said something earlier. And I want to go back to this, you said that you felt called to become a health coach. That sounds to me like there's a faith component there. Tell me what did that calling feel like to you?

Esther Onyoni 28:29

Like, I need to stand up because I like I said, first of all the facts were just growing up and not feeling like I could stand up for myself and just looking deeper inside of me and going if today was the last day on this earth, What will I say I've done or what will I regret not having done? And I feel like just me standing up and saying that this needs to change would make me really happy. So I'm so I go out and talk to people whenever they about whatever topic they want to know, in my social media. Definitely. I do weekly lives about different topics in diabetes, because it it makes me feel like Yes, I have stood up and I have told you that there is something more to this. So it's, it feels My heart is probably how I would describe it. That's excellent. Because I feel like I do not sit and let that you know go to waste because I've seen how I feel like telling people Okay, stop. Let's get the let's hit the reset button. But obviously I can't tell that to everybody. But if I tell them, this is the other side of what's going on. It feels my heart.

Esther Onyoni 29:48

Yes, it floats your boat. I love it. You know there was a great book. I remember years ago by Stephen Covey. It's called the Seven Habits of Highly Effective People and he was a memorable story share in there he said imagine when it comes To your life purpose, imagine you're going to a funeral. And you're going to hear people speak about the deceased. And there's going to be a co worker, there's going to be someone from the community at large, and it's going to be a family member. And imagine the kinds of things that you'd like to hear about the person in the casket. You know, you probably wouldn't want to hear it, man. He was a great salesman, man, good. He cellos, you know, whatever it was, that's probably not what you want to hear what you'd rather hear is man, that he that he or she know how to love. This person knew how to put the other person first. Those kinds of things. Now, he says, imagine the person in the casket is you three years from now? What would you like to do between now and then, to cause people to say the right things about you at your funeral? Those are the

things that are gonna make you come alive. And those are the things you should probably be working on. It sounds like you've done that,

Esther Onyoni 31:01

Oh, I'm working on it. And I feel like, I feel like every time I do it, I get more people asking, What can I do about this sort of what can I do about that? So there is a lot of curiosity. And I've noticed that even just the statistics showing how the condition, more people will be, will be diagnosed with diabetes in the future. And it's not just in the US, it's worldwide. So I know that different places are being affected. And that's by the different people who have reached me to say, Okay, what do I do about this? And that tells me where I need to get involved what I need to talk about. So it's, it's a very fun journey.

David Sandstrom 31:47

Yes, yeah, I can see that you love it. Esther, are there any other lifestyle factors that you'd like to add into the mix,

Esther Onyoni 31:55

they need to first love the verb decide. Because if you have decided, then you will definitely, definitely do a lot more things. Because this is coming from a place where you're empowered to do things for yourself. And then I'm running a series where we learn about simple things to do. Simply deciding to hydrate normally, on a regular basis hydrate, it's a simple decision, that will change a lot for you, then choosing an activity you enjoy. That's simple, because it's something you're going to stick with because you enjoy it. It can be as simple as walking to your mailbox. And no matter what, don't do it alone, because lonely wolfs starve to death. So definitely get some support, because it's always available. And just be kind to yourself.

David Sandstrom 32:50

That's all great advice. I love it. Thank you so much. So if people wanted to get ahold of you, what's the best way to reach you?

Esther Onyoni 32:58

Currently, I do a lot of social media, someone Facebook I on Linked-in. And I do have an email eonyoni@gmail.com. And then I'm spelled that out on your own. So E-O-N-Y-O-N-I-@gmail.com. And they can go to my website, thewellnesspathfinders.com. And I call it that because I feel like when you're getting to a place where you put yourself first and you have decided that this is where you want to go, you you are you really headed to being very well and this is the path you want to go. So I call it the wellness Pathfinders.

David Sandstrom 33:45

That's great. Love it. And you have a Facebook group in there as well.

Esther Onyoni 33:48

I do have a Facebook group. If you want to learn more about different topics in diabetes, I'm talking about COVID-19 tomorrow. I have talked about curbing your cravings. I've talked about reversing diabetes controversial. It's called kicked to the curb. Let's get to the bottom of it. It's not just a medicine, but it's more of what else is going on with your body if you want to learn and that's where you go.

David Sandstrom 34:19

Okay, Esther, thank you so much for being here.

Esther Onyoni 34:22

Thank you so much for inviting me.

David Sandstrom 34:25

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