

005 Clubcast 53121 Mollie McGlocklin

[00:00:00] Happy Memorial day, everybody welcome Molly to the weekly Eat happy kitchen clubhouse. I am so excited to talk to you. Oh, well, thank you. I, the feeling is mutual. I know we recently got connected in another clubhouse room and I was just blown away by your, uh, just fun play at ease. So excited for more. I mean, you think somebody, this fund would sleep really well.

Well, it's plaguing, uh, certainly plaguing the United States, if not, uh, extending further, so you're not alone. And yet there's a lot we can do. Well, this is great. I'm really excited to talk to you. I want to get all your store and everything, and we just welcome everybody. Who's coming in here. You guys jumped on right away.

I love it. Everybody's really excited to talk about sleep with Molly. Um, this is going to be freaking awesome. We're going to basically, I'm going to just kind of grill Molly. About her story about sleep stuff, tips. She can give us, make sure you're following her on Instagram. Make sure you're subscribing to her.

[00:01:00] Uh, podcast sleep is a skill.com is our website, and we're going to start talking about it. And then I'm going to start, you know, raise your hands. I'll bring you guys up when you come up, make sure you mute yourselves and we will get to hear everyone's voices who wants to have a chat with Molly. And if you have any questions for me, but you're probably sick of talking to me.

We want to talk to Molly. Well, thank you for being here. This is recorded everybody. If you do come up, you are okay. Agreeing to have your voice recorded. This will appear@annavaccinia.com under my, if you click blog, you'll see the club casts there. We're going to keep this to an hour. We're going to make sure we land this plane.

Thank you for joining us on a holiday. I know everybody's busy family stuff, or maybe you're just burnt out. We had guest this weekend and it was wonderful, but I'm also now chilling today. Back on plan, back on the program. Didn't sleep so well had some wine. We'll talk about that in a minute. Yeah, it's common.

So Molly. Okay. Introduce yourself to the good people here. Tell us how you got started in all this. What's what's your, what's your [00:02:00] journey. Yes, absolutely. And thanks again for having me here. Uh, my intention is definitely to provide as many practical takeaways for people in the area of their sleep. Um, so we'll get into all the goodies, but a little background on me.

Uh, you know, my name is Molly McLaughlin. I, uh, founded sleep is a skill to really, um, solve what I was dealing with with my own sleep, uh, which was for many years, um, living in Manhattan as a serial entrepreneur, burning the candle at both ends and, uh, had a lot of labels in the world of my sleep. You know, I'm a night owl, I'm a short sleeper, I'm a bad sleeper.

It's in my genes. It's this, it's that. And a lot of kind of fixed states about how, um, my sleep was. And it wasn't until I went through my own period of insomnia while traveling internationally. Uh, that really, it really was my rock bottom in my life. And it changed the course of my life because, um, At my lowest point, I went [00:03:00] to the doctors in Croatia and left with their version of Ambien.

And it was in that moment of, okay, something's got to shift here. And, uh, and so really went on this quest to solve my own problems with my sleep. And in restoring it, you know, certainly some, you know, a level of homeostasis, which as I've shared was not that great anyway, before, and yet then going from not only just how it was, but then bringing it to quantifiably, uh, you know, optimize levels and embarking on this, on this kind of journey to transform this area.

It completely shifted my experience of life. So like just couldn't stop talking about it basically. And, uh, and so from that place then started just organically sort of working with people that were also struggling and then it grew into. Small groups, online courses, one-on-ones podcasts, newsletters, uh, the whole thing.

And just a whole world's got created out of, um, something that I was struggling [00:04:00] with. And, you know, at one of my lowest moments was like, there should really be a sleep support group or, you know, sleep, uh, anonymous or something along those lines. And, um, you know, and just in that beginning then went to this whole other world.

Uh, but particularly for me, it was. Uh, really becoming fascinated with this realm of chronobiology circadian rhythm optimization. And I think just discovering that so many things that I had no idea would, uh, impact, you know, can impact the results when we're aiming to improve our sleep. I think a lot of people and many of our clients that have come through sleep as a skill, had no clue that some of these things would influence their sleep in a measurable way.

And that's a big element to us. We really bring a lot of tech into the mix there. Uh, so that's a little bit of background on sleep as a skill. Okay. Number one, you said Croatian. Ambien. Yeah. I'm Italian when I'm in Italy and I go to the pharmacy chia, [00:05:00] there's some shit over there. That's not the same as it is over here.

One of them is the act of fed or the Sudafed. It's like crazy. If you have allergies and you take the Italian act of fed, you might as well smoke some crack. So it was Croatian, ambient like a strong, even stronger version than what we have or what was that like? Yeah, so it was just their generic version of it.

And, um, so what it was was, uh, basically, uh, so then this was going into the doctors with Google translate, nonetheless. Um, so, you know, I'm not even speaking the language, uh, and then leaving with, you know, this, which honestly my experience was, um, because I was so conflicted about the taking of these things, because I had known myself to be, oh, I'm healthy, quote, unquote, air quotes.

Uh, and then to be going into, down this path of then taking, you know, hypnotic to sleep, um, was really a confliction of what I thought of myself. And yet at the same time [00:06:00] was desperate for sleep. And that's where I find so many people, uh, struggling with their own sleep is at this crux of, I don't want to be taking this thing or, you know, an a granted my story's a little more, um, on one side of the bell curve and yet most people can probably find themselves in experience of, oh, now I'm having to take supplements or I'm having to take melatonin or I'm having to take something, or I have to do a whole protocol to just, uh, you know, be able to turn off the brain.

And that was sort of my experience there. Okay, so, okay. I have a million questions. So let me see if I'm actually actually asking, let me see if I'm actually asking you the correct question. That's the beginning question. And you kind of got there in your last sentence. What is the very first thing we need to do?

And is it shutting off the brain? Like where do we even start? Is what's the first thing to prioritize. If we're wanting to get better? See, we just know we're just hammered, wake up, not feeling [00:07:00] rested, even if you have a great diet, but what would tell us where to start? Great question. Uh, and I will say that, you know, when we're struggling with our sleep, there can be a number of reasons, so it can help for us to get grounded in a couple of frameworks.

So we have. Two key frameworks that we operate within sleep as a skill. The first is the sleep tripod. So like any good tripod having workability within your psychology physiology and environment. Uh, and then our second framework is circadian rhythm entrainment, how to strengthen your circadian rhythm, no matter where your sleep is at.

Uh, and so there are a series of steps for both of those, but with the sleep tripod, that's kind of that overarching, uh, area it's almost as this level of, um, Getting clear on which area for you is more out of alignment or which area, um, out of, kind of that pie, do we need to take a look at the most, um, which they're all inter they all interrelate to each other.

[00:08:00] Um, but so example of, uh, the psychology aspect of things, has there been something acute that has happened, you know, lost a job divorce, um, you know, something, uh, a death in the family. Out or is there an end or a chronic level of stress that is in the background? So, um, has, has our sympathetic nervous system been kind of on overdrive versus that parasympathetic response?

Uh, so with that element, then some strategies and ways that we can lean into, uh, really helping to alleviate and train our body's ability to turn down the nervous system at will at certain points throughout the day, and that can lead into the night. Uh, so it's an element of that psychological aspects of things in the physiological, uh, getting a number of tests we have people lean into.

So are things out of alignment that, uh, it really requires taking a look at so common things, thyroid levels, iron levels, magnesium levels, [00:09:00] B vitamins, you know, a number of things that, uh, when we get connected to a lack of workability there, we can, uh, double down on that. Uh, that can aid in our quest to restore the sleep and then third environment.

So, you know, really making the argument that most of us in the west are having, um, our environment doesn't necessarily pull for great sleep. And that's not just in the bedroom, you know, many, um, top articles will say top five things to do. Uh, but instead we're also looking at what is our environment, really from the moment we wake up, because that will impact the quality of our sleep going into the night.

Um, and that relates to beginning with, um, our light to darkness ratio that we're achieving throughout the course of the day and into the night. Um, and are we having a really, uh, kind of profound, just difference of the amount of bright light that we're receiving at certain times of the day, and is it consistent and the moving

into dim to [00:10:00] darkness in the evening, uh, along with, uh, matching, uh, other indicators, a temperature and a few other things, and that is within.

That other framework of circadian rhythm entrainment. Uh, so to simplify all this it's one getting clear on really what's going on. And sometimes what I've found for a number of people, not all, but for a number of people, even leaning into some of the consumer grade wearables that are out there can at least get us a sense of where we're stacking up, like where some of these numbers are so that we know, okay, so I'm averaging X amount of sleep per night.

Um, my respiratory rate is here. My heart rate is here. My HRV is here. My, you know, body temperature, blood oxygen, a number of things that can help get us a sense of is something, uh, really deviating from the bell curve of what we're normally seeing. Uh, and then from that place, then we can start to go in deeper to further optimize for exactly what each person is dealing with.

Because if [00:11:00] we say. Oh, you know, just relax and meditate to someone who's having a sleep apnea. And, you know, really having these apnea is multiple times throughout the night. We're going to breathing, you know, a little bit of lavender. Isn't gonna make a big difference.

I mean, lavender's absolutely delightful. Wonderful. Yeah, no, it's great. But yeah, no. And listen, and in the nsng community, no sugars, no grains. That's started by Vinny charter at Hsu is not here today, but I'm sure he will hear this at some point. We, you know, we've been podcasting about this for nine years and a lot of people do have a lot of success when they change their diet with their sleep and fixing the sleep apnea, but not always.

And it gets, it gets to a point where it's like, okay, I never poopoo things like aroma therapy because it's absolutely delightful and whatever res I'm sorry, lowers your, your, uh, pulse is a good thing. You know what I mean? But, but a lot of us are we're way past the [00:12:00] lavender stage, even though I'll put, I'll put it in any bath and I do it in the diffusers and that's great, but yes, I agree.

So, yes, exactly. To clarify. Definitely, you know, aroma therapy can be huge and a game changer for so many people. Um, and it's just, you know, case by case basis, but there's really egregious, um, things that are happening in the background, in the realm of sleep disorders, uh, you know, just kind of different categories that we're looking at.

So really good clarification. Do you, and I, you know, I'm kind of lobbing you a softball here, but I, cause I know I've seen your and listened to your podcasts. And so I know that you definitely have a lot of people on about. Low carb or cutting out processed foods and sleep. Can you talk about the correlation between those since then?

A lot of folks we're all here because we're in the low carb community. Yes, absolutely. Um, so a couple of things we have, um, uh, we partnered with levels health to do a little focus group on [00:13:00] overlaying, um, participants with aura rings and, uh, uh, CGMs. Um, so using their Libra and, uh, Really discerning when, uh, when there would be spikes in people's glucose and correlations between that and, um, either difficulty falling asleep or staying asleep, but particularly

those wake-ups, um, and we're able to correlate some, and this is, you know, this very small group size, but, uh, at the same time, it was quite interesting to go in depth and see, um, from a miserable perspective of the difference that just the choice in, um, our foods can make.

And we also, uh, could see certainly with the timing aspect of things. So, you know, what we look at is the timing of that, the food, the volume of that food and that type of food as you're pointing to, um, can really make a big difference for, uh, also even just the basics of, uh, thermoregulation for our bodies, uh, ability to [00:14:00] cool down before sleep, which is, uh, what's known as a zeitgeber time giver for.

Um, our body's ability to know that it's time to fall asleep and so make it a bit more automatic. So we're not having to struggle so much to fall asleep. Um, but then also that ability to access deeper, um, periods of, of that sleep architecture, but particularly within deep sleep on the first half of the night versus being distracted with having to digest.

Um, and you know, some of those things where the timing, uh, can apply to really any type of food, but particularly, um, we would find really great results for people that especially we're measuring the continuous glucose monitors and leaning into a bit more of a low carb lifestyle or one, uh, that would facilitate, uh, less of that rollercoaster effect of that glucose.

Because then as we know, less of that dropping throughout certainly the day and the, um, The impact that can bring about from anxiety levels, but with [00:15:00] sleep. Um, what appears to be the thinking is that when we're having some of those glucose drops throughout the course of the night, then it's, uh, having the body respond in terms of cortisol and adrenaline.

And so those can be the type of wake-ups where we're not only just we woke up and, and we can go back to sleep, but it's a type where we wake up and now we're like up, uh, because the body was, you know, um, having that stress response. So that's one of the aspects that can be really, really interesting, uh, as it relates to food and sleep, and then, uh, getting more nuanced on the types of foods and your sleep results.

That is fantastic. And I could not relate more, especially to the waking up. And then you're like, well, I'm up. And so, and I know myself well enough to go. Let's just get up and start reading books and stuff. Instead of trying to lay here. It's rare that I can do a nice little meditation to get myself back to sleep when that happens.

And I don't know, I have no idea if it's a blood glucose thing. If it's a [00:16:00] perimenopausal, I have no idea. So let me ask you this. For those of us who are doing keto slash low-carb slash nsng, what is a mistake we could still be making with our diet? Is there anything like eating too late? Like what's something we could try to experiment with now tonight.

Yes. Well tonight, depending on where you are, you might be past this threshold that I'd throw out to people. Um, but it can really be a real game changer if you can start to experiment with it. And of course, you know, uh, in alignment with

your, your health and, uh, how this would fit for you, but four to five hours before bed looking at what, uh, could be possible if you're stopping your last bite of meal within that time range, which for many people, they start counting backwards and they're like, whoa, okay.

That would be really early. Um, and the difference that that can often make from a measurable perspective on, um, and this is again why I often lean into these wearables because it can help us make sense [00:17:00] of, uh, you know, a large amount of information. Uh, that we might be putting into our, into our body from a day-to-day basis from a behavioral perspective.

Um, but then to be able to notice, wow, okay. I had a drop in my heart rate by around 10 beats per minute, throughout the course of the night on average, just from moving back that meal timing on the earlier side of things, um, And there's two, uh, if people want to look more into this, there's, uh, two things that they could look into, um, circadian, rhythm, intermittent fasting.

And so that's looking at, uh, eating the bulk of your food between sunrise and sunset. If you use like zero app, um, you know, for intermittent fasting or things of that nature, you can kind of game-ify and they have selections on circadian, rhythm, intermittent fasting, and then there's also early time restricted feeding, which even often has us go a little bit earlier than, um, cause you know, within sunrise and sunset, just depending on where you are on the globe, uh, you might have.

Well longer or shorter period of [00:18:00] time by which he could conceivably eat. Um, but within early time, restricted feeding, you're often going that more into like, you know, the early bird club of when you're having your last meal. Uh, and we've also found alignments with that as it overlays with continuous glucose monitors, um, of often just, you know, moving up the, so maybe, and this is, these are blanket statements because different people have different, um, You know, bedtimes and what have you, but some common throughout sort of exploring with a five o'clock, six o'clock, uh, you know, type meal time, uh, just as a basic element of things, but sometimes playing with earlier, seeing what happens there.

And again, if you are able to measure, uh, so that you can, because it is outside the bell curve of, um, you know, kind of social, how we operate as, you know, social society. Uh, so it often does take something. So the more you can see the results from your trackers, they often the more applicable people are to making this difference.

[00:19:00] HRV, if you do measure heart rate, variability is particularly a metric that seems to, um, often respond favorably to this one, along with that heart rate. Okay. This is awesome. I okay. I know. We're, we're going to want to talk about the wearables in the woop in the aura and the apple watch and the.

Continuous glucose monitor CGM. That's the initials I was looking for. In fact, Nutrisystem just sent me one. So I'm very excited to try that out and I kind of want to get all of it. My biohacking wearables dialed in, uh, real quick. Let me tell you guys, you're in the eat happy kitchen club and we are talking with Molly McLaughlin who is@sleepasaskill.com.

Make sure you're following her on Instagram. She is the sleep expert. She's here, uh, dropping some knowledge bombs on all of us, and we really appreciate that. Thank you for being here, Molly. We, uh, if you guys have questions, raise your hand, come up, mute yourself. We will definitely get to questions. We still have a good 40 minutes left.

And I, even though I have a million questions, I'm sure you guys do too. So let's keep [00:20:00] going. Let's go ahead and go into the wait, let me start here first. Before we go into wearables and that stuff, two questions. What, how do I phrase this? What supplements do you prefer for sleep aids? And, or do you have some sort of system that we can like take a quiz or something to figure out what would work for us?

It's the most simple way I can.

I love that one. Yes. Um, on the supplement side of things, uh, interestingly for us often, we aren't getting quite into the supplement topic until, uh, we've gone into a bit more of the behaviors just because, um, it can often be a tendency for so many of us to want to get. You know, uh, the, take the, something to, you know, make the difference with their sleep.

And yet, um, there are so many behaviors that we can often put in to make a [00:21:00] difference. And, uh, there's absolutely unequivocally that tendency for us to want to also see what else could we do to bring in, to make a difference where maybe our sleep is not that bad. And we like to see how to Uplevel. Um, and there are times I think this is definitely where we go into the, um, tests don't guess a side of things, because from the supplement perspective, there can be certain things that we take as supplements that can make the difference, um, for people and really, really bring things around.

So, um, I would say there can be some of those individual from a bio individual perspective. So, you know, leaning into a lot of these, uh, the ease by which we're getting for testing, taking a look at that. But, um, from a more blanket perspective, couple things that we tend to lean into for, um, the, you know, the masses, uh, certainly magnesium I'm sure many of you have, um, experienced or heard or experimented with some of those.

Uh, so there's different types of magnesium. Um, so for us, [00:22:00] it's often, uh, uh, magnesium glycinate. And then, um, particularly upleveling that it's certain times when we are, our stress levels might be heightened, uh, or getting those from different if we having difficulty, um, you know, for the body fully absorbing that.

So we can also do transdermal oils, um, Epsom, Saul, you know, number of ways to kind of get that in there. Uh, then we can also lean into some, uh, that can be more on the relaxing side of things. Um, you know, , uh, looking at, um, some individual ones for different people. Um, people have been experimenting more with the, you know, the mushroom side of thing lions made and, uh, Rishi and a number of, uh, items there.

Um, but so you can start to get more and more nuanced, um, on those items, if you're dealing with, uh, lots of stress, uh, and you know, an anxiety aspect of

things, looking at things like ashwagandha, um, But, you know, so [00:23:00] those are some basic items and of course, you know, uh, checking in with, uh, ensuring that, that doesn't, there's no counter indications on what you might be dealing with, but, uh, the same time, those are some basic things that you can do to make a difference, but also just seeing how you can layer those in with a number of behavioral and environmental shifts.

What about CBD? Do you have people work with CBD CBD? Yes. Can absolutely be, uh, really, really powerful for a number of people. Um, often it's playing with the dosage for people and finding the workability there, uh, and. With CBD, um, you know, shipped, uh, ensuring that, uh, the ratio that you're getting, if there is any THC in that being mindful of the effects that that might have for you, because as we know, CBD, uh, THC can often help with the falling asleep aspect of things.

Um, although there are some concerns around the [00:24:00] quality of that sleep architecture throughout the rest of the night. However, you know, can be often, these are tastes.

Oh, hello. Did we lose you? Or did I lose myself? But for CBD specific, if you're just looking at CBD. Um, there are a lot of exciting things in the realm of CBD and how that, uh, seems to be helping, uh, because there's still a lot of questions as to why. And there hasn't been a ton of, um, kind of peer reviewed studies just for funding purposes and, you know, a number of reasons.

There are some but not, um, still not a ton yet. And so there is a lot of kind of anecdotal, um, information, but, uh, there can also be life-changing stories of people being able to, uh, get off of reliance on some, um, you know, sleeping aids that have certainly we're not serving [00:25:00] people, uh, in their case, uh, in their cases and using that can really make a difference for them.

So just, uh, testing often with that low and slow method of the dosage for people, but also testing it throughout the course of the day, too, if, um, anxiety and that chronic anxiety seems to be a problem. Uh, I have found for me personally, I don't care for THC, but CBD. When I take it at night, it helps me have that more body relaxation where I can help get myself back to sleep.

Should I wake up? Like I still wake up, but I can get back to sleep a little faster. But I also think that I have this kind of crazy theory where I'm like, if I just exercise really hard during the day, I'll be so tired, I'll get right back to sleep. So what about, what about exercise or a daily, like D is it cardio?

Is it lifting? Is it what, what's the best thing for sleep? Yeah. Um, okay, so to bring it back to [00:26:00] that circadian rhythm entrainment framework, um, well, yeah, let me, yeah. You this too. Cause I was going to say, how do you figure out what your circadian rhythms are? So answer all of those questions. Thank you.

Okay. We got it. Okay. So first of all, So, uh, kind of understanding that our circadian rhythm, if it's this rhythm that, uh, operates around 24 hours each day, uh, I think what can be really interesting for a number of people certainly was for me and a number of our clients is that this concept that we can strengthen our circadian rhythm, um, you know, by, uh, by measure of the number of things that we influence in our environment and our behavior.

So, um, And we can also weaken it. And so many of us have when we are struggling with our sleep, if it is in the realm of, um, uh, our circadian rhythm, you know, kind of not functioning in the way that we would like it to just have that level of automaticity, uh, then there, there can be elements where there's a weakening, uh, there.

So what could be possible is then [00:27:00] to strengthen that's repeating and rhythm. So what do we do there from that circadian rhythm entrainment framework? The top-down most important thing there is actually light. Uh, so the timing of our light and that's starting in the morning. Um, so that one of the very, very, very first things that you're doing first thing in the morning is getting outside.

Um, but not from behind a window, um, because certain, uh, studies point to that taking anywhere from 50 to a hundred times longer for us to reset our master clock each day, if we are getting that sun or that light from behind a window. Uh, so ensuring that we're getting outside and not with sunglasses or hats or any of that sort of stuff, um, that we're really exposing our eyes specifically to bright light.

Um, and how do we do that safely? Yeah, good question. So one, you're making sure you're doing that in the first half of the day, which is sun is very different. Um, on the, you know, the first set when we're saying first half is, you know, uh, we do have to bear in mind that people are shift workers or [00:28:00] what have you, uh, that there is another conversation there, but if we're in, if we're getting that sunlight, usually before that 10:00 AM, um, spectrum is kind of that cutoff when this, the power of the sun shirt's really shifting.

Um, but really within our goal is within, around the first 30 minutes of waking is what we're looking for. And the power of the sun is very different at that period of time. Um, and of course you don't want to stare right at the sun. You don't want to do anything of that nature. Um, but you do want to expose your eyes specifically because it's connected to our super cosmetic nucleus, which is our master clock for our, for our body to set that, um, circadian rhythm.

Uh, each ER, it's basically a master clock that sets each day. So the reason we talk about that first thing in the morning to impact when you're falling asleep and the ease by which you fall asleep at night. And the timing of that is that the timing of that first shot of bright light is then either phase [00:29:00] advancing.

So making us sleepy earlier, if even getting that light earlier on in your day, or if you're not getting your first real bright light shot until later on in the day, which certainly, you know, when I was using myself as that example in Manhattan, And be oftentimes I'm not waking up until super late, then I'm not getting the light until way late.

And so of course I'm not going to be sleepy until much later. So there's a real cause and effect there. Um, which can be really, really helpful. I work with a lot of poker players and so they are on, um, you know, often like their own version of shift working. So we can strategically use the timing by which they're exposed to that light, uh, to then influence when they're kind of at their sharpest or when they're going to get sleepy or what have you, but all of us can do this together.

And so that element can be really important. And then going into the evening, making sure that we're. Turning down our lights, post sunset, um, to really incredibly dim if, if not like off and then just moving into even [00:30:00] candles. And I know that can be a challenge for people with busy homes and kids and whatever, but, um, if can't do candles then moving into red lights or very, very Amber, um, you know, environment or worse, I guess, because I, worst case would be incandescent light bulbs, uh, that have a higher ratio of red incandescent light bulbs.

I noticed this 1995. I know it's old school and, you know, what's really fascinating too. Um, you know, NASA had done a really cool study where they're looking at how they group, this was static lighting versus dynamic lighting and dynamic lighting was the type of lighting that, you know, we're speaking to here where it goes from, you have a high ratio of bright light in the day, and then, uh, moving into very, very damaged.

They actually use candles and the study of all things, um, And, you know, so, and candles are just a light output. That's on a very low level of [00:31:00] Luxe, usually in the single digits. Uh, so with that, then the uptick of melatonin that would be produced, uh, for the participants in those studies was just noticeably, measurably different than people in static lighting environments, where the lighting was pretty much the same, you know, throughout, you know, you kind of just stay inside.

I didn't really, uh, interact with any other rhythm of lighting and the melatonin would just be this like flat line, you know, not totally flat, there would be a little blip, uh, but you know, it certainly looked, uh, night and day, no pun intended to the, uh, dynamic lighting group. So, you know, even if you want the more high tech version of this, you can lead into like Phillips Hughes, which are, um, you know, if you have, if you haven't played with those, you can, it's like from your phone kind of shifted over to circadian lighting and have it really, really, really dim, um, and more in that kind of reddish hue.

Uh, but those are some of the ways that you can bring that in. If people are concerned about EMF, like, you know, uh, then that might not be for [00:32:00] you. But if you are, if you're not concerned about that, then you can lean into some of that. That would be more automated, uh, for your environment. But that light would be top wrong on the circadian rhythm and treatment frame.

And then underneath that is temperature. So then it's like looking at environmental temperatures and the ambient temperature. So shifting, so making sure your body temperature is, um, you know, like it would follow for any of us there. It doesn't stay static. It's higher throughout the course of the day, if things are aligned, uh, and then dropping in the evening, but not all of us are experiencing that in the same way, because if we're eating at odd times, if we're getting lead times, if we're working out at odd times, that can change that temperature.

Uh, so that's when it goes in that temperature conversation is that, and we can look at the meals. We can look at the exercise timing like you spoke to, which was fantastic because yes, yes, yes. There are so many studies were points to, um, really. You know, uh, pushing our bodies throughout the course of the day, then can

[00:33:00] lead to more perceived, sleep crusher into the, uh, evening and help aid with that.

Not only ability to fall asleep, but some of that sleep quality, the only call-out is that there are certain studies that would show, um, that you might start with this and people can get frustrated. Cause, uh, I've been working out and doing it the last couple of weeks and it's not helping my sleep, but often it can take a few months for us to start for the body, to really entrain into that, uh, process and improve the sleep architecture over time.

But once you start getting into that rhythm, uh, you can really see a measurable shift for many people. Is there an ideal ambient temperature that you would recommend like, Hey guys, it needs to be 62 degrees. I don't know. Yes. A great question. So the ambient temperature, uh, that we're aiming for is traditionally in Fahrenheit in the mid sixties.

So we're, you know, within reason you're not looking to [00:34:00] be incredibly uncomfortable and you're not looking to certainly be warm or, you know, people often will, oh, I want to be warm and cozy or they'll get heating blankets or all these sorts of things. Um, So we're instead aiming for that nice, reliable drop in body temperature and ambient temperature can help cue that.

Uh, so we are looking for, to go down to those ideally those mid sixties, um, and often the, the problem that can happen with that as people might say, oh yeah, I keep it really cool. Um, but a number of the types of bedding that many of us have with foam and, um, you know, the trapping of that bedding material can often insulate us in a way that even if our environment is fairly cool, um, our, our temperature in our own bed might be warmer.

That's why a number of people do tend to have measurable improvements in their sleep when they get things like the cooling mattress pads, whether it's, you know, chili pad Uhler, uh, bed jet, Uh, eight mattress [00:35:00] break beds, all of these other options to help cool the body, even if your ambient temperature, um, isn't as reliable or you have, you know, you have kids or there's kind of a disagreement in the ability to lower that temperature to, uh, bring back your ability to control that temperature can often help a lot of people.

Yeah, me personally, I know I bought a, uh, dovey that's way too warm. It's great for the winter. And right now it's sucking and I'm waking up hot as balls every night going, ah, I gotta get a new toupee. What am I doing? Um, and do you have a list of resources and links on your site with stuff like that?

Cause like you mentioned the chilly pad and a bunch of other stuff and I'm like, I want to buy all these things. Do you have links to that? So we can like affiliate links, just go to Molly, say it, you guys go to sleep as a skill.com and buy your stuff through her as a shout out to thank her for, for revealing all of her secrets.

Oh my goodness. Yeah. I mean, um, you know, some of these things can make a big difference end at the [00:36:00] same time, the sleep tech arena is huge and, and growing. And, uh, so it is really can be confusing of like what to invest in what's worth it. What's not, I mean, on our podcast, we've had sleep robots, come on, you

know, they've, there's like crazy things that are coming out, sleep robots know I've literally looking at it right now.

Um, but it's probably amazing. I know, I know, uh, that one's around 600 us, I believe. Um, And this is, you know, kind of the, the state of things, um, you know, sleep robots are where it's at and from just a, a place of loneliness or, uh, you know, feeling connected. I mean, those are things that you could take action on, but it's, for some people it's like not going to make the difference for some people, it could make a difference.

Um, so it's kind of disturbed, uh, discerning. What's worth investing in and what's not, but there are a few stacks that we tend. So we're not saying for, [00:37:00] you know, everyone to go get a sleep robot. That's what you said. What's asleep robots like a cuddle, but it's like a blow up doll, but you don't have sex with it.

You just leave with, what is that? What is that? Yeah, it's um, it's, it's called this som Knox and it's basically, it's like the size of a, I know it's like the size of a baby almost. And it kind of has like the weight of almost as if you have like a newborn in your bed. Um, and so, and you know, people are aligning with it, so it it's kind of, um, shifts your breathing.

So you're meant to then sync up with the breathing of the robot. You know, this is 2021 on the heels of a pandemic. Uh, there are people that are leaning into these things and, uh, from that place, it's like, okay, what's going to make the difference. And it does depend on where people are at with their sleep.

What's really at the source of their. Kind of lack of, um, uh, ability to achieve these levels of sleep. Uh, so my point with the sleep robot is like, there is a [00:38:00] vast world of things that you could invest in to improve your sleep. But I think if you are going to start investing, starting with a solid sleep tracker, moving into, um, solid pair of blue blockers that can, um, you can just have an element to help in those times where you're not able to get your, or the blue blockers, the law, the glasses that are filtering out the blue light.

Exactly. Okay. Yeah. And you're getting those. Um, so you're ensuring that they're not the clear ones for the evening. So leading into more of the Amber or red, um, to cut out the blue and the green and your environment. Um, and so with the end, not being diluted, that even if you're in a space with tons of whatever, fluorescent lighting and all this stuff, and you just put on the blue blockers, you're fine.

Cause it doesn't really work like that either. Um, but it can be helpful if, you know, you're watching little Netflix or something, um, in a largely dim environment. And do you want to mitigate any of the, you know, kind of bright light that you're experiencing? Because really, if we go [00:39:00] back to the why of all this, like the blueprint that we're looking to, uh, kind of live within is for thousands of years from a hunter gatherer per um, perspective.

We were so much more aligned with these rhythms of nature. You would really rise somewhat in tandem with the rising of the sun. The temperature of the space would warm up. So that temperature side of things. So it was light and temperature, uh, would be coupled. And then you'd have a certain period of time of light throughout the course of the day.

You were doing a lot of activity like active you're eating or moving. You were, you know, engaging in complex thought you were doing all kinds of things. And then when the sun would set and the temperature were lower in the space, that was in a lot of ways kind of party over. And then you were shifting into like the downregulation of your day.

And maybe it would be connecting, you know, you know, oxytocin, just kind of calming relaxing activities later on, you know, bring in fire and extend the day a little bit longer, but really it wasn't until [00:40:00] Edison that we're able to live this kind of 24 hour lifestyle. And from a Darwinian perspective, we just really haven't evolved to, uh, you know, live on such a, and it's such a lifestyle that's so counter to what we've done for thousands of years.

So what we're looking to do is kind of have our cake and eat it too, like still be able to stay up and watch whatever we watch game of Thrones or something, and then like still be able to sleep reliably. So how do we do that? We want to do it in alignment with, um, you know, those kind of key indicators, whether it's the light and the temperature, but within that temperature B brings a lot of those behaviors.

So the nighttime eating that can move up our body temperature. Um, you know, the exercise, the timing to have that a bit earlier on in your day or within sunrise of when sun's present, uh, for that set of things. But also then some of those behaviors, like a really popular one that is social jet lag. So, um, and that's the term for that is really to fit [00:41:00] to when we're having our week, eh, manage in particular way, certain kind of consistent bedtime, but then, you know, the weekend comes and I know this has kind of shifted with the pandemic for sure.

But, um, now presumably there's optionality of starting to have more things that we can do and, you know, stay out later. And that's when that you're creating our own self creed into play. Uh, and. And that's, these are some of the elements that can throw us, uh, you know, out off of our gay of a, with our sleep.

And so that's another reason why this tracking can help us pattern spot in ways that we might be foggy about if we don't have that data behind us. So if I get up and choose to read on my iPad, I definitely meet the Amber lights at three in the morning. The Amber glasses at three in the morning is what you're telling me.

Yes, because also number one, mistake or not number one, but first mistake, first of many, I'm sure. [00:42:00] Well, no, I mean, it's, it's still amazing too. Cause you're really like looking and examining of, um, all of our houses. We all are, you know, we're having to relearn and that's why we really stand so firm in this concept, that sleep is a skill in our modern society, because so many of the things that we do are outside of the workability for our sleep.

So, um, you know, all of us, I'm sure most of us at some point have experienced that time. We wake up and we pull for whatever piece of tech, um, and yet our eyes, you know, so our retina, um, become more and more sensitive throughout the course of the day and into the night. So into the nighttime, the sensitivity element of things is heightened.

So, uh, that bright light can then even further than impact that, uh, elements of melatonin, especially when we're going into those wee hours, when we're, uh, depending on our kind of sleep cycles, um, As in like our bedtime and our wake time and how we've been managing that, [00:43:00] uh, sometimes our melatonin production can be getting more depleted towards the end of the night.

And so then particularly if we expose all that light to us, then that can, you know, further just make things more challenging for us to fall back asleep. Okay. Let's talk about the wearables. I want to know Tony's here. Uh, she was getting me on the wooop and then my girlfriend was, uh, Andrea was getting me on the aura ring and then, um, the apple watch all these wearables.

And of course I wanted to find one that was like, it's going to be helpful with sleep and the heart rate variability and exercise stuff. And so I wasn't quite sure what to get. So I was like, you know what. I had the luxury of being able to talk to Molly next week on my club cast. So let me, let me ask her about that.

And by the way, if you guys have questions, raise your hand. If not Molly, and I will just chat about sleep until we land this plane. But, um, Molly, what say you about all of these, these wearables? What do you like. Yeah. Great question. Um, so, you know, I certainly [00:44:00] had clients that were just about all of them at once.

So there's that option, uh, wanted to do that because I'm that much of a nerd that I w I will like sync up my life savings into 10 wearables and put them on my body and see what happens and then not do anything to like, change my habits. You know what I mean? Like, I'm that person, you guys, I totally hear that.

Um, so a couple of things I can just say that, you know, and no affiliation, but we have every client that we're working with, where the aura rings, um, spelled O U R a and no affiliation, just, um, you know, for our purposes, that one, um, is particularly focused on sleep. It has very solid kind of UX UI, and the, um, battery life lasts, um, solid in the uterus was to just the applicability of people, keeping it on, wearing it, not having gaps in data.

All of those things are solid. Um, also for. Uh, women who are menstruating, it can be particularly helpful because, uh, it does measure [00:45:00] body temperature, which not all of the wearables do do that. Uh, so that can often be really eyeopening for seeing, uh, ships throughout different parts of our cycle and how that can influence our, our sleep results.

Um, for sure, also in alignment, of course, with glucose levels and this conversation around, um, as we were alluding to before on low carb and, uh, also particularly with keto, um, and how it can almost be this nice indicator, uh, of times when you might want to lead into a lighter, if you are doing intermittent fasting.

And so kind of being more gentle during, uh, for instance, in the luteal phase for women, and you can see it just so clearly cause our body temperatures go up during that period of time. Um, and so the management of both our cycles and also for women. Who are either perimenopausal or menopausal, um, or, you know, uh, kind of going through that process then, uh, leaning [00:46:00] into that temperature element can be really, really helpful.

Um, but so I will say aura is one that we have, uh, everyone wearing and real quick, real quick. So I want to know with the body temperature and, and cause it you're you're right. Like I think body temperature has been a big thing with fertility, but it's not been a big thing. Like we haven't been really widely educated about sleep.

So you're saying that in the luteal phase where our body temperature goes up, you go you back off on the fasting. Yeah. So, um, so this is a whole philosophy too. Um, it particularly, it can be really helpful with Quito. Um, so, uh, and, and with fasting, uh, so a couple of things you want to do during that, uh, luteal phase you want to lean into, um, uh, being more gentle to any fast that you might be doing.

And that could be a time when you start flexing out of ketosis, uh, during the time. And it can really help self-manage it [00:47:00] for you and for men that are listening. Um, now, while you obviously don't have that external, um, kind of forcing function, Uh, still leaning into creating some of that cycling, cycling and cycling out can really prove to be really helpful so that we're not going into too much of a sympathetic response, uh, routinely, but for women in particular, this can be really, really helpful.

And another indicator of that is often that our HRV is dipping, uh, in this phase, you know, few days before our period. Uh, and when for people connected with heart rate variability, when our heart rate variability is dipping, that's when it can just be a sign of, uh, added, you know, kind of stress to the body.

Uh, so that's when you want to be, um, providing a bit more, uh, leaning into, uh, things that will help kind of calm that stress a bit more, if that makes sense. Uh, so let me know that that's clear. That's great. That's great. Thank you. And I didn't mean to interrupt your progress on the, uh, [00:48:00] talking about things.

So the aura ring, you said is more focused on sleep. Body temperature and heart rate variability. And then yes, absolutely. So, um, and no, I'm glad you asked that question though, because it's super, super important and you can get way more in depth than what I just provided there, because then you can also lean into, when do you want to amp up that fasting?

And then, um, surprisingly for many people, it's actually for, for many women, it's when we do get our period and starting to go into a follicular and ovulation, that's often where we'll see our heart rate variability, uh, really start to uptick. And that's where you can start to then bring in more. If you're going to do, you know, a longer period fast or, um, go more strict keto, that's where you might want to look at that.

So really super, super important for women to lean into this because I've seen so many women on the other side of that when they just, you know, the same regimen for years, uh, This is strict, you know, old [00:49:00] Matt or what have you. And then, uh, their HRV starts really dipping. So it's a really great question.

Um, but yes, to clarify about ordering, uh, it's respiratory rate, body temperature, uh, heart rate and HRV, uh, for the kind of the readiness indicators, but then of course sleep. Now the caveat with all of these is that I really have people, um, not put too, too much weight onto the sleep stage classifications.

Uh, and that goes for anything on the hand and wrist, um, because most of them as compared to a polysomnogram, which is not the best at discerning right now, it's, you know, there's elements, you can certainly see themes. And if you see something dramatic, really shifting, that might be something to notice.

But, um, for a day-to-day basis, we don't want to get too, too caught up. Cause they're just, those aren't really the best, but the awareness, the, those biometrics that we spoke to tend to be pretty solid. Um, also if you were just awake or asleep, uh, that. Tends to be fairly accurate, at least enough, so that we can [00:50:00] see, um, some solid trends.

Uh, and then what do you think about the whoop whoop good for sleep or is that more for an exercise type of thing? So, Wolf, I tend to see for more of my athletes. It's really great during the day and solid for the night too. And, um, also, you know, we're talking right now in, um, you know, in May 31st, 2021, and, uh, both of these companies or ring and whoop have just received like millions and millions of dollars, you know, boop got a hundred million or just got another a hundred million, you know?

So some of these things will be obsolete, even, uh, what I'm saying in the like, you know, short period of time, because there's more new nests coming, but, um, but as we're right now, Uh, woop is particularly solid for, um, as for the exercise element of things, but there can be some really nice nuance that they get into with sleep, uh, is just, uh, right now it doesn't have that, uh, temperature element of things.

Uh, also just the UX UI is a [00:51:00] little, um, you know, not quite as sticky, like the length of time by which you're able to charge and kind of where that without having to really think about it, but for some people they like it. Cause, you know, you just put the little capital on while you're walking around, but I've seen the applicability of that be a little off.

Um, and then for coaching practices, the dashboards, um, are a little different the way, you know, so the ability to share that, but one thing that's really cool that woop has that, um, some of the other trackers don't is the group component. So. You could with yourself and whatever your friends or, you know, whatever you can create your own group.

And then you can see really everyone's data. And there's something really cool that happens with like that transparency where people start kind of like up ticking on their performance and their performance and extends to their sleep when suddenly everyone else, you know, that they know in this particular group can see their information.

Uh, so that is something really [00:52:00] cool that woop leans into, um, of how to kind of game-ify this a bit more. Um, and also from the exercise component, the strain factor, they bring in the HRV readouts. Uh, but, and then also pulling it to the strain so that you're really pushing yourself through those exercises, like you originally said, uh, and then to get yourself tired out so that by the end of the day, you are wiped, presumably, uh, so that you can lean into that sleep pressure.

That's awesome. Thank you, Tony. I want to make sure that we hear your voice. My lovely lady. What's going on?

Um, oh my God. Okay. Anna here. Here's my four one, one or whatever the kids say on the whoop. I want to throw it in a lake and never see it again. It stresses me out and this is why I am N S N G because you don't track anything. There's like an I, I'm not a tracker. [00:53:00] I hate being tracked by humans or electronics.

And are you in the clubhouse right now, sweetheart? Oh my God. You are being tracked. I'm tracking it. I have a PI tracking me too. And that's a whole other story, but we're going to talk about that at a later time. Yeah. Um, but it does like, it stresses me out that's but if you like data. It's got a whole lot of that, but I'm like this, she was, Molly was talking about the strain and like, it's like, oh my God.

Okay. So I didn't get my daily strain today. And so maybe I'll never sleep again. Or like, oh, look at my HRV. It's in the toilet or I don't. But if you like data, it has a whole bunch of data and I'm sure it could be useful to somebody who likes to read data. And I probably will not renew it once I'm done with the, um, w I think it's six months sign up or something, then the initial [00:54:00] thing.

Um, but it is, I, the, I like the software. It's easy to read for me. It is easy to wear. I've never had a problem with the battery charged thing. That's always been very simple and it, it does it very quickly. I like that it does do the exercise, sleep stuff up. You know, like it's all in one. Like I w I wear to the pool and it, it just knows I'm swimming.

I don't know how it knows I'm swimming. It just knows I'm swimming. If I'm rowing, it just knows I'm rowing. If I'm running, it just knows I'm running. It's kind of creepy, but cool. Um, so if you like data and tracking and to be tracked, it's great. So that's, that's what I, that's what I got on that for me, who knows nothing about anything.

And my question for Molly is I want to know everything there is to know, and the next five minutes about [00:55:00] cortisol. Cause I'm not sleeping. And I think that cortisol is a thing, Dr. Ben Beckman's like, Hmm, that's bullshit. But I am stressed. I'm not sleeping. And I am gaining. I don't know if I'm gaining weight.

I don't weigh myself, but I'm getting bigger at like an astronomical rate. It seems strange with nothing else really changing. So like is Dr. Beckman correct? Bullshit or is cortisol like for real. Aye loved this whole, this whole thing, the whole world of it, because one, I absolutely hear what you're saying about the whoop.

Uh, not just the whoop. I want to pan out on any of these trackers, particularly if we, um, there are a couple cases, there are a number of cases where it might not be serving us to lean into data. Um, you know, there are certain times where, uh, we can have that no CBO [00:56:00] effect. And then the experience is one where we wake up.

And the first thing we see is like, Ugh, I've failed. And now I got to go throughout my day is. Failure and, you know, we make meaning out of it and we put it into like who we are and our experience of life. Um, so if we're in that state and we particularly, if we don't feel like we have, um, a framework by which to approach

this or something that we're working towards to improve, and it just sort of like surviving these numbers then yes.

Uh, I absolutely hear what you're saying. Um, I had had experiences like that, uh, before I had my insomnia, I had had the Zio, um, you know, years and years ago, and that was a head-based tracker. Uh, and you know, I'd wake up and I'd get like this failing grade and this, ah, what do I do? This is all blended, you know, stopped using it at a certain point, uh, because if we're not then knowing what to do to make a difference with that data.

So, um, that can be really, really important points. So thank you for touching on that. Um, and there are times when even, [00:57:00] uh, the most skilled people, something really is out of their, uh, Uh, you know, they're leaning into acceptance of something that they can't necessarily have the say in or that level of control.

And so sometimes they do lean outside of that data for a period of time or kind of go on a little vacation from that. Um, so, you know, you do want to approach that on a case by case basis, uh, and leaning into the cortisol topic. Well, cortisol and melatonin are these, uh, kind of two hormones that we're looking into quite regularly for sleep.

And, uh, so one, we're looking just to have workability of just an, uh, that, um, elements of a, a functional curve of a S a spike in cortisol in the morning, uh, in the morning hours. And then it really coming down on a nice, um, uh, dropped into mid day and into the evening. Uh, and then really shifting over, into seeing an uptick in melatonin.

So they kind [00:58:00] of are these two opposing forces that we're often seeing. And like, in my example of my insomnia, my, um, you know, kind of those rhythms were upside down. And so in my testing for, uh, cortisol levels and melatonin levels, my cortisol was rising in the evenings, which is obviously not what we want to do in alignment with kind of, uh, downshifting our, um, our activities throughout the evening and calming and bringing the, uh, kind of brain state down and being able to then ease into sleep.

Uh, so from that place one, you can test this. And so a lot of people lean into. Even the Dutch test, uh, and getting connected to some of, uh, these hormones. And there's a number of other tests that you can lean into now. So many of them were popping up. Um, so you can certainly quite easily now, uh, get a sense of where those levels are at and then begin to go on that.

Um, with that knowledge, then [00:59:00] making a difference with those, uh, once, once, you know, kind of what's going on. Thank you. Thank you. Thanks Tony for asking that. Okay, so here's the deal. It's time to land the plane, but I have, I want to know Molly, if you wouldn't mind coming back at a later time, maybe in a month or two, we can talk more stuff.

I still want to talk more about cortisol. I want to talk about coffee. I want to talk about what still keeps Molly up at night. If any, that does any, have you hacked it? Are you perfect sleeping? What's going on? I want to know the answer to these questions. So will you come back and chat with us more another time?

Yes, 110%. Um, and let me tell you, I, after my experience with my insomnia, um, my, and I thought that I thought it was like, I'm never going to be able to travel again. And, uh, spoiler alert, we were able to travel again and we ended up traveling as, um, we lived abroad for about three years. We did kind of digital nomad thing back and forth to New York.

And, um, you [01:00:00] know, we're in Southeast Asia and hopping around to all different places. So for me, one of the biggest things is travel, um, depending on the new environments that I'm in, uh, the difference that that can make for my stats. And I have lots of data in different places. We should talk about that because everybody's going to start to be traveling again and getting back out there.

And that's, it's a real thing. And having to sleep in strange hotel room beds and. And what, what you can do on the road. We have a bajillion questions. So thank you for this hour of time, this will be up@annavaccinia.com and Molly I'll get relevant links from you, but where would you like people to go?

Right. Do you have a sign up on your website? Like what's the best place for people to go and connect with you? Yes. Um, so sleep is a skill.com axes, a real bucket for all kinds of things. So one, you can take a sleep assessment there, and that will get you immediate, um, just, you know, free, uh, tips and tricks around your sleep that are tailored to what you're dealing with.

Um, that will also sign you up for weekly newsletters. So we aim to [01:01:00] have the most obsessive asleep newsletter on the planet. So we do that every Monday. Uh, and then in alignment with that, you can also, um, uh, check out our sleep, uh, podcast. Uh, and then there are a number of other kind of resources and goodies, of course, we're all on other social media platforms and that sort of thing as well.

Wonderful. Thank you so much, Molly McLaughlin from sleep as a skill.com and please follow her. And she's doing, she's doing the Lord's work with the sleep. This is what we need. This is what we need. I know we're all running ragged and, and, and I, my prediction, we're going to come out of this pandemic and it's going to be.

Uh, a complete like hustle grind slash bok and Dalian part. Like it's going to be insane and I want people to be taking care of themselves. You know what I mean? Like we're going to be putting a lot of pressure on ourselves. We're going to be doing a lot of things. So I really appreciate you doing this work, and I really appreciate you being here and thank you everybody.

Who's stuck with us and thank you Tony, for [01:02:00] asking your question and, uh, come join the eat happy kitchen club. You have to join the club or message me if you can't, we're still figuring out how they changed the algorithm, but join the happy kitchen clubs. You're notified of things like this. I do a weekly one every Monday from five to 6:00 PM Pacific.

And if you're on the east coast, you better be getting ready for bed. Just like Molly said. And on Thursdays, Megan and Leona do the NSN G a F accountability group. I will be adding a second time that I'm doing these Q and A's. And interviews with people during the week. We're not quite sure when that's going to be yet, but I'm going to have Stephen Crutchfield from Silicon valley, olive oil.

On very soon, we're gonna be talking about all the wonderful things that we need to do in our lives to have better lives. And thank you for being here everybody. And thank you, Molly. Awesome. Thank you so much. And for all the work you're doing it's so, so appreciate it. Absolutely. You guys take care good night from the east coast.

Yay. Go, go sleep.