

8/27/24

**Week 35: *Christmas Shoes and Smiles***

**Tammy Trent**

**Terri DeNeui #2**

**In the studio**

**TAMMY:** Hello everybody! Welcome to *LIFE Today*. I'm Tammy Trent and I'm so glad you are here with us today. It is going to be a little extra special day because I brought back Dr. Terri DeNeui so we could talk a little bit more about all things thyroid. It is so important to me and I know that it might be important for many of you watching. She is so insightful and she knows so much about this topic. It will impact so many lives I have no doubt both men and women.

I hope this will be helpful for those who have questions about thyroid health just as I have had so many questions about my thyroid. If we don't cover everything that you're hopeful for, I know that you'll find some of those answers in her book, *Hormone Havoc*. So take a moment to a fantastic conversation that we had. Take a moment and listen to this great conversation and enjoy.

**Begin video**

**TAMMY:** I'm so excited to be back with you, Dr. Terri DeNeui. Thank you for spending more time with me! Because we had so many things to talk about, and I didn't even hit on them. One that's so important to me is the thyroid. Let's talk about our thyroids. We talk a lot about low thyroid. Why is that a problem?

**TERRI:** The biggest problem is it is so underdiagnosed. That kind of started in about the '70s when the TSH test came out. So before this TSH test, which stands for thyroid stimulating hormone came out, the way clinicians treated the thyroid was if it walked like

a duck and talked like a duck it was treated like a duck. So many patients are walking in like a duck and they get their thyroid lab, their ultrasensitive TSH done and they're told they're normal. They're not ducks. And so that's a really big problem.

The problem there is that TSH is one lab test that tests how your brain detects the levels of thyroid in your body. But the thyroid hormone which is T-4 that your thyroid gland makes, it has to convert to another thyroid hormone that does the work. So many clinicians aren't trained. I wasn't trained to look at that T-3 or the Free T-3 and that's a really important one.

So many people are walking around with what we call sub-optimal thyroid. Remember earlier when I talked about that bell curve? In the normal range, well, for Free T-3 that range is about 2.3 on the low end to 4.5 on the high end. And that again is an average range for a lot of sick, unhealthy people, right? So if you're at a 2.4, even though you have all the symptoms, but your clinician doesn't understand that's not optimal, they'll say your thyroid is normal.

Now it is important to understand that so many studies, I teach on this, I teach physicians across the country, there are studies that show a Free T-3 under 3.0 is associated with higher rates of all cause of death, heart attacks, cancer.

**TAMMY:** Oh my goodness. It is serious.

**TERRI:** So you could be in the normal range on that left side of the bell curve and be at a much greater risk for diseases.

**TAMMY:** I love that you talk about the normal range and the optimal range. It wasn't until later that I understood what optimal was and why that was important. Because I was a girl who would go in every year and get my blood work, get my labs done and I would fall within that range. Sometimes I'd be in the higher, sometimes I'd be in the lower and it was always like, "You're great!"

And one time, I bounced out of the range by just a little bit and it was like, here! We're going to throw a synthetic drug at you. I didn't know. To our benefit, many of us just don't know. We go to the doctor and we're told, you've got a problem and this is going to fix it. And we say okay. And we pop it in and it doesn't change anything but we're told it's going to fix it. And that's where my life was.

**TERRI:** Well, it fixes the lab.

**TAMMY:** It fixes the lab but it doesn't fix my problems. It doesn't—it is not a solution for me, especially long-term. So I stayed on that synthetic for many years until I heard doctors saying, the right kind of doctors for me, saying, you need to get off of that. It is terrible for you. I was like why?

And then I went and got some more lab work done and I started learning myself. This is why I love having you on, this is why I love coming up soon, we're going to have "Wellness Wednesdays" so we will be equipped and learn more about this. I just think that we are not educated enough. That's why it is so important to connect with people like you, Dr. Terri, so that you can help educate us on why it is so important.

Talk to me more about the thyroid and maybe the difference between if somebody is on synthetic and trying to get off of that.

**TERRI:** So the synthetic thyroid, which the generic is levothyroxine. So that's the generic. That came out in about the '70s as well. A couple of decades after the ultra-sensitive thyroid-stimulating hormone test came out. But before that drug came on the market, all we used was what we called desiccated thyroid and that is a combination of T-4 and T-3 in the exact ratios that the thyroid makes. So the thyroid secretes about 80 percent of T-4 and about 20 percent of T-3. That T-4 though has to convert to the active T-3 to do the work. That's important. There is a specific enzyme called deiodinase 1. It causes that conversion. But here are the things that decrease deiodinase 1: Stress,

inflammation, diabetes, heart disease, chronic pain. A plethora of things that happen to us in our everyday life that will stop it. Taking synthetic thyroid also blocks deiodinase 1.

So all of that thyroid that either your body is making or you're taking in a synthetic T-4 is not able to convert well to T-3. And that's why people have good labs but they still feel like everything is low. It's because their T-3 is low. And most clinicians, and it is not their fault. I don't want to come across as we're speaking poorly of physicians who work hard and get through medical school and get through their training but it is not taught in school.

We train clinicians across the country. We have training every month here in this area. And every single time they finish, they're like, "I have to relearn thyroid. I have to just unlearn everything I just learned." Because we present all this really good clinical data, and that is the biggest problem. People aren't looking at the right things and then they're plotting people in this bell curve that isn't optimal.

The other thing about that Free T-3 number, let's say for people in our age group, the top end of the bell curve is 4.5. Well, do you know what the top end of the bell curve of an 18-year-old is? 7.4. I want to be where I was when I was 18. I don't know about you but when I had all the energy and everything. So it is just a lot of information that is just not taught.

And then, of course, the pharmaceutical reps that push the drugs and that's kind of where we get our education. So clinicians have to go get educated. But like I said on one of our breaks, it is patients that are driving clinicians to get educated because patients are going, "Look, I don't feel good. I'm still depressed and moody." Depression—the psychiatric world has used thyroid for depression for decades and decades at very high doses too because it plays such a huge role in the brain.

**TAMMY:** So tell me what are some of the symptoms of a low thyroid?

**TERRI:** The obvious symptoms are I can't lose weight. I have cold hands and feet. My eyebrows are thinning. My hair is thinning. My skin is dry. Check. Check. Check. Check.

**TAMMY:** All the things I was going through.

**TERRI:** And then, of course, constipation and GI issues. But the more insidious ones that are just kind of vague are fatigue, depression, and even anxiety. Those are big ones. Heart palpitations: the heart is the only—the heart cells, the muscle cells are the only cells that don't convert T-4 to T-3 so they're dependent on whatever T-3 is in the bloodstream to work well. So we see people on the low, the wrong side of that bell curve have higher rates of congestive heart failure and cardiovascular disease. There are studies that showed patients that had low Free T-3 syndrome is what that is called. And that is not even outside of the range; that's on the low end of the range; had much higher rates of ICU deaths and staying on ventilators longer, and things like that. So it is just a lot of misinformation or noninformation.

**TAMMY:** So what if somebody watching today has been taking synthetic thyroid for many, many years and they're like, I want to get off of that? I'm learning today that it is not good. I need something better for me. First of all, I think about when you talk about the '70s when they introduced synthetic, if something else was working, why did they introduce something new that now won't work as well? I don't understand that! You have some things to say about that.

**TERRI:** I don't know if I should.

**TAMMY:** We probably all can read between the lines. If it is about money, it is really sad, because this is about our health. This is about my life. This is about your life. That's why today is so important because we're learning some things that you get to take your life back. Nobody gets to live it for you. You have one life.

So for me, I had so many doctors saying, "Get off synthetic. Get off synthetic." And now

that I'm on this, what is it called?

**TERRI:** Desiccated—it's made from pig thyroid, actually. It's a combination of T-4 and T-3. It comes in different brands, of course.

But you had said something previously about what if I want to get off my synthetic. Okay, there are a couple of things I need to say. Number one, you have to find a practitioner who is open to prescribing desiccated thyroid.

**TAMMY:** Okay, because I wonder, would my primary care switch me?

**TERRI:** Maybe. Maybe. Your primary care would be more open to that. Some specialty practices are solid that synthetic is the way, even though there is plenty of data to show otherwise.

So the first thing is finding a clinician who is open to listening. Look, I know my labs say I'm normal. Can you please get a Free T-3? Can we look at that? Can I get my Free T-3 optimized? Can I try desiccated or some sort of desiccated thyroid like NP Thyroid and Armour Thyroid, you've talked about that. There is a generic Armour that neh, it works okay. So find a clinician who is open to working with you as a patient. One of the things I get frustrated about is, "Well, my doctor said I can't do that." Well, it's your body!

**TAMMY:** Find another doctor!

**TERRI:** That's what I'm saying. If you know in your gut, God puts intuition in our gut, when the Holy Spirit tells you something, if you have that, no disrespect but find a clinician that will work with you and honor that you understand your body. That's number one.

And never stop the synthetic cold turkey and start another. You have to, and a lot of practitioners don't know this, you have to transition over. The way we transition our

patients is we have them take each one every other day for a few weeks and just get used to the new thyroid. Because a lot of patients, if you just stop the synthetic and start another one, the body kind of goes a little haywire.

**TAMMY:** That's what I did. I stopped one and started another. So that explains my haywire.

**TERRI:** But not everybody does that but it is something that I've seen.

**TAMMY:** It could happen, which is super great advice.

**TERRI:** You want to be monitored.

**TAMMY:** For sure! Tell me something, do men deal with thyroid?

**TERRI:** Yes, but not to the degree of women. Women feel thyroid more. They feel that low end of the bell curve. Men, no offense to the guys, they're not quite as in tune to their bodies as women are, especially hormonally. So what I like to do, especially if I see a man that has a low T-3, even though he may feel pretty good, I talk about the impact on the heart. Men resonate with conversations about their ability to protect and provide for their families. So when you start talking about and showing how when your levels are down here you have a much higher risk for heart disease or congestive heart failure and things like that, it kind of resonates. So we just want to move the needle over here a little bit.

But mostly, it is women who feel thyroid and that low thyroid and that conversion. There is an age-related, like everything else, decline in our body's ability to convert T-4 to T-3 as well, and women feel that.

**TAMMY:** Iodine.

**TERRI:** I love iodine!

**TAMMY:** Is it a myth or a fact that iodine will help? If I'm taking an iodine supplement, will that also help me with my thyroid medication?

**TERRI:** That's a great question. Well, the thyroid is made up of iodine. The medical name of T-3 is triiodothyronine—it is a long word that has iodine in it. I'm going to butcher it. So you need iodine to make thyroid hormone. So in a lot of our younger patients that maybe just need a little bit of a tweak in their diet and supplements, we'll start with iodine. Also, iron levels. When your ferritin is low, you don't convert T-4 to T-3 well so selenium is the number one cause of Hashimoto's thyroid, which is an autoimmune thyroid issue. A lot of you can correct a lot of Hashimoto's early on with just some really good thyroid supplements. So selenium, zinc, and iodine together are all good.

There was a myth that if you have Hashimoto's, you shouldn't take iodine. Well, that's not necessarily true. Actually, you need to take iodine with selenium because selenium plays a role in those antibody formations and decreases that body's attack on the thyroid.

So iodine is also very protective of all glandular organs. So low iodine is associated with higher breast cancer risk, higher ovarian cancer risk, higher prostate cancer risk, and higher thyroid risk. So all those glandular cancers. So iodine is a number one supplement that we use in our office.

**TAMMY:** Can you heal your thyroid? Can you turn it around? Or if you've been diagnosed and now you're on medication, will you always be on medication? Or is it possible to heal your thyroid?

**TERRI:** A really good question. So it depends on the root cause. If the root cause is Hashimoto's and you can catch it early, there are ways you can heal your thyroid. If the root cause is a poor lifestyle and you change your diet, you change your eating, you get

rid of inflammatory foods like sugar and processed foods as much as possible, like all, you can and you supplement with nutrients.

Our diet is very nutrient-deficient in this country. Our soil is nutrient deficient so even the foods, if you're eating fresh foods, tend to be nutrient-deficient because of our mass farming practices. I talk about that in the book too. So supplementing with the right nutrients.

Now if your thyroid deficiency is an age-related change in the conversion, you probably need a little bit of supplementation. But it is always okay to start, unless you're really low thyroid, like even outside of that reference range, then you probably need the medication.

Last answer, if I start it, do I always have to be on it? It depends on why you started it and when you started it. If you're just suboptimal, you're in the lower end of the range and you're trying to get over on the right side of the bell curve, it will suppress your thyroid production until you stop taking it and then when you stop taking it, the brain goes, oh, I need thyroid and kicks back in. So it is kind of—it is not a permanent thing.

**End of video**

**In the studio**

**TAMMY:** Oh my goodness! I absolutely loved watching that interview again. She is so good! She is so smart. She is so knowledgeable. I feel like honestly, every time I watch one of these health and wellness shows, I learn so much. I almost feel like I can't capture it all in one show. So the best way that you can continue to learn, especially if you've got questions and you feel like maybe they weren't answered is to pick up this book, *Hormone Havoc* by Dr. Terri DeNeui. It is so good! And it is jam-packed with a ton of information, and I have no doubt will answer so many of your questions.

So I want to make sure to get you this book. I want you to have it. I want you to know about your health. I want you to feel equipped. I want you to be able to take your health

back. We all do here. We care so much about you. So I want to make sure to get you this book. With any gift that you're going to be able to give to us today, request this book and we will get it right out to you.

But first, I want you to take a minute. We're talking a lot about health, and our health, and taking our health back. I know that there are a lot of people around the world that want that for themselves too and don't have the means to make that happen. Well, we have the opportunity to help them with that today. I love this campaign, *Christmas Shoes and Smiles*. It goes well beyond even that. So I want you to take a moment and watch this and I'll come back on the other side and wrap things up.

### **On the mission field**

**TAMMY:** These are tough conditions. These people are living in absolute poverty. I'm sure it is hard to provide for your family. I don't know what they have. I don't know what their need is. But I love that I don't have to figure it out. God just sends us. He sends us and he says, show up!

That's what I do love about *LIFE Outreach*. For the many years that I've traveled with them around the world, wherever we see a need we just jump in. Whatever it looks like, we're thinking of kingdom-minded things. We're thinking of saving a life but saving their very life, their soul! That to me, is the gospel; what it's all about, spreading the love of Jesus Christ and sharing the good news of Jesus.

James and Betty started *Christmas Shoes and Smiles* years ago. I think their heart was absolutely about showing the love of God, especially to these children all around the world. It is so so wonderful! The joy they feel getting something brand-new!

Gosh, it just could change everything for you. Oh, my goodness, baby, you need—you need these shoes!

These shoes will protect their feet, keep them from danger, and keep them from infection, from injury, from hookworm that could ultimately lead to death. This is an important need right now all around the world.

So if you've given before, thank you so much. If you've never had a chance to give to this ministry, this part of it, *Christmas Shoes and Smiles* then I would encourage you to give the best gift that you could possibly give. We want to keep putting shoes on children all around the world. We want to do it all. It's been a great year. It's been an incredible year of ministry, whether it's been water, whether it's been food, or whether it's been shoes. Right here we are so blessed to do kingdom things. Together, we are changing the lives of people all around the world. We couldn't do it without you. We love you. We appreciate you. Thank you so much!

### **End of video**

### **In the studio**

**TAMMY:** Oh, my goodness! I absolutely love *Christmas Shoes and Smiles*. I had the incredible opportunity to visit Central America earlier this year and it was such a special experience for me again. Being with those precious children and praying with so many families in need means the world to me.

For those who don't know, I was widowed before my husband and I could start a family. So I never got the chance to have children of my own. So when the Lord sends me to these outreaches all around the world, it is the children that weigh heavy on my heart. In those moments, they feel like my own. Even if just for a moment. I want to wrap my arms around every single one of them and tell them, "Everything is going to be okay."

On that trip, I got to do that in the simplest, yet most profound way by giving them a pair of shoes. Seeing their faces light up, their smiles, and the joy a simple pair of shoes brought to them is incredibly moving. How could it not? It was a reminder of how small acts of love can have a huge impact.

*Christmas Shoes and Smiles* is such a joyful and fun campaign that started so many years ago with the beautiful vision of James and Betty. It is amazing to see how still to this day we're going so strong, giving away countless pairs of shoes, and planning to give away even more. Every pair represents hope and love to a child in need.

But our mission goes beyond shoes. Did you know that for just \$500 we can change a child's life forever through corrective surgery if they were born with a cleft lip or cleft palate? It is incredible to think about the difference that that amount of money can make in the life of a little child. Our mission is focused on Jesus, healing, hope, and providing for people in need.

I believe so much in this mission and I keep showing up, and I will keep showing up until the day that Jesus takes me home. But I can't do it alone. I need your help. Would you show up with me today? Would you consider walking this journey with us to bring shoes to as many little feet as we can? Your support, your love, and your generosity can make a world of difference.

Our goal is to provide 150,000 pairs of shoes. So if you can do \$36 that will provide shoes for 10 children. \$72 will provide shoes for 20. And \$180 will provide a brand-new pair of shoes for 50 children.

But also right now, we have an incredible opportunity up and above our normal *Shoes and Smiles* budget. We have an opportunity right now to help build a \$1.2 million surgical center in Uganda. How exciting is this? And it will help provide surgeries for children from around the world with severe neurological needs. Without these surgeries, many of these children will face death.

Due to the support of a generous partner in life, \$700,000—imagine this! \$700,000 has already been raised. But \$500,000 is still needed today. In addition to *Shoes and Smiles*, will you consider an extra gift today? Maybe \$1,000 or more that we could put toward the surgical center? That would be absolutely incredible if you could. Your generous gift

could help save so many lives.

So please call, write, or go online right now. Let's bring joy, hope, and healing together!  
And let's do it today.

### **Begin video**

**ANNOUNCER:** For almost two decades *LIFE's Christmas Shoes and Smiles* has continued to provide shoes for impoverished children throughout the world, as well as corrective surgeries for children with cleft palate disorders. By responding today, you can help provide new shoes for 150,000 children in time for the holidays, and for some children a beautiful new smile. Your gift of \$36 will help provide shoes for ten children. \$72 will help provide shoes for 20. \$180 will help provide shoes for 50. And a gift of \$500 will help provide a corrective smile surgery.

This year we have an incredible opportunity to help construct a new surgical center that will provide lifesaving surgeries to children suffering serious neurological conditions. This \$1.2 million project is up and above *LIFE's* normal budget but because of one generous friend for *LIFE*, only \$500,000 is needed.

As a thank you for your gift of support to this life-saving outreach, be sure to request the blue crystal shoe ornament, a treasure to display each Christmas. With your gift of \$100 or more, you may request this keepsake boxed set featuring four crystal shoe ornaments.

Finally, please consider an extra gift of \$1,000 or more to help construct *LIFE's* new surgical center. And with this gift, you may request this beautiful bronze sculpture, "A Cup of Water."

Please call, write, or make your gift online today!

### **End of video**

**In the studio**

**TAMMY:** I hope you're going online and giving the best gift that you could possibly give. Truly, you must know that it will make an enormous impact in the lives of so many people all around the world. What an incredible opportunity that God has given us to bless those who just need a little extra right now.

Listen. For any gift that you're able to give today, we want to send you Dr. DeNeui's book, *Hormone Havoc: Dispelling the myths and misconceptions about hormones in both men and women*. Honestly, it is an important book for every one of us to have. So whatever gift that you're able to give today, we want to send this to you as our gift to you. We want you to be well. We want you to have balance in your life. We care about those things, both spiritually and physically in your life. I know that the Lord cares deeply about that stuff. We want you to be aligned with everything that God has to fulfill his greatest purpose in your life—freedom, happiness, wholeness, in Jesus' name.

God bless you. Thank you for watching. We'll see you next time on *Life Today!*