Misty: Hey, everybody. Misty Williams here, your host for Your Best Sleep Ever and founder of Healing Rosie. And this next interview, I'm predicting it, it's going to blow your mind. Every single time I have a conversation with Trudy Scott, everything goes abuzz in the Healing Rosie community because she comes at the whole health conversation from a really different perspective that I think lots of us are going to be able to relate to.

And one of the things I often say when I'm interviewing Trudy is she really helped clue me in to how a lot of the ways I'm experiencing the world from an entrepreneurial perspective, as stress is really anxiety, and some of these other things that other people might use to describe their experiences of the world.

And I think it's a really important topic when we're talking about sleep, to talk about the emotional and mental side of the human experience and how that affects our sleep. And I know probably most of us have experiences sitting up at night with our minds racing or just ruminating because something has happened that day or there's a stressful event that's coming, or something has happened to us that's really rocked our world. And you know, sometimes maybe it's not even that big of a deal but we just can't shut our brain off. There's so much going on in our life that we find ourself in overdrive and we're so afraid of dropping the ball.
So I want to tell you a little bit about Trudy and then we’re going to jump right in here. So, she is a food mood expert and nutritionist. Trudy educates anxious individuals about nutritional solutions for anxiety. She’s known for her expertise in the use of targeted individual amino acids, offering hope and immediate relief from anxiety, so other underlying root causes and dietary changes can be addressed with ease. She also is known for her expertise around the social anxiety condition, pyroluria and the harmful effects of benzodi... I can't say it; you can tell us, Trudy.

She's the author of *The Anti-anxiety Food Solution*, how the foods you eat can help you calm your anxious mind, improve your mood, and end cravings, and the host of The Anti-Anxiety Summit and online educational platform for both consumers and health professionals, and dubbed a bouquet of hope. She educates health professionals via the Anxiety Nutrition Institute, sharing current research and practical how to steps. Welcome, Trudy.

**Trudy:** Thank you very much. And those are benzodiazepines, which are frequently prescribed for both anxiety and sleep issues, and we'll touch on that a little bit later. But really important to be talking about these other areas, so we don't have to use benzodiazepines, which have a whole host of issues. So thank you for that introduction and thank you for having me here today.

**Misty:** Yeah, well, I'm excited that you're here. And you always use a lot of big words that I can't pronounce. So this is probably going to be a common refrain of, "I can't quite say that." But this is such an important conversation because I'm sure there's lots of people who are watching us who are actually using pharmaceuticals to help them with their sleep. And I have friends who just swear that if it weren't for some pharmaceutical that they're taking, that they wouldn't be able to sleep at all.

And it seems like this is kind of this epidemic that we're experiencing now, right? With people feeling like they need some kind of prescription in order to sleep at night. And when you think about what sleep is, like, it's the most human part of our entire experience like all of life rests, and we have so much trouble sleeping. So why don't you just kind of like, introduce us. I know you have your own backstory with this whole topic. Why don't you introduce us into this whole dilemma that we're experiencing with our biochemistry and sleep?

**Trudy:** Yes, and so whatever the condition is, whether it's sleep or anxiety, or depression or low mood, or just feeling this overwhelm that you described, we always want to get to the root cause. And what I want to focus on today is talking about some of the neurotransmitter imbalances that can affect your
sleep. Now, I work primarily with women with anxiety and sleep is a huge issue. And it's because some of the similar underlying causes like low GABA, low serotonin, or high cortisol can actually make you more anxious and can actually affect your sleep.

And you described it beautifully at the beginning there where you talked about ruminating thoughts, sort of reprocessing, rethinking, not being able to switch off that busy mind; that is a really common thing that we see going on. We also can be lying in bed stiff and tense, and just feeling like we've just got this physical tension in our body, like our body is really, really stiff. That could be related to low GABA. That can cause anxiety, it can cause sleep issues. I want to just touch on the benzodiazepines here because I think this is a perfect lead into it. A lot of people are using benzodiazepines. And if anyone doesn't know what that is, it's Ativan, its Valium; Xanax, those are commonly prescribed for anxiety and for sleep.

And the problem with them is that they tolerance develop, so you need more and more, so you go higher and higher. Then you get to the point where they're just not working. And then if you want to try and stop, you can have really, really difficult withdrawal symptoms. So they are a class of medications that are supposed to be prescribed for two weeks maximum, in an acute situation, and people are prescribed them and just stay on them indefinitely. So it's a big issue. The other thing is that it may be prescribed for a dental procedure for pain, and then it starts to cause anxiety and it starts to cause insomnia. So it can actually start to make the symptoms even worse.

So, the reason I am just so excited about sharing the work that I do is because there's a better way and that's using targeted individual amino acids. And you know, this is part of my story, I got into this because of my own anxiety. I had anxiety, panic attacks, insomnia was part of my picture. So I've lived it. And I know there's a better way to do it. And these amino acids that we're going to talk about today and balancing our neurotransmitters are amazing because it's getting to the root cause and it's addressing that root cause. And it makes it simple and it makes it very effective.

Misty: So one of the things that I really love about your work is that you approach, I think, the whole idea of healing in a similar way that I do because I've been a patient and had a really big struggle with my own health. There's two aspects to healing, in my mind. The first is, how do we get stabilized enough in our like broken, not perfect condition that we have the resources and the fortitude to be able to go after the root cause? And then of course, the other side of that coin is not being content just with temporary stabilizing, but really going deep after the root cause.
And I've heard people talk about how they want to deal with their anxiety issues or mood disorders, or depression, without anything. Like, "I want to figure out how to do this without anything." And women do the same thing when they're dealing with energy issues and weight issues. It's like, "I want to figure it out without taking any hormones." "You know, I just want to do it the natural way."

And the hard part about that for all of us really, is that once your body hits a point of degeneration, it's like this super slippery slope. When you're dealing with a lot of anxiety, perhaps or one of these other conditions and you're not getting the sleep at night, like your body's healing potential is severely compromised.

So, one of the things that is so intriguing to me about amino acid therapy is that there's a dimension of it that's intended to stabilize us right now. And I'd love for you just to talk a little bit more about that because part of your work is let's get stable and then the other part is going after the deeper stuff. Could you differentiate those two areas for us?

**Trudy:** Well, using the amino acids gives us that sense of ease, so then it's much easier to make the changes. And sometimes we've got to make bigger changes, like get off gluten or get an autoimmune paleo diet and those are big changes to make. Getting off coffee, I mean, we haven't even talked about coffee and that's a big, big factor with sleep. And for some people, just the thought of having to give up coffee is just too much. You know, "I can get off the sugar. I can get off the gluten but don't tell me I need to get off the coffee." "My cold dead hand," yeah.

If you are feeling overwhelmed and stressed, and sometimes you feel like you're a perfectionist, you're not going to get anywhere. You're just going to be stuck. You're not going to be able to make any of those changes. So that's why I like using the amino acids. And when I keep talking about these amino acids, I'm talking about GABA for low GABA symptoms, I'm talking about tryptophan for low serotonin symptoms. And when they these are both low, it affects your sleep and it affects your mood, and it affects how overwhelmed you feel. So if we can get to the root cause, I think that is what we absolutely want to do.

But going back to your point about wanting to do it on your own, think about the glass being half full and having holes in the bottom. So whatever you're putting in there is just sort of dripping out the bottom. If you've got low GABA levels, you want to top up your GABA levels, so you want your level to be going up. But you also want to be plugging up those holes.
So using an amino acid supplement like GABA will top up those levels. And then in order to plug those holes at the bottom, so you're not leaking it out, so to speak, is addressing the gluten, addressing the stress levels, making sure you're getting out in nature, and all of these other things.

And addressing gut health and everything else that you're going to hear about on this summit, because there are many root causes for insomnia. But what the amino acids do is they give you quick relief. So now it's easier to make all those other changes. And they also give you hope because if you haven't slept for a long time, if you've been feeling this sort of overwhelm and anxiety for a long time, it's exhausting. It really is. But if you can get some immediate results, and it'll give you hope, and then it makes it easier to make all the other changes.

Misty: So, why don't you talk to us a little bit about GABA and tryptophan in particular? Because you just said that both of those things have a set of symptoms that go along with them that kind of indicate that those are the paths you might want to explore. Why don't you take us down those two roads?

Trudy: Okay, so if you have low GABA, you're going to have a set of symptoms. It will be the physical tension. So I described someone lying in bed, feeling very tight. So you may just feel like your shoulders are tight when you're lying in bed or when you're sitting during the day, and you've just got this physical tension.

And you can really feel it in your shoulders, you might feel it in your gut, you may feel like you've got this sort of feeling in the pit of your belly. The sleep problems are very commonly related to low GABA levels. The other thing that we see with low GABA is there's unwanted thoughts. And we always have associated the sort of ruminating thoughts with low serotonin but a recent study actually showed that low GABA can cause unwanted thoughts.

So if you've got these unwanted thoughts and you're just lying there, and you can't sleep, you want to be thinking about GABA levels. The other thing that we see with low GABA is this need to self-medicate in order to feel calm, and a lot of people will use alcohol. So they'll use wine at the end of the day. Come home, end of the day, totally stiff and tense, totally overwhelmed, and they've got to have a glass of wine. And then they have another glass of wine and then another glass, and that may lead to a whole bottle of wine in order to relax, and may lead to self-medicating with alcohol when they're out socializing.

And a lot of people will use alcohol or wine in order to sleep. They think, "Well, it's going to knock me out and then I'm going to sleep really well." There's a
number of issues with using it for this way. Firstly, we self-medicate, so we're using it like a drug. And it's helping us to sleep or feel better and we don't want to be doing that. We want to get to the root cause and GABA in this instance is one of the possible root causes.

But we do know that alcohol can actually make sleep worse and alcohol damages the gut lining. It has a huge impact on the gut lining. So it's actually causing leaky gut. It's causing nutritional deficiencies of some of the same nutrients, like zinc and vitamin B6, and magnesium; that we may need in order to make our neurotransmitters. So we don't want to be going that route.

So now, what do we do? We look at the symptoms, the low GABA symptoms, the physical anxiety, the insomnia, they're feeling really, really stiff, and the self-medicating. And we say, "Well, how do we score on a scale of 1 to 10?" 5 out of 10, 10 out of 10? And then use a trial of a GABA supplement, and see how it improves. And I do a trial and when I say a trial, we start on the lowest possible dose. We try it and we see how we feel. So, if someone is saying, "Well, I'm feeling very physically tense, and it's a 9 out of 10," use the GABA and we should see it go to maybe a 5 out of 10. That's a good sign. That means that we need the GABA to help raise our GABA levels.

And there's so much research on GABA that's coming out now, Misty, it's pretty amazing. Research on using GABA alone, GABA and theanine. Theanine is another amino acid that helps to raise GABA levels; so, using those in conjunction. Using GABA and 5-HTP, and we'll talk about 5-HTP and tryptophan in a bit when we talk about low serotonin. But this combination of using these amino acids or using them individually is amazing for getting results. And the important thing is to use them in a targeted, individual way.

So I see a lot of people in your community saying, "Oh, GABA was amazing for me, it really helped me sleep," and everyone thinks, "Oh, it's going to work for me." You need to figure out if your issue is a low GABA issue. And if it is, then do the trial. And then figure out the amount that's going to work for you because what might work for somebody else may not be the right amount for you. You may need a very small amount, you may need a higher amount; you may need just GABA on its own. Or you may need the combination of maybe GABA and theanine in order to sleep. So I'm going to pause there for a second and see if you've got any questions and then I'll go on to the low serotonin type of sleep issues that we see.

Misty: Yeah, keep going because I'm going to have questions at the end but we're going to compare these a little bit to each other.
**Trudy:** Okay. So the low GABA is the physical tension. With the low serotonin, it's the busy mind. You mentioned that earlier; that you just lie there and you can't switch your mind off. You can't stop thinking about things. You're reprocessing, you're ruminating. So, together with those type of symptoms, with low serotonin, we have the insomnia. So that's a classic with low serotonin and the reason being is that serotonin is converted to melatonin, which then helps us sleep. So you've got to have enough serotonin in order to produce enough melatonin.

The other symptoms that we see with low serotonin are the afternoon and the evening cravings. So you may use sugar or carbs later on in the afternoon or the evening in order to self-medicate, in order to feel happier. And some people feel like it helps them sleep as well. We also see PMS, any kind of hormonal imbalances, perimenopausal symptoms, irritability, anger issues, the low mood, the winter blues, the perfectionism, the negative self-talk, the imposter syndrome, "Who am I to be doing this?" These are all classic signs of low serotonin. So if you have all of those signs and you also have insomnia that could be a clue that you need to look at your serotonin levels.

And again, I'll have my clients look at the questionnaire, rate their symptoms on a scale of 1 to 10, and then we'll do a trial. And the amino acids that we use for low serotonin are tryptophan, it's one of them, and then the other one is 5-HTP. I mentioned there's some studies showing that GABA in conjunction with 5-HTP has been shown to help with insomnia. And by the same token, GABA with tryptophan could help. And it's very common to have both low GABA and low serotonin. So, using both GABA and tryptophan or GABA and 5-HTP makes total sense.

What I do say is when I'm doing a trial with one of my clients, and if you're going to do this on your own, make sure that you do one at a time because then you're going to know, "When I take the GABA, this is how it makes me feel. When I take the tryptophan," or the 5-HTP, "this is how it makes me feel," because if you do them both at once, you're not going to know which is working.

The other reason why we want to do them one at a time is we start at the lowest dose and then we increase. So maybe we start at 500 milligrams of tryptophan at night. And wow, it's helping us sleep but it's not quite enough. So then a week later, we might go to 1,000 milligrams and yes, we're sleeping a little bit better but it's not quite enough. Then we might increase to 1,500 milligrams. So we slowly but surely go up and up, and up until we find what's going to work for us. And this is where this term, targeted individual amino acids come in.
And then what's going to happen is that boosting our serotonin is not going to provide enough for making melatonin. And if we're not quite getting the results that we would expect by boosting serotonin in this way, then we may add in melatonin. And I can talk about melatonin in a second and how we would do that, but that's where I start with my clients.

And I'm primarily working with people with anxiety but keep in mind, they've also got insomnia as well. If you don't resonate with the term anxiety, as you said, Misty, when we first connected, you just didn't resonate with the term anxiety, that's fine. But if you have got insomnia, it's really worth investigating whether low GABA could be one of the root causes or low serotonin, or a combination of both.

**Misty:** So if someone is experiencing a lot of external stress in their life, and or there's a lot of hidden internal stressors in their life. How is that going to affect their need for GABA or tryptophan? Is there a connection there?

**Trudy:** There absolutely is because stress depletes us of nutrients. And in the introduction, you actually mentioned pyroluria, which is one of the conditions that I work with, which is a social anxiety condition. And with pyroluria and the social anxiety condition, you prefer interactions with one to one conversations, rather than being in big groups. You may resonate with being an introvert, you have this morning nausea and you get like joint pains and aches. Not wanting breakfast first thing in the morning, [inaudible].

Now with this condition, if you are under a lot of stress, you actually dump really high levels of zinc and B6. So the two nutrients that really help with the social anxiety condition, together with a number of others, are zinc and vitamin B6. Now these two nutrients are needed to make GABA and are needed to make serotonin. So if you happen to also have pyroluria, and in my community of anxious women, I would say 80% possibly have pyroluria or have a high need for zinc and vitamin B6. And both these nutrients are commonly deficient, certainly zinc is depleted by sugar, depleted by caffeine, depleted by stress, depleted by exercise as well. And often low in our diet. So, yes, outside stressors, internal stressors, can definitely have an impact on lowering some of those raw materials that we need in order to make GABA and serotonin.

**Misty:** So what you're saying right now is I'm connecting to the interview that we're doing at this event, with Dr. Dan Pompa, where he often talks about upstream stressors. But in my own experience, I've had a few of those upstream stressors in my own life.
Number one, I remember in, I think, 2013 or so, I had mercury fillings improperly drilled from my mouth. So I have like this heavy metal toxicity. I did not connect the dots on that until 2018. So I knew that something happened because I gained 45 pounds in like four months. This was after I had just radically cleaned up my lifestyle. So this was out of the blue and totally unexpected.

And I found out last year that I had an infected root canal in my mouth. And there's a whole lot of other things that can be stressors that we don't even know we're dealing with. And I'm just connecting the dots here a little bit in my own mind, on this connection that these stressors could have to our need or our opportunity to benefit from amino acids.

I'm thinking of some phases that I went through in my own healing journey where sleep was really elusive. I could go to sleep but I couldn't stay asleep, for example. I would constantly wake up in the night and not be able to get back to sleep. Or I've gone through phases where I couldn't get to sleep and I wish I would have known.

But there's a few things, if you find yourself experiencing that, I just want to invite you to consider the fact that there could be some upstream stressors that you can deal with that can be helpful. And in the meantime, oh, my gosh, Trudy, what you're sharing here is like a lifeline for so many people who are really depleted and don't have the tools to do something about it today, so that they could start getting their sleep back.

**Trudy:** Yeah, it really is amazing. And that's why I call them the amazing amino acids because they're giving you that relief. They're giving you that respite. They're giving you hope. And now you can think, "Ah, okay, now I can deal with all the other things." And we don't want to just do this, we've got to look at the diet, we've got to look at the upstream things. Like if you've got a root canal or you've got some kind of infection or you've been on a benzodiazepine, that's going to have impacts but it's going to give you that respite. So now you've got the wherewithal to say, "Okay, phew, now I can start to deal with it," and then you're sleeping better. Which is great. It really is.

I wanted to touch on something where you said you would maybe fall asleep and then you'd wake up in the night. Now that can happen with both low GABA and with low serotonin. And I mentioned how we want to go up and up, and up until we find the ideal amount. What you can do until you're finding that right amount, is if you wake in the night you could take a little bit of GABA, if low GABA is your issue. You can also take a little bit of tryptophan in the middle of the night if low serotonin is the issue. Now, if those aren't the
root causes, they're not going to help, but it's a way to try to see if they are going to help.

What we really want to do is get to the point where we're not waking in the night. And the way to do that is to find the ideal amount to take before bed and then that should take you through the night. Now there's many reasons why we might wake in the night, parasites can definitely cause us to wake in the night, so we do have to deal with that. But getting that right amount of the GABA or the tryptophan is going to start to fix that as well. Then the other thing I mentioned when I was talking about low serotonin is this fact that it converts to melatonin and helps us sleep.

So I'll always start... you know, I'll have someone do the questionnaire. We'll see that they've got these low serotonin symptoms, the ruminating thoughts, the worry, the sleep problems, the sugar and the carb cravings, the PMS, irritability, and we'll say, "Okay, let's have you start with tryptophan." We'll do a trial.

And keep in mind when I'm doing the trial, I'm having my clients open up the capsule, and putting it on their tongue because that is the most effective way to determine very quickly if it's going to work. So I'll always start with tryptophan. If that doesn't work will then switch to 5-HTP. And keep in mind 5-HTP can raise cortisol and high cortisol can be a trigger for insomnia.

So if you do know you have high cortisol, I would definitely start with tryptophan. But if we're not getting the results with maybe the tryptophan or the 5-HTP, or we're getting some results but not quite enough to help us stay asleep, that's when I would add in melatonin because maybe the body's not converting serotonin into melatonin in the most effective way.

So we'll start with a sublingual melatonin at bedtime to help you fall asleep. So if falling asleep is a problem then the sublingual melatonin is the way to do it. If you are still waking in the night, then I'd use a time release melatonin because what that's going to do, it's going to release the melatonin slowly over the next few hours and that can help people stay asleep.

And melatonin is amazing. I know it's had a little bit of a bad rap. I'm sure you've got other speakers talking about this on the summit. But a lot of people are a little bit concerned about taking melatonin long term and that's gone out the window. We know now that melatonin acts like an antioxidant, it's used very effectively in cancer treatment.

And if you have low levels of melatonin, why not use melatonin to up those levels so you are going to sleep? And interestingly enough I love to always
share the research. But there was a really interesting study that talked about melatonin for sleep disturbance, after a traumatic brain injury.

So if you've had a concussion or you've banged your head, maybe snowboarding, adding in the melatonin can help with that sleep, and it can help to start to heal some of that traumatic brain injury. And in the same study, they found that it actually eased anxiety as well. So it's helping to raise the melatonin levels. It's helping to sleep. It's starting to heal from a TBI and it's also helping to ease some of their anxiety. So I'm a big fan of melatonin.

**Misty:** Yeah. So, talk to us about any dangers that might be associated with taking 5-HTP or tryptophan or GABA, or even melatonin. Is there anything people should be aware of? Is there dangers to taking these things long term? Can some people have a certain kind of reaction that they should be aware of, just in case?

**Trudy:** I'm not concerned about melatonin, as I just said; so I'm fine with melatonin. With tryptophan or 5-HTP, there we do need to be aware that there is this contraindication if you are taking an SSRI, so a selective serotonin reuptake inhibitor, which is one of the classic antidepressants. There is a potential for serotonin syndrome.

So if I'm working with someone who's currently on an antidepressant, I will have them talk to their doctor about adding in tryptophan or 5-HTP. So the doctor can monitor. And I'll only work with someone in adding in tryptophan or 5-HTP if they're on one SSRI. If they're on multiple issues SSRIs, then we don't even add in tryptophan or 5-HTP. There's just too much of a potential issue with serotonin syndrome.

And then if they are using their SSRI at night, we'll get permission from the doctor to switch it to the morning because we want to use tryptophan or 5-HTP mid afternoon and evening because that's when serotonin starts to take a dip. So, getting permission from the doctor, moving the SSRI to the morning, and then doing it six hours away from the SSRI.

So if they're doing the SSRI in the morning, they could potentially use their first dose of tryptophan at 3:00pm, which is perfect. But as far as the benzodiazepines and using GABA or the SSRIs, I have not seen any research to say that benzodiazepines and GABA are a problem. And I have not seen any issues with any clients as well. So GABA can be used safely with a benzodiazepine and tryptophan can also safely be used with benzodiazepines.

**Misty:** So if you're going to use any of those, GABA, tryptophan, 5-HTP, or melatonin, are you...? My assumption... we've started talking about this;
because we're talking about doing this for bed and sleep, my assumption was you would take these things at night. But then you just kind of threw in that afternoon thing. So I want to get clarity from you. Is there a timing recommendation of when we take these supplements?

**Trudy:** Yes, and it depends on when you have symptoms. So let's go to the low GABA. So if you wake in the morning and you've got physical tension and you have tension throughout the day, and then you also have tension at night, you could take GABA throughout the day. So the dosing is between meals, away from protein, GABA first thing in the morning, mid-morning, mid-afternoon, and then at bedtime. Maybe you need just a small amount throughout the day, of the GABA, and then you need a higher amount at night to help you sleep. So this is where the trials come in.

So you start at the lowest dose and with GABA, we want to start low, 125 milligrams. A lot of people will run out and buy 500 milligrams or 750 milligrams of GABA and that's way too high for the average person. You may build up to that amount, certainly at night, but to start off in the day, 125 milligrams. And for GABA, sublingual is the best to take across the board, always. Not just during the trial but just always take GABA sublingually, it gives you the best results. So, GABA throughout the day. If you're finding its making you too sleepy in the day or too relaxed, a lot of people don't need to... you know, they don't worry about feeling too relaxed. "Yay, I feel relaxed," it's not often an issue I see.

But if you take too much it can make you feel too sleepy and too high a GABA amount can actually give you a niacin type flush. So if that's happened to you and it's put you off, definitely consider starting again with a very low amount. As far as supporting serotonin, the ideal timing is mid afternoon and evening.

And why we do mid-afternoon is because as I said, serotonin starts to take a dip at that time, and we want to start getting the body to start making enough. So we would do mid-afternoon dose, 500 milligrams is a typical starting dose for tryptophan. 50 milligrams as the starting dose for 5-HTP. And then also at night.

And you may end up with 50 milligrams of 5-HTP in the afternoon and 100 or 150 milligrams at night but start low, and then build up. And you may find that you need to increase it in the afternoon as well or you may just need to increase it in the evening, if sleep is an issue.

Now, some people need serotonin support earlier in the day, it's not very common but it does happen. And if that's the case, we may add in 5-HTP earlier in the day and then have tryptophan in the afternoon and the evening.
So there's no sort of strict protocol. There's these guidelines that we follow, but it's a matter of trial and error to figure out what's going to work for you. But that's a really great point.

And all of them are taken away from a protein containing meal because otherwise, it's going to compete for absorption with the other amino acids in that meal. Now, 5-HTP is a little bit different. 5-HTP can actually be taken with protein but it just gets confusing, so I usually just say take it in between meals and that's the easiest way for folks to remember.

And it may sound complex and it may sound like, "Oh my gosh, I'm going to be taking supplements four or five times a day," but I found that my clients are so willing to do this because they feel so good. You know, they just feel so great and it's not a chore because you're getting this immediate feedback. You're getting these immediate results.

You know, if you stop you're going to feel the anxiety come back, you're going to feel the tension come back, those ruminating thoughts are going to come back, the sleep is going to get bad, and then you just add it back in again. With the amino acids, there's no taper protocol to get off of them. Now, some of my clients will just say, "You know, I went on holiday and I forgot to take my aminos and I did great." Okay, great.

Now it looks like you've repleted your levels. Or maybe they say, "I am going on holiday. Do I need to use these four or five times a day?" and we decide, "Okay, maybe try two a day and twice a day, and see how you feel." So that's a great thing. There's no taper protocol and there's no side effects while you are tapering.

**Misty:** So you said something that was pretty intriguing, actually, in another interview I did with you, and then you mentioned it again. And I just want to draw a little bit of attention to it because my partner has that restless body. He really can't get comfortable at night, some nights. And I've actually heard other friends talk about that. And I wouldn't think of that as being connected to anxiety or connected to a mood anything, an emotional anything.

But the way that you talk about them and link them together, I'm seeing that there's something going on physically that maybe looks a little different than something that we're feeling, but it can be treated similarly. So I'd love for you just to take a minute to unpack that a little bit more for those people who find that they just are really restless at night when they sleep. It's not necessarily their mind ruminating but their bodies just can't get comfortable or settle down.
**Trudy:** When I hear that it's not the mind but it's the body, I straightaway go to GABA. I would just tease that out. And you're right, some people may not say that, "I've got this. I'm not anxious. It's not anxiety. It's just this restlessness." So I would definitely look at that.

But then if it is, there's other causes of that. Certainly low magnesium can cause that. Low iron can cause that, like restless legs; so, if you actually have that restless kind of feeling. Food sensitivities could cause that. High cortisol, we've talked about high cortisol a little bit here, but if you've got high cortisol that can make you feel a little bit edgy and restless.

So I would start with GABA. And the reason I start with GABA and tryptophan is because you're getting quick results. So it's easy to say, "Yes, it is that, let's deal with it," or, "No, rule it out, it's not that. Now we can go and dig a little bit deeper." So I start with those initially when I'm working with someone. And the other thing that can cause that sort of restlessness is low blood sugar and there's an amino acid that helps with low blood sugar.

And if you've got low blood sugar, that can cause insomnia. It can cause you to not be able to sleep or it can cause you to wake in the night. Glutamine is amazing for both healing the gut and also stabilizing that blood sugar, while you're addressing everything else. So that restlessness, it's not clear what it could be but those are the sorts of things that I'd start looking at.

**Misty:** Awesome. So you've given me a total brain gasm again. Every conversation, this is so good, I'm just envisioning people listening to this and feeling like, "Oh my gosh, there's something I can do right now, immediately, to help with this situation. To help with what I'm experiencing." And your work is so important. It's so unique. I don't know of anyone else in our space that was having this conversation on an ongoing basis like you are and I love it, and I appreciate you for it. So why don't you tell people where they could find you online, if they want to learn more?

**Trudy:** Well, thank you for that lovely ending. And it's an absolute pleasure to always talk with you. And I love that you're sharing this with so many people and I look forward to the rest of the summit. I know you're just going to bring together so many amazing resources. If folks want to learn more about me, my book, *The Antianxiety Food Solution* is a great resource. There's a whole chapter in there on the amino acids, together with all the other things like gluten issues, making dietary changes, getting off caffeine. We didn't talk about that one enough but it's a big one when it comes to insomnia.

I've got a home study program for people who reading a book isn't enough and they want that guidance to walk them through how to make these things...
changes. And then I also teach practitioners through the Anxiety Nutrition Institute. And I'm really wanting to teach more and more practitioners how to use the amino acids because they are so powerful in helping your clients and helping your patients.

**Misty:** Thank you so much, Trudy. I appreciate it.

**Trudy:** Thanks. Thanks, Misty.

**Misty:** We'll see you guys.