

## Healthy Bones and What's New in Testing



### Ep 3: Bones are Our Foundation with Irma Jennings

#### **Gregory Anne**

Welcome, everybody. This is the second official episode and my first interview for the Rebellious Wellness Over 50 podcast, and I'm super excited, as I said last week, that I would be, to have Irma Jennings with us today, not only for her expertise and wonderful personality--we're going to have some fun--but also because she is a bone health expert. As she says on her website, and I've always believed-- the bones are the foundation of our health, our longevity, our ability to go and do and be.

#### **Gregory Anne**

Yes, the muscles play a huge role because they interact with bones clearly. But the bones are the foundation of our being human.

#### **Gregory Anne**

So, Irma. Thanks for joining us. I know you have lots and lots of stuff, so I won't go on too long. But I do want to just give people a little bit like a tiny bit about who you are and you're going to tell us how you got here.

**Gregory Anne**

OK, so you are a former New York City woman, just like myself.

**Irma Jennings**

Irma Yes.

**Gregory Anne**

And you went from the boardroom on Wall Street to the cutting board, which I love, as an expert in the foods that keep our bones healthy and longevity of healthy bones, not just like let's be healthy at 30, but every decade to come has its own different needs.

**Irma Jennings**

Right.

**Gregory Anne**

And you have all of that, including the foods which I'm excited to hear about because I have to admit I'm not such a green foods lover well .

**Gregory Anne**

I love vegetables. When you start drying them and putting them in teas and tinctures and stuff, I'm not that good. But you're going to show me some, you're going to show us all some stuff that will make it easy to get started in that direction. You're a graduate of the Institute for Integrative Nutrition, one of the early ones.

**Irma Jennings**

Right.

**Gregory Anne**

The program is much different now, I think. Two thousand three. And your diagnosis of osteopenia, which I have said before, is a marketing term. But it is a marker for people, it wakes them up and go, oh, I have this thing, let me pay attention. And that's what started you on this journey for your own healthy bones and then to help others.

**Irma Jennings**

That's right,

**Gregory Anne**

But go a little bit deeper, I want to know more about, so you're working on Wall Street, you're being trusted with people's money to make more money for them, I would imagine.

**Irma Jennings**

Right.

**Gregory Anne**

And it was all great until it wasn't what happened, was it the stress?

**Irma Jennings**

And it was in the 70s to the 90s. So, it was me as a woman crawling out of the underneath ness of well, "you're just a woman." That fight became much bigger than the end goal. And I didn't know what the end goal was. It was not only about feeding my 401k or my IRA or knowing about the markets, it was in a way, where is my happiness? And then I noticed that happiness was not part of my surroundings. I really liked working with men.

**Irma Jennings**

I liked the whole competitive nature for a while. And then it became I was looking for more depth of life. So, I noticed that my life was crumbling, my bones were crumbling, and something significant had to change. Now I say my bones were crumbling. I was getting a wake up call to the osteopenia diagnosis. They weren't actually crumbling. But when I when I started taking that deep dive and I will say this, that and this comes up over and over again for women that I speak to, they go they bring their DEXA reports and their doctor says, oh, my gosh, you have osteopenia.

**Irma Jennings**

We need to stop this right now. (A doctor will say) "Here's your script. And if you don't do this, X, Y, Z will happen" and they give you the picture of the woman walking with dowagers, which is hard. And the fear factor was so significant that I really had to weigh things. And it was sort

of, that was when I I felt the same thing on Wall Street. You know, the fear factor or the greed factor or whatever factor was driving was not the truth.

### **Irma Jennings**

So, I said, "I don't know if I'm going to do that." (Take a prescription for bone medication) He said, "well, you know, good luck with that." And that comes up over and over again because I wasn't talking to the right doctor. I wasn't talking to an integrative or functional doctor that says, OK, let's take a deep dive into the cause, into the reason behind what's going on, your internal working. So, the bones do take us from our first step to the last.

### **Irma Jennings**

It's significant to really think about that because there's so much grace in that. I mean, when we take our first step and when we take our last step, we want to make sure that we can look back and say it was a life well-lived.

### **Gregory Anne**

Yeah.

### **Irma Jennings**

So anyway, so I bring my Skelley with me. (Pointing to her skeleton)

### **Gregory Anne**

I love Skelley

### **Irma Jennings**

I bring Skelley wherever I go because it's the metaphor. A skeleton lives in us as well and some people get really creeped out. They say, oh my gosh, it's a skeleton. It's like but that's part of us. And I understand, but it is part of us. I use it as my metaphor because when I take a deep dive into the conversation with my bones, I usually look at it as a spiritual journey. Really, what's being asked of me now?

### **Irma Jennings**

What direction do I have to go in, whether or not it's living in New York City and moving? Which I did do after thirty-seven years or leaving my twenty-three year career Wall Street job or and raising my son, which just took a tremendous amount of work and wasn't always joy

filled, it was an expansion for sure. And he taught me so much. And he is a challenge and a blessing, an absolute blessing. But all those things I.

### **Irma Jennings**

I wasn't really. They added to the purpose as far as moving out, being with my son, but it was still incomplete and what I realized is that I wanted to get to the bottom of my osteopenia. I wanted to learn how to cook and feed my bones. I wanted to learn all that I could about bone health. And then I wanted to share it. I want to teach it.

### **Gregory Anne**

I want to acknowledge the bigger picture that you've just painted for us here about spirituality, about where what is my next step? What am I being called to do? And you and I were talking a minute ago about something that is so important but gets shut down in women and god, men don't even ask questions. But when a woman has a question and she doesn't know where to turn, she sometimes will just say, like in your case, when you went to the doctor and he said, "Well, here's your bone prescription.

### **Gregory Anne**

And if you don't take it, well, good luck with that." And you and I both know, you know way more than I do about this. But the bone medications can be dangerous for many, many people, most people. And so, but either you take the medication and you go off hoping that it's the right thing because you've heard maybe they are, maybe they're not that good, or you don't take it. But then where do you turn? Who do you trust or you think, "I'm embarrassed. I should know these things."

### **Gregory Anne**

Right? So, I just want to encourage people that are hearing these conversations to never be afraid to reach out and ask the question. And if it starts with myself or Irma, even if we're not the right person for that moment, maybe it's not about bones, maybe it's not about general health. We can probably point you in the direction of a trustworthy resource and then you can take it from there

### **Irma Jennings**

Because women are so good with that, with natural community builders and sharing of information, which is phenomenal.

## **Gregory Anne**

So funny what you just said, it parrots what I said last week. But, you know, it's all one big ball of energy when you really want to help people and dive into this.

## **Irma Jennings**

I do.

## **Irma Jennings**

I do want to say one thing about medication. Many women are afraid of medication. There are two key things. If you're losing bones and I'll tell you how you know that, the bone loss has to be stopped. ***And if it if it requires a temporary one or two-year medication routine that you're being followed by blood work and bone markers and things of that nature, sometimes that needs to be done.*** But what had been going on, if I had taken that script in 05, I would have been on it for ten years, Fosamax for ten years.

## **Irma Jennings**

There's been reports of spontaneous fractures, femurs breaking. You know, I would not have been watched. So, the key thing is that the bones have the bone loss has to be stopped. And we really have to take a look at the fracture risk because ultimately this is what it's all about. You know, one out of two Americans of the age of 50 will develop osteoporosis, **one out of two.** Now, that's a huge number. And we are the baby boomers.

## **Irma Jennings**

But now we have a voice, we have a voice, and we have a choice. And we can gain the knowledge and it's not that we have to have a PhD in bone density. But when we find reliable sources and we collect information, put the puzzle together, it's very, very helpful.

## **Gregory Anne**

I have to make a small confession here. I had a Dexa scan when I was fifty, which I'm no longer. And then when I saw a new functional medicine doc, I talked about the guy who helped me with my thyroid. He said, "when was the last time you had a dexa?" And I said, "Oh, it's been a while. It's been a while." And I put it off. Why? Because I was in stick my head in the sand mode. I was afraid the numbers had gotten worse and I don't want to see them right. And I probably am not the only one. Now, how do we get over that fear?

## **Gregory Anne**

Just seeing the first number is like looking at the scale when you want to go on a diet. I guess on January 1st. We haven't been on the scale in a few years. It's a little bit worse because fat's sort of benign. But bone loss is scary.

## **Irma Jennings**

Oh, it's scary if we make it scary. So, we naturally lose between a half to one percent a year. So, we're going to have loss. It's the aging process, it's like wrinkles. We call wrinkles a disease. But some people do. But it's part of the aging process or thickening of the waistline, which is, by the way, I mean, I'm shocked that all of a sudden I think this is the Covid problem, the thickening of the waistline.

### **Irma Jennings**

But we have to look at these things and understand it's data and we're collecting data on ourselves and not to jump at the first option, which may be scary, but to say thank you very much for the information and I'm going to pursue some of them. And maybe that may not be best, because ultimately we, I say this to people. They don't believe me. We are the customers. We are the medical customers. The doctors are helping us and hopefully partnering with us.

### **Irma Jennings**

But we're the consumers and we still, we still thank God at this moment in 2020, the end of 2020, have choices. Now it's all within insurance and there's so many workarounds now, so many workarounds. So, getting the information is key. So, you know, and then you start tracking it. But let's go back to the DEXA tests. Because the DEXA test. There's such a big story about the DEXA test, but I'm going to say it from this point, the DEXA test right now is the gold standard and it measures one aspect of the bone, which is the bone quality.

### **Irma Jennings**

Excuse me, the bone density, that's the DEXA test, as time has progressed now, a new layer has been added to the test, which is a software that goes right on top of the dEXA machine. You don't see it plugged into it. That is the trabecular bone score that measures the bone quality. So you need both. You need to know the density and the quality. You can have very thin bones with small, thin woman that doesn't have a lot of density.

### **Irma Jennings**

But if your inner bone, it has solid quality, that's a piece of data that you have to have. So I always recommend for anyone that comes to visit me on my site or we work together, that you go and have the test, the DEXA test and the trabecular bone score done together. And I personally have done it at University of Penn. I like their system. I like the reporting. They give me a five page full color report, which I demand.

### **Irma Jennings**

I actually demand it as I'm not looking to leave until I have that report, because two years ago they ran me around. They can't print it up. I said "do you have a printer, a piece of paper?" You could print it.

### **Irma Jennings**

So, then I and then I keep a file and then I track it. But the two tests are very, very important because the first one can just scare the living daylight out of you. But you need to have a full package of what's going on.

**Gregory Anne**

It's almost like cholesterol now because we used to just to know that there was an HDL and LDL. Now we know that there are different particle sizes and the LDL number, the density of the HDL make a huge difference in how the cholesterol is working in our body for us or against us or

**Irma Jennings**

Literally totally would be a great comparison.

Now it's full.

**Gregory Anne**

I have never heard until I met you about the trabecular bone score. And why aren't more places telling us that we should add that and why it was a part of it?

**Irma Jennings**

Well, so it's a relatively new system, I think. 2016. I don't know if I'm accurate on that. Universities typically have it, university hospitals typically have it. I think that slowly it will trickle down as insurance kicks in, insurance does cover it. If you have the right script on Medicare, or that your doctor knows how to write the code, or it's a whole nother science, code, but I think it will start trickling down into more radiologists offices, especially as women demand it.

**Irma Jennings**

When you ask the question, I want to make an appointment for my DEXA test. And do you have a trabecular bone score? This is what you'll get. WHAT? But so then you'll say, well, let me talk to the radiologist. You ask the question, they'll say what? So then you just move on. So I've been working on accumulating different facilities that have the trabecular bone score because this is a bridging moment and we're sort of bone warriors and getting to the truth.

It's an important piece.

**Gregory Anne Yeah.**

**Irma Jennings**

And then when you get a retest, when you get to test it again, which is every two years, Medicare reimburses every two years and you want to do it around the same time. It's it's sort of fiscal like day to date. And from the vitamin D level, it's important to have it tested around

the same time, you don't want to take calcium beforehand, but you want to get it done at the same facility with the same machine.

**Irma Jennings**

So here's the other thing. This gets a little tricky because it's like, oh, stop it already. But if you're using. So a client of mine just had a Dexa test, which is the same issue. Yes, same machine. We moved it to a new facility. Same machine. Yes, exactly. Same machine. Same serial number. So she knew that question to ask the like, huh? Well, it wasn't it wasn't the same serial number, same manufacturer, different serial number, which indicates a different machine.

**Irma Jennings**

Her numbers were all they're all crazy, crazy, drastic change. And she said, nope, I'm not doing that. I'm going to go get another test then. So here's the other thing. What, people don't know is they can negotiate a price if, let's say their doctor is not going to give them a script for a DEXA test and you call a facility and you want to have DEXA, you pay out of pocket. And sometimes the terms are negotiable.

**Irma Jennings**

I mean, I had suggested to one client, OK, that's a good price. But go back, see if you could do better. That was my Wall Street days coming in.

**Irma Jennings**

That is not necessary for everyone to do that. But do understand that we are getting word that the reins have been lifted. As far as the restrictions, we can now get blood work away from the doctor's offices. We now get certain tests. We could get bone markers away from the doctor's offices. So that's an important piece to understand.

**Gregory Anne**

Yeah. Thank you for that. That's really important. So one more thing about the insurance and your work.

You don't have to worry about paying for with your insurance if you learn how to feed yourself well and move and do the right things to support healthy bones. Right. We're not. What I'm saying is we're not relying on the health insurance policy that we may or may not have or we may or may not like to make changes to our lifestyle that benefit our bones.

**Irma Jennings**

So you're saying how can we empower ourselves?

**Gregory Anne**

I could be

**Irma Jennings**

Let's say you are asking, OK, because there are so many ways of doing it.

**Irma Jennings**

First of all, being in community is so incredibly helpful because when when one woman asks a question, another will say "I had that question. I just didn't know who to ask." Daily getting exercise, moving your body, getting the oxygen, moving around, even if it's simply walking around the block. And then you can build up from there. You walk around the block with weights. Just watch how you're holding yourself. You can do qigong, you could do rebounding.

**Irma Jennings**

Rebounding is not a impact for for bones, but it it works the lymphatic system and systems are all connected. So that's a great way to get the the heart beating and also to have the lymphatic system working, but do some form of exercise every day, even if it's climbing the stairs. I have a client, she's 70 plus and she I think it's twenty four flights of stairs that she does up and down.

**Irma Jennings**

Yeah, and that was my reaction when I first heard that she's like, oh yeah, that's what I do. So we have tools in our house. I mean, unless we're living in a ranch and we're living in a ranch where one layer we can walk around the block.

**Gregory Anne**

Yeah, for sure.

**Irma Jennings**

Also thinking about what we're eating. My biggest challenge in life is sugar. It's primarily my biggest challenge. I mean I grew up in my go to is sugar Frosted Flakes with a chaser of like a Carnation Instant breakfast.

**Irma Jennings**

It was just like, gosh, you have this if you remember that.

**Gregory Anne**

Oh yeah. You have Frosted Flakes are, and my my English husband still likes Frosted Flakes, but he doesn't get them very often unless his kids come to visit which kids. But they're like, can we get Frosties? We never buy them for ourselves. OK, fine. I always have to have a few others. Just still so good.

**Irma Jennings**

So addictive. They're so good. They're fabulous. Yeah. Yeah.

**Gregory Anne**

So Cocoa Puffs, you know.

**Gregory Anne**

Yeah just checking. OK. All right. We're kindred.

**Irma Jennings**

So when I first went to the dentist, my dentist said to my mother, she has more cavities than she has teeth.

**Gregory Anne**

Oh goodness.

**Irma Jennings**

And we didn't know I was a child of the 50s and my sugar intake was just just massive. So watch the sugar. Really watch the sugar. Pay attention. If you're going to have sugar, have high quality chocolate. Not everybody likes chocolate, but fruit is a good alternative. And people say stop it. But it does. It satisfies that sweet tooth, especially an apple with some fat, some like almond butter or something like that.

**Gregory Anne**

My go to breakfast a lot of days. An apple and almond butter or peanut butter yeah.

**Irma Jennings**

So, watching the diet and one of the problems that or the food choices. One of the problems that my clients tell me. Well, it's not a problem they tell me, but they say to me, every one of them, "I eat so well, no problem in my diet." So tell me, what do you have? "Well, each morning I have this, which is the same thing for the last 20 years, literally." Somebody said that to me.

**Gregory Anne** Wow.

**Irma Jennings**

Which is a problem because we want not only boredom, but we want rotation in the gut. We want to gut to work. We want the microbiomes, says what's this?

Let's wake this up and do the right thing around this. But then she'll say, and every day. "Every day I have spinach salad." And she pauses and I said, well, this is a problem and she said why? I said, because spinach is full of oxalates and you're not getting any of the calcium from the spinach.

**Irma Jennings**

So understand that if you think you're getting calcium, you're not. Now, you can add some calcium. You can add some cheese. Some people don't eat cheese. But I want them to try to understand that rotation of green leafy vegetables, vegetable in general, are so vitally important and protein women do not get enough protein. You need about half your weight in grams of protein. Broken up through the day, so there are remedies for that. There are protein shakes, there are whey powder.

**Irma Jennings**

I don't particularly go for that stuff because I like Whole Foods. I like to chew. But I will say for potassium is important for bones as well. I have two tablespoons of a whey powder in my coffee. That's totally yummy. It's goat whey. So it works well for me. The protein is key. And I interviewed a doctor, a functional doctor who is a vegetarian and she was eating her full weight and protein because she was doing extensive exercise, weight training and a lot of cross training.

**Irma Jennings**

And she shared with me how she gets her protein. It was relatively easy. A lot of bars, a lot of salads with beans. She's a vegetarian. So beans. My go to is and a lot of people say, "ugh" but give me a can of sardines, give me a can of sardines, or give me a piece of steak that I'll cook once and eat over three days.

**Gregory Anne**

Yeah, we do that. Yeah.

**Irma Jennings**

Or chicken or animal protein is my go to go to it and both of us are so lucky to live in this area we have access to very high quality produce and animal protein.

**Gregory Anne** Yea. And humanely raised animal protein.

**Irma Jennings**

Yes. Yes.

**Gregory Anne**

Let me just ask you about the acid alkaline balance which I know some people will have heard of, not heard of, but isn't an acid. When you were talking about the stress from your job when you were still in New York. Now, in the financial industry, we have stress that adds an acid to our system.

**Gregory Anne**

Then we put foods and that may be acidic. And if we don't have vegetables you were talking about, that gets out of whack. Is that not also damaging to the bone strength?

**Irma Jennings**

Totally damaging to the bones, because the bones want a buffer the acid and they release calcium. So that's that's a problem. Yeah, and some people get very, very focused on that, and I don't because I don't want my clients to say I can't do it. So I just I eat green leafy vegetables, have a lot of vegetables and a protein source. An animal protein source uses a condiment. But really think about what your thoughts are if you're moving your body.

## **Irma Jennings**

Are you angry at your husband or your spouse or your friend or whatever you're carrying, anger or covid anger, whatever it is, because all that is really demoralizing for your your health and your body and your bones. So I don't want to sound trite, but shift that around it, if at all possible, either through meditation or one of the things I tell my people is to eat mindfully. And there's something magical that happens with eating mindfully, which is the process is so amazing because when you when you put your fork or your spoon into something and you bring it to your mouth and you pause, you look at it, the mouth, starts filling up with saliva and amylase, which is the enzyme needed to break down protein, start saying, oh, boy, here we go.

## **Irma Jennings**

That's so exciting to get food. Right. So it's allowing that process to really happen because you're doing it mindfully. You're looking at this and thinking, thinking, wow, that's so beautiful that green leafy vegetables so pretty or that prune is so wrinkled or whatever it is you're about to ingest because it's prunes are really good for bones. You have that moment, you have that long before you ingested. Then you put the food in your mouth, you close your eyes, you chew.

**Irma Jennings** I tell people to until it becomes liquid. Twenty, twenty times,

## **Gregory Anne**

I think that's what we learned when we were in high school or something. Twenty one times I get made fun of all the time because I'm the slowest eater because I chew my food to it's liquid, until it's liquid.

## **Irma Jennings**

And then what happens in the digestion says, oh, thank goodness. The teeth are saying, you're letting me do my job. The whole system is saying thank you. So to do that and I suggested by people eat one meal a day in a mindful way, even if it's drinking your morning beverage, just sitting there feeling the heat on your hand, I suggest that people going back to the acid and alkaline balance to start their day with hot water, lemon, maybe even a pinch of cayenne pepper, because that really helps the veinous, the vascular system and to hold up and to really not check email, not just add one more thing, you know, to be with it so that that helps bring down the stress, bring down the acidity of the moment.

## **Irma Jennings**

And you're feeling at peace,

## **Gregory Anne**

So, we're doing Green leafies, we're doing protein. What things do you say are absolutely just for you non-negotiable? Not you have them every day. But I've added this to my diet, some herbal tea or some supplement or something that relates to bones.

**Irma Jennings**

So, vitamin D, vitamin D all over the place because there are functional doctors that will say it should be at seventy nanograms per milliliter and there are others in the bone community that say forty-five. So I'm using that range forty-five to seventy. So I will take a vitamin D supplement in the winter time. Excuse me, the summertime. I go outside but it depends on where the sun is in the sky. Whether or not you're going to get the vitamin D, the vitamin D or the sun hits the skin.

**Irma Jennings**

You need the cholesterol on the skin to convert it to vitamin D. Then it goes into the system, goes into that magical aspect which we call the body that just does things, amazing things. So I take vitamin D supplement. I take five thousand international units during the winter time and I'm going to test my vitamin D twice a year. I will go out of pocket, which is a very quick story about that. I had I was I had a script for vitamin D testing.

**Irma Jennings**

I brought it to Quest. I said, OK, that's not covered. Why do I have the script, not the the coding is wrong, and that will cost you two hundred and forty four dollars out of pocket. That's not going to happen. So I went back to the doctor, had them write another one, just kept going back and forth, back and forth. Finally, another doctor wrote, I had the right script and it was it was part of the program was part of Medicare reimbursement.

**Irma Jennings**

But if you go to Life Extension (online vitamin retailer with reliable products) or any of these other facilities and you know, these little labs, it costs about thirty-four dollars to get vitamin D. It's a relatively inexpensive test that

**Gregory Anne**

You're saying the test was going to cost you a hundred, I thought you're talking about buying the vitamin D itself.

**Irma Jennings**

No, no. The test itself was two hundred and forty-four out of pocket with Quest, but thirty-four through lab core. Vitamin D is a relatively inexpensive supplement

**Gregory Anne**

Super inexpensive super.

**Irma Jennings**

And so I absolutely had that. I have K-2 in the form of four and seven so but I, I you can get vitamin K too with egg yolks and gouda cheese Brie cheese. So if you're a cheese eater, natto. Have you ever had that natto.

**Gregory Anne**

Can't do natto. And I tried for my heart another thing

**Irma Jennings**

It's so it's to me it's like whiskey

**Gregory Anne**

For the people that don't know what natto is.

**Irma Jennings** So natto is a fermented soybean It's a staple in Japan. It's usually consumed, I think in the morning time. The way they serve it is over a bowl of pearled white rice and typically some seaweed on top and maybe some tamari. So I made it once with brown rice and the natto. So natto has a stringy like substance to it. So there are a lot of different senses that are like, whoa, like the smell. It's got a stinky cheese smell. But I like that

**Gregory Anne**

It's slimy, slimy, slimy you said stringy I'm thinking slimy.

**Irma Jennings**

Or what is the that other vegetable that has the slime?

**Gregory Anne**

Okra? I love okra. Well because okra doesn't have the odor. And it's not a lot like a bite of okra is a little thing natto, kind of just never stops being natto as you're trying to get it into your mouth, or at least that with my experience. But I was trying with chopsticks the way they would have.

**Irma Jennings**

Right. Right, right, right.

**Irma Jennings**

But I added seaweed and then I chopped up cucumber and then I added a little tamari with a little bit something else with a little little drop of maple syrup, just a little drop to offset some of the flavors. And I was eating I was like, wow, this is good now. So what happened is because vitamin K 2 came around like, oh my God, it's for heart it's for bones I'm just going to have it. Then you had people like Dr Mercola extrapolating the NATO and making a supplement.

**Irma Jennings**

So that's another way of getting a fermented natto. So I do that. I take I don't take calcium. I get my calcium through food. Now, not everybody can do that, but there are ways of working around.

### **Irma Jennings**

So calcium, if you take a calcium supplement, you're taking calcium carbonate, which is the cheaper. Let me go to Walgreens or Waldbaum's or whatever one of the Wals and get it or the red-headed person or the supplements that I'll buy this one. And it's carbonate and people are like, oh, I'm so constipated. OK. So constipation is a typical issue with bones I or as we age. Or and I love having constipation story because

### **Gregory Anne**

Your life is way more exciting than mine if you're loving constipation stories

### **Irma Jennings**

Well, because when I get to ask people what do you do for it? And they eat prunes and prunes actually ignite the osteo blast, which is the bone building stuff. Some people can't eat prunes, you start slow. I have a dish that you make with prunes. All right. So you get and you can cook with prunes. I have a chicken and prune dish with some olives. That's really good. So I asked them what they do. They have prunes.

### **Irma Jennings**

They have water. Oh, here's one thing I want. General Stiner, mineral water, high in calcium, high in magnesium. This is a great water and I tell everyone to try to drink a bottle of day and then people will say it's expensive. And I'll say. Let's let's break that down a little bit. Really, do you go to do you go to Starbucks? So it's a choice. It's a choice, but I love it.

### **Irma Jennings**

It's effervescent. So it's thirst quenching for me. OK, so I was getting off target. So I drink that bottle of water. I take my vitamin, my Vit. D, my calcium is through food. And then I take things such as fish oil and I take zinc, I take 30 milligrams of zinc right now, during covid, I take some vitamin C in the powdered form. But the things that I live for now, but the bones need 19 vitamins and minerals, protein and fats.

### **Irma Jennings**

So it's not just calcium. We keep thinking it's calcium. The body can't ingest the amount of calcium that is the recommended daily allowance. The twelve hundred milligrams can't take that in. So if you're taking calcium carbonate, which is the cheap one, versus there are so many different types of calcium, but you need to break it up over time. So have three hundred roughly 300 milligrams per serving three times a day, three six nine. That's nine.

### **Irma Jennings**

And then you get the rest from food, but you could sort of gauge that. And again, some people track, they do track.

### **Irma Jennings**

There's so many tracking devices out there. My fitness pal, Chronometer, you can actually see at the end of the day how much calcium I taking in or midday and then say oop, I think I'll either take a supplement right now or some people will sprinkle some calcium carbonate, the powdered into soup, or into a smoothie or into a glass of warm water and drink it.

### **Gregory Anne**

So I'm going to interrupt you for a second. Isn't there a danger because you mentioned that the bones need more than calcium minerals and all these other things on the bones supplement that I take is a vegetarian-based, got seaweed and things, but boron, magnesium, all these things are in there, the plant sources. But is there a danger of just taking calcium on its own? I mean, a danger in that something's being left out, or is that better than nothing?

### **Irma Jennings**

I don't really know the answer to that because that's what the market wants you to believe. And I don't I think everything has to be tested. I think that we are so individual to give them proper bloodwork, to look at the calcium in our bloodwork, to see if it's below 10, which is the number that we want to stay below. But I think what you're what I'm hearing you ask is if we do calcium alone, will it tilt us or make us unbalanced?

### **Irma Jennings**

Because the it's sort of like the Lipitor thing, right? I have high cholesterol going to take Lipitor, but it's still going to eat Brie cheese. You know, it's going to take my calcium so I can then go back to my red wine constantly or whatever. It's it's a balance. It's just a balancing act. And I think that it's very important to keep in balance what you're putting into your mouth. So if you're not eating a well rounded Whole Foods diet.

### **Irma Jennings**

It's not good, it's I mean, this is one thing that we can do to help ourselves in an easy way, and I'm just talking easy like a salad with beans or salad with animal protein. And a salad should be romaine lettuce, watercress. These are low oxalate greens, kale. Some people can eat raw kale or even cook kale you don't put cooked kill the salad, but, you know, to diversify but to eat whole foods. And that also helps to buffer the acid alkaline scenario without having to overthink it.

### **Irma Jennings**

Look at charts and do all that other stuff which is available. And you can do it because it's great to learn about that stuff.

**Gregory Anne** Some people like to geek out on the science and

**Irma Jennings**

I love to geek out.

**Gregory Anne**

I love infographics. I think designers who do really great infographics are amazing because it's not me. My brain doesn't work graphically, but there are plenty out there is what I'm saying. If somebody wanted to go on into the Google, as I call it, hit images and then type in calcium or bones needed minerals for the bones infographics they might find and food to that's you can easily get lots of information on what foods have, what levels of calcium and other things.

**Gregory Anne**

And most foods don't come with just one mineral or nutrient. That's why we want a well-balanced diet. And that's why when they isolate a single nutrient, that's why I'm thinking about this calcium add, it's like a supplement on its own. You'd never find calcium even in the shells that they start out from right in the ocean. That Shell doesn't just have calcium, it's with a mixture of other things, which is why you need the foundation of food, because food has all those things combined.

**Gregory Anne**

And then we add, we supplement. That's the word supplement. We add in what's missing from our diet, not that we rely on them to do all the work.

**Irma Jennings**

Yes, that's the ultimate goal with the form of the nutraceutical world is saying we're too busy, so we're going to help you with supplements. And that's OK. It's better to do it with food, but if you can't, because the time is not there, but because one thing you would ask me about is that I really had a problem with cooking in my first meal that I'd like to share a I cook the meal that I was very excited about.

**Irma Jennings**

It was beautiful and it was way beyond way beyond my capacity. And I had my Wall Street friends over and women on Wall Street were just very tough. But I was very excited and I was cooking all day and the apartment smelled and they sat on the table as they said it smells very good. And they they spoon it out and they brought it up to their mouth and they tasted and said, oh, it's dog food Irma it tastes like dog food. And it was just heartbreaking.

**Irma Jennings** And it did it was like Alpo. And I thought, OK, all right

So I just got to I have to get better, just have to get better. And it could have easily been the end of it all. But I was so curious about flavors. And then having traveled around the world with

spices from India and Thailand and the food markets and you see them, it's like I'm missing something quite significant, which is the spices. And we'll go back to the herbal teas that you had mentioned earlier, because the spices really bring a tremendous amount of spice to our life.

### **Irma Jennings**

Now, start slow, I added to cumin to my scrambled eggs, I added coriander to the scrambled eggs and all of a sudden I realized, wow, this sort of doughy kind of scrambled egg kind of plain protein can really come to life in a beautiful way. And cumin is a great, great spice for both. So I want to go back to the herbal teas because herbal teas are a great mid afternoon go to or some people are caffeine free, which is ideal, not necessarily important because I drink caffeine.

### **Irma Jennings**

I had espresso before I got here a little earlier and I had mindfully and it was just incredibly delicious. But teas like nettle tea nettle teas are incredible. And you can actually grow them in your garden. You can grow them here. Greg, I don't know if you do that kind of thing, but nettles are just wild here. Yeah, we have lots of nettle and lots of stinging nettles and you dry them out. You know, you made a face, no you don't like nettles?

### **Gregory Anne**

No, they sting. They're called stinging nettles because they get in your skin and you can't find the thing that's making your skin irritated and itchy. But those little hairy bits that come off the nettles.

### **Irma Jennings**

Yes, yes.

### **Gregory Anne**

And I as I said before, I'm not a big herbal tea lover. Green tea. I can do, matcha nice, nice. But anything that comes in like dandelions, I just I don't know what it is.

### **Irma Jennings**

It just doesn't work. Doesn't work for you.

**Irma Jennings** The one thing that I did about Nettle's we grow them and we dehydrated them in a dehydrator.

We dehydrate our nuts here with the dehydrator. Many things so easy to do. You just soak something, with the nettles you soak, your nuts, put them in the tray, you go to sleep, wake up are they're done, it's really easy. But with the nettles we dehydrate them and the stinging nettles actually lay down and then if you don't like them as tea, I put them into my bone broth or vegetable broth s and they're incredible. They're so rich in calcium that they're a

great go to dandelion. I get it. It's bitter. Bitter is better for kidneys. Kidneys in Chinese medicine has the bone. So, you want to love your kidneys, but if you don't like them in a tea, you could always have them in the summertime or springtime.

**Irma Jennings**

You could pick them from the garden, put them into your salad. Red clover is another really up over.

**Gregory Anne**

I like I actually like. I've had clover too, which is pretty good. I just forget about things, you know, it's we're creatures of habit. Right. I know, I know. I have a beautiful assortment of teas because I have lots of friends that love tea and they stay over. Well, they used to, but nobody stays anymore, of course with covid. But I look up there some days and I think I'm going to have a... I'm just going to have my regular English tea because it's right there and that I don't have to think about which one.

**Gregory Anne**

Yeah, but in January, I think I'm going to want my my thing about a healthy foundation of food and how to change, is not what am I going to deprive myself of, but what am I going to add in. Because if I add something that's good for me, likely something else is going to have to move out because there's only room for so much in a day of food.

**Gregory Anne**

And I can certainly get a lot in.

**Irma Jennings**

Yeah. And not to overwhelm yourself. And you go into doubt and then what happens, the downward spiral. I'm not good enough or whatever that conversation is, we don't want that. Yeah. Adding and adding and I agree 100 percent.

**Gregory Anne**

Yeah. But when I'm, when it's Christmas and I've made cookies and things for everybody and mail boxes and boxes that are now lost and God knows where, but I save a few for myself and as I'm eating my pecan diamonds that I work so hard to make, I say, damn it, I deserve this. I'm good enough. I'm having them, it's wonderful. It's Christmas.

**Irma Jennings**

I don't think deprivation is it.

**Gregory Anne**

I am so not about deprivation.

**Irma Jennings**

No. And the red wine thing. I had red wine last night and it was so good. Just so good. I don't do it. Maybe I used to drink it a lot. I just don't have that desire as much anymore because I next day I have to apologize for the things. It's just what I do. I do like the flavor. And when I, what I do is I, I often cook with it.

### **Irma Jennings**

It's just not another way of working around. But I say you have red wine, just watch what you're drinking, watch how you are with it and watch how you feel after it. So a couple of glasses a week is fine. And what do you think about that?

### **Gregory Anne**

Oh, I'm a big wine fan and I do cook with it too because, you know, if a bottle is open and it doesn't get drunk in a day or two, for me it's not good.

### **Gregory Anne**

So, it goes in a closet. And when I'm making a sort of stir fry or like last night, we had my husband who's just recuperating from this whole total knee replacement surgery. And, you know, so I'm cooking everything for him. So it's great because I get to manage how much he eats and what he gets and rotations of food. But anyway, I made a little piece of pork loin for him and I put it in the pan and I threw in some red wine and veggies and covered it made a little I don't know, many it wasn't even a stew.

### **Gregory Anne**

It wasn't cooked that long. But the red wine flavor with the price was really nice. So like you, I cook with it. Yeah.

### **Gregory Anne**

I think, again, it's I always say excess in moderation.

Gregory Anne

So, you're going to have one at night, a couple of days a week or you're going to have three with your girlfriends and one night some nights it's excess, some nights it's just a glass of wine with dinner. I don't feel well after I drink too much but either.

### **Irma Jennings**

But you touched on something sitting around with your girlfriends, having wine, ***sitting around with your girlfriends is just beautiful medicine.***

### **Gregory Anne**

Yeah, well, and there was a study a couple of years ago. I don't remember who I read it. Maybe Dr. Sinatra, Stephen Sinatra or his wife, because she talks more about community for the heart and connection. And there was a study that said that as we age, most importantly, as we age,

but important all of our lives, we have to keep strong connections to people that get us and that we like to be around. And if that does not include our family, sorry, family members, we should spend less time with them and really nurture the people in our lives that make us feel good, no matter where they they could be the grocery store clerk that you always go on Thursdays because, you know, she's working.

It doesn't matter. It was really interesting study that even those little micro relationships, but especially with the girlfriends, the friends or guy friends that make us feel like home and get it

**Irma Jennings**

That get us that we could say things or ask questions.

**Gregory Anne**

And it's like, oh, there she goes again.

**Gregory Anne**

Or the one friend we've probably all had a friend like this and maybe not as we age, but. There's never a give and a take, it's like you pick up the phone and it's like high in forty-five minutes later, the person still telling you the trauma and drama that has occurred. How are you? I'm done. I don't know how I am anymore, but those are stressful relationships and I just don't find them necessary.

**Irma Jennings**

No ,energy drain. Absolutely not. And that made me think about something, because one of the things that I think women think as we get older is that we don't need as much sleep. And that is so wrong, the bones actually rebuild in the night time as we sleep, so we want to get a solid seven to eight hours of sleep a night. And it's a challenge. It's a very it's a challenge for many. And when I talk with my clients about sleep hygiene, they're like a meh ehh I don't like to talk about.

**Gregory Anne**

It's like, "what works?"

**Irma Jennings**

You know, what's your routine? What's your nighttime routine?

**Gregory Anne**

And that's all sleep hygiene is, is a routine. It sounds really like ugh "another thing I have to do." But it's just making the same thing happen daily Right?

**Irma Jennings**

Right. Brush your teeth, floss. I have a waterpik which I love.

**Gregory Anne**

I have an electric toothbrush, which I love.

**Irma Jennings**

You have a waterpik?

**Gregory Anne**

I don't have a waterpik.

**Irma Jennings**

You might want to reconsider because I said to my dentist who I really like, I had him, I interviewed him about this whole lemon water because all of my clients are saying, oh my God, my teeth enamel is going to be damaged if I drink lemon water. And he's like, no, no, no.

**Irma Jennings**

You brush your teeth to get rid of the, sort of the plaque and the film from the night before, you have your lemon water and then you rinse your mouth, and you could be good to go because it's so healthy for you. But I said to him, so tell me about Waterpik, what do you think? And he's not a product pusher. He's a regular straight line, very thorough dentist, he said. I hope this is okay to say. He said it's masturbation for your mouth, but you do not need it.

**Irma Jennings**

And I said, Oh, OK. Anyway, I got one and I am so happy. And it's not about that, I have to say.

**Gregory Anne**

And now you realize we're all going, "Well, of course we know why she's so happy."

**Irma Jennings**

No, it's not about that. I am amazed after you brush your teeth, how much is hanging out in your mouth.

**Gregory Anne**

I do notice that I do a lot more. I carry these little pics around like I am brush just because even when I'm done, like an hour later, even if I haven't eaten, I'm like, oh yeah, yeah.

**Irma Jennings**

I could be picking your teeth in front of people. It's just like so yesterday you can't do it now. But this waterpik...

Wow, wow, wow.

**Gregory Anne**

OK, so we have bones up here where our teeth are. I'm just thinking like, well that doesn't, we think it's like here are the bones (pointing to her jaw), but here are the bones as well, (pointing to gumline) and so if we're not taking care of the teeth and the pockets get big and the decay

gets in there, I would imagine I mean, not only that, it can lead to inflammation and heart disease.

**Irma Jennings**

Right.

**Gregory Anne**

Bad gum disease equals had problems going on elsewhere.

So, I'm just wondering, does it also impact our teeth? I mean, our jaw?

**Irma Jennings**

So, there's a couple of layers around that. So, people feel and fear that osteonecrosis, which is if they're on a bisphosphonate that they are going to be subject to Osteonecrosis. It's a very, very small number. There were a couple of pictures out there on the Internet. It's been splashed all around. And people like another reason why I can't take bone drug the bisphosphonate, but the teeth are very, very related. The gum health is very related to bone health.

**Irma Jennings**

And when I was getting my teeth cleaned by the dentist's office, she said, oh, you have. Yeah, like tenacious calculus. I'm like "I don't know that term. I don't know that term. And I was like, is that a personality flaw?"

**Gregory Anne**

But what I think it sounds like a badge of honor, tenacious calculus.

**Irma Jennings**

Oh, so he the dentist comes in and says, oh, I see some tenacious calculus. And I said, OK, so is that plaque. Let's just speak my language is this. Oh, it's plaque but it's really latched on there. He said. So is that part of your personality? You know, a dentist never really asked me that question before, and I thought it is, you know, I have a tenacious personality like, you know, if I if I have a subject like I'm not taking I'm not taking Fosamax, if I if I take a deep dive, that's my tenacious calculus going.

**Gregory Anne**

So interesting that he asked you that.

**Irma Jennings**

Yes. But when we talk about inflammation, because that's one thing that you had mentioned with heart disease, with mouth, it's so, so key to really do everything that we can to reduce

inflammation as we get older. Part of that is to ditch the sugar. Part of that is to get good sleep. Part of that is to reduce stress in any way and to exercise. So I had another I had a woman who was into what started to it, which she formed an organization called Sharp Again Naturally, which is focusing on dementia.

### **Irma Jennings**

And she was drawing the correlation because there are now three studies. One is a very large observational study of sixty thousand people over 20 years that was linking osteoporosis with dementia. And and the one common thread and they're away from the Apoe 4 gene, which I can't get into because it's going to have the time. A whole nother conversation. But what can we do? So now that we see that we have information and we see that we have osteoporosis and maybe we have to mention the family, maybe we have to mention osteoporosis in the family.

### **Irma Jennings**

It's like lions and tigers and bears. Oh, my gosh. So, it's like, OK, take a couple of steps back. What can we do? One step at a time, one day at a time. Let's get more love and relationships in our life. Let's eat our food mindfully. Let's exercise, bring the stress down. Let's really look at the inflammation and inflammation. Inflammation can be checked with blood work. So, to really be your own steward, right? To really hold your body as sacred because we only have a short period of time,

### **Gregory Anne**

That is for sure.

### **Gregory Anne**

And when it is in despair, all of every moment of our day is reflected that way back to us. If we're in pain, if we're not, we're crooked. If something is in our mind, like, oh my God, I have osteopenia. So those things just foment and create more stress and more inflammation. All of these I talked about last week. How much our thinking affects this internal system, right?

There's no getting away from it,

### **Irma Jennings**

The whole thought process is a very, very interesting study. If we have positive thoughts, if we're positive friends, if we have positive views on life, and then when suddenly a bad piece of news comes around like, OK, I can manage that, I can manage that, versus I can't take one more thing I'm full with the bad news, with the bad stuff. I got so stuck, stuck in the whole covid thing I was tracking.

### **Irma Jennings**

It's like, oh no, no, no, no, stop, stop. It's my tenacious calculus. Probably coming forward is like this is not doing good for you or anybody else you need to do is take care of yourself every

single day, every moment to be there, not by being totally focused on like, oh my gosh, I can't do anything without hurting my bones or whatever, but just to be mindful.

**Gregory Anne**

Mm hmm.

**Irma Jennings**

But before we go, because I see that we're running out of time, but because osteoporosis is real and osteopenia is viewed as a precursor, I will challenge that to osteoporosis. The one thing that we want to know is we want to know if we have it, because ultimately, **we want to prevent fractures**. That's the driving goal. How do we prevent how to keep your bones strong and how do we prevent fractures. So, fractures, even if we don't have osteoporosis, as we get older, we get mindless.

**Irma Jennings**

Like, how many times have you said when you walk into a room, why am I here? Or where did I put my cell phone?

**Irma Jennings**

And if you have it on silence, then you can call yourself a double whammy. So it's really, you know, paying attention and paying attention to every time you put your feet on the ground. How am I walking up the stairs? How am I walking down the street? How am I physically in my body? Because when you're more aware of every step, then there's a less chance of tripping because tripping is going to happen. So we want to make sure that we just reduce that.

**Irma Jennings**

And interestingly enough, as we get older, typically when we're falling, we'll put our hands down to break the fall. So we'll have the wrists, we break the wrists. As we get older, we lose that. We get that ability to put the on. Our reflexes are going to diminish as we get older. So then we we fall on the hip.

**Gregory Anne**

So, I don't know why we had so many hip fractures in falling. Versus wrist and elbow, you know,

**Irma Jennings**

We have a lot of risk, there are a lot of risk, in fact, I have osteoporosis of my risk because I went to the facility that I went to did the forearm, because it's just another measure of what's going on. The bones you can have. I don't mean to get off track right at the end, but your bones can indicate that they're getting stronger and stronger with age.

They can. It also can be arthritis, which disguises

**Gregory Anne**

I was going to ask you about the relationship, if any between those two things.

**Irma Jennings**

So, they will, they will sort of disguise the DEXA test. So, you want to have the trabecular bone score to see the inner workings. You want to test your forearm to see if there's osteoporosis in your body and you don't want to run away. You want to find community that says, OK, who can I ask these questions of now?

**Gregory Anne**

I think you have a community that people can go and ask this question of. Yeah, tell us about it quick.

**Irma Jennings**

So, it's called My Bones Tribe, and it's a community where about 38 women and I talk about all things related to bones. I help people go through the whole, the nuances of getting their DEXA tests and trabecular bone score. What to ask the insurance company, what to ask their doctor. I teach them how to cook for strong bones. I have a food program. I have a, there's a lots of lots of stuff that I offer. I did a deep dive on Oxalates, and calcium.

It's a nine page document. I did an info graphic. You'll be happy to know.

**Gregory Anne**

I can't wait to see it.

**Irma Jennings**

And then I have an eighty one page book on a seven day meal plan and how I got to the choices that I made for all the recipes. So.

**Gregory Anne**

Oh that's interesting. Yeah. Why there's not that I just.

**Gregory Anne**

Yeah, exactly.

**Gregory Anne**

And your website is

**Gregory Anne**

Food 4 Healthy Bones and that's the number 4

**Irma Jennings**

they number for both work. But number four. OK, yeah.

**Gregory Anne**

And I think you have something for our listeners.

**Irma Jennings**

I did a tip sheet, this ten bone powering tips and that'll be on this page.

**Gregory Anne**

If you're listening to this, just scroll down the page and you'll see that you can download that tipsheet.

**Irma Jennings**

I do. For people that are local, I do mention the facility that I got that I get my DEXA tested. So it's there for you with a telephone number, if that's something that because once you have a script, you can go pretty much anywhere.

**Gregory Anne**

Yeah. And these days most docs give a Dexa scan at the very least. So if you can ask to have that trabecular bone score added.

**Irma Jennings**

You want that trabecular, just I have to get it.

**Gregory Anne**

I didn't like I said, I didn't know until my friend forwarded your email about a month and a half ago was like, what is this?

**Irma Jennings**

Yes, yes, yes. I mean, I travel an hour and a half to get this test. I do it every two years. It's like it's a pilgrimage, a pilgrimage. I go, what country you're in, I guess.

**Irma Jennings**

Exactly. Exactly. But when we think about, oh, my gosh, I have to do that for this is like it's one day or a half a day.

**Gregory Anne**

Well, and gosh, to prevent from a fracture or an unknown, that's the thing. If you know you have a susceptibility to something, you're working to make it less susceptible. You're going to be more mindful of doing things or not doing things because you have this potential. Like if I have a hip with osteoporosis and I'm working on keeping that from getting worse, I'm going to be more mindful about how I'm walking, how I do stairs, what I'm carrying on which side, you know, all those things.

**Gregory Anne**

So again, where we started was data data so important when I said I didn't want to go get my Dexa scan. It's important that we know our numbers.

**Irma Jennings**

It's important. Yes.

**Gregory Anne**

Irma Jennings this has been so much fun.

I told everybody we'd have fun and we did. And I don't know. The waterpik is definitely high on my list of things to research.

**Irma Jennings**

And it's the holidays there you go

**Gregory Anne**

I don't even know what sales there are anymore, it's all one big gigantic sale every time I open my inbox. But anyway, I would love to have you back in another, I don't know, six months or so and we spend some more time on food and recipes and that kind of thing.

**Irma Jennings**

Maybe we'll cook together.

**Gregory Anne**

That would be so cool.

**Gregory Anne**

We should. Yeah. But I'll be cooking like the Tenderloin and having a big glass of red wine and you'll be over here making healthy food. Like I said, it's all part of a good balance life to enjoy the things that make life enjoyable

**Irma Jennings**

And how much you enjoy living. Look at you.

**Gregory Anne**

Really. I do. Thank you.

**Gregory Anne**

All right, everybody. That is the sort of rebellious wellness over fifty. Thanks for joining. And I will be back next week. I hope you will, too.