



Progress Your Health Podcast - Episode 069

How Do Adrenal Affect Sleep? - Ghost

Dr. Maki: Hello, everyone. Thank you for joining us for another episode of the progressional podcast. I'm Dr. Mackey.

Dr. Davidson: And I'm Dr. Davidson.

Dr. Maki: On this episode, we're going to continue talking about adrenal fatigue or the types of adrenal fatigue. The last one we talked about the vampire, today we're gonna talk about the ghost.

Dr. Davidson: So the three types of adrenal fatigue that we've mainly seen, so these are kind of where we put these names to it to just sort of be a little bit easier to remember, easier to understand, but we-- definitely the three main types we've seen are the vampire, the ghost and the zombie. So the previous episode, we talked about the vampire and how the vampire can't go to sleep at night because their cortisol is elevated, they're awake, they really can't go to bed before 2:00 AM, midnight to 2:00 AM. Then in the morning, they're super tired and they can't really get going, because their cortisol is so low in the morning. So that's the vampire. Now, in this episode, we're going to talk about the ghost and the reason we differentiate this is because the ghost we would treat completely different than we would treat the vampire than treating the zombie. So, with the ghost, they have a little bit of a different diurnal curve or cortisol secretion from the adrenal glands.

Dr. Maki: Yeah. So, the ghost typically doesn't really have that much trouble in the morning, actually, the early part of the day, they actually do really well. Most of the day, they do very well maybe till what-- maybe around noon or so, but then come the evening is when they start having a lot of their problems.

Dr. Davidson: Yeah, the vampire has no trouble falling asleep. They will fall asleep on the couch watching TV. It's 8:30 at night, they have no trouble falling asleep. The issue with the ghost is they have trouble staying asleep.

Dr. Maki: Yeah, right. Yeah. So, the vampires certainly has we talked with the last one, they get a definite second wind in the evening. They start to wake up, they start to have some energy. Like you said, the ghost can maybe have a little bit of that, a little bit of a second wind that they get maybe after dinner, but they are able to fall asleep maybe while-- maybe on the couch or they're watching a movie or something, they might doze off. Usually, maybe about seven, eight, nine o'clock, which is their-- the time that their body's telling them they should go to bed. If they do go to bed because they're tired, but now in the next two to four hours they wake up and it's almost like they go to bed at 10:00, they wake up at midnight and they're like wide awake.

Dr. Maki: Yes, exactly. So, the ghost will fall asleep hard anywhere from two to four hours, but then they're up, and then we kind of separated the ghost into two different subtypes. So, we call one the ghoul, and the other one the poltergeists. So the ghoul will fall asleep but nine o'clock easily, ten o'clock easily, but come two, four hours after sleeping really hard they'll be wide awake, like at seven in the morning, but it's really only two in the morning. So the ghoul will stay up for easily two hours, so I would say they're not roaming the halls like a ghoul, they're instead roaming their iPhones because they're wide awake, and they can't go back to sleep. So after about two hours, by the time their cortisol does come down, is then-- because what happens is their cortisol is low when they go to sleep, and then it spikes around 2:00 AM or, two to four hours after they've fallen asleep, and then it's up for a while. And by the time the cortisol comes back down, which is generally about an hour and a half to two hours, they're able to fall back asleep, but by then, they have to wake up for the morning shortly thereafter.

Dr. Maki: Yeah, it's a lot of them, sometimes the best sleep of the night is that between 4:00 to 6:00 AM. They've been awake for a long time. They're just tossing and turning, like you say, some are looking at their phones, some are reading a book, some are getting up checking their email, some are watching TV trying to get tired again, and then they drift off to sleep right as almost like they just drift off and then their alarm goes off, and they got to get back up again. That usually is the best sleep they get of the entire night and it really maybe only a couple of hours.

Dr. Davidson: Yes, exactly, and then the other one is the poltergeists. So, they're similar to the ghoul where they fall asleep fairly easily in the evening, nine o'clock easily, fall asleep on the couch watching TV, watching a movie, but then they will also wake up about two to four hours later. So, go to sleep at 10:00, wake up at midnight, but instead of staying up for a couple of hours, their cortisol spikes up and down all night long. So, that's why we kind of call it like that mischievous poltergeists, because you wake up easily four to six, even more times that at night, you wake up for no reason, then you fall back asleep. Then 40 minutes later, you wake up and then you fall back asleep. They can't even understand why do I keep getting up all night long for no reason, and then they might get-- then by the time the cortisol does drift down, like Dr. Mackey said, it might be five in the morning, and then they're sleeping hard until 6:30, but then you got to get up, you got to get up for the day.

Dr. Maki: Yeah, right. Yeah. So it can be kind of exhausting. But once they're awake, the difference between the zombie and the ghost is that even though they didn't get a lot of sleep, they have enough whatever it is, enough reserve in the tank that they can still be fairly productive in the morning. They don't need as much caffeine necessarily as the vampire does. They're not dragging around, they're actually fairly productive, but that is also somewhat short lived. They're literally kind of running on fumes to a certain extent, and they're able to be fairly productive early on, and then it just kind of Peters out a little bit.

Dr. Davidson: Yeah, so for both the ghost-- for both subtypes of the ghost, the goal and the poltergeists, they wake up pretty good. Once you get going they say, "Once I get up and get going, take a shower, I'm fine. You know, I'm fine. In fact, there are the people that you could turn morning people because they get everything done before noon because once noon hits, they crash. They always say, "In the afternoon I am so unproductive." Those are the people that are running, trying to hang out at the coffee maker or they're taking naps.

Dr. Maki: Yeah. The window that we typically see, two to five o'clock, 1:30 to 4:30, right after lunch, there's-- and their productivity just falls off the cliff for the most part, and they're really struggling a little bit. But then they kind of are able the way that most people pull themselves out of that is either by carbohydrates or more caffeine, and then that whole cycle just continues day after day, they just kind of keep going that way. But after dinner, and they're getting ready for bed, that part is really like you say, is relatively simple. It just staying asleep throughout the course of the night, is really challenging. Like I said, for the ghoul or though they're up for long periods of time or they're-- I mean, we've had patients that tell us they're up five, six times a night if they're the poltergeist. I mean, they're just up all night long. And sleep cycles, you know, to go down to stage

four sleep, ram and then stage four, it takes about 90 minutes to be able to get down to those restorative levels of sleep. If you're waking up five or six times a night, you're probably not getting any of that restorative sleep. So, this kind of perpetuates over time, and they just become more and more exhausted as time goes on.

Dr. Davidson: So, and honestly, I think ghosts are pretty common. We have talked about in the previous episode, I think the vampires are much more common. You see that a lot, and especially in our culture and our lifestyle is people having trouble falling asleep, and then they can't wake up in the morning. But the ghosts are pretty common too, where especially I think more so for females. I do find men that do have this issue too, but I would say probably more so females have that trouble staying asleep. They say, "I can-- my head hits the pillow and I am out, but two hours later, I'm wide awake." So eventually, that leads into a little bit, of course, sleep debt over time, that inability to be productive and effective in the afternoon, and then they kind of drag a little bit in the evening, get a little second wind but then they fall back, they fall asleep fairly easily. So, if you yourself or you know somebody that says, "You know what? I need to get everything done before noon or one in the afternoon," they're definitely probably a type of ghost.

Dr. Maki: So, on the last episode I identified myself when I was in my 20s, college, in my early 20s as a vampire. Now, I have kind of, let's say, in the last five years or so, I know that I have kind of flipped back and forth between being a ghoul and a poltergeist. Which one do you think you are?

Dr. Davidson: Oh, I'm definitely a ghoul. I mean, I might get up a few times at night, like because I tend to drink a lot of water at night, which I probably shouldn't. So, of course, you're gonna have to go to the bathroom. But for the most part, I'm definitely the ghoul, but I've gotten a lot better with that because I've been that way even as a kid, like I think so.

Dr. Maki: I think they use-- I think you've always used to be the poltergeist and now you're the ghoul, right? You're the one that would wake up five, six times a night, but now it's transition a little bit, now it's just for longer periods. I think you went from a poltergeist to being a ghoul now.

Dr. Davidson: Yeah, definitely. But I am getting better, so I'm able to get that sleep for about three hours hard, then wake up and try to get that window from two hours, to an hour, to a half an hour, to getting that smaller window of being up in the middle of the night. But it is like I said, I do think it is common with females and you think, "Well, what they're productive in the morning and they get up, it can't be that bad." But it really is no fun to be up in the middle of the night for an hour plus. With all-- I don't have statistics on this, but with all the patients that I talked to when if they're a ghoul and they wake up at one in the morning, usually you start and I asked him, "What do you think about? Do you have a repetitive song in your head? Do you have racing thoughts? And most the time it's thinking about stuff that doesn't mean anything that seems so much bigger in the middle of the night, and then you wake up in the morning and think, "Why was I stressing over that last night?" Like people will worry in the middle of the night over nothing.

Dr. Maki: Yeah, there's a sense of anxiousness, right? There's this-- they're thinking about their to do list, they're thinking about the day before or they're thinking about what all the things I gotta get done the next day, and it can be very disruptive. They're just kind of like you said, they're almost like in a panic all night long.

Dr. Davidson: Or it's sort of-- Yeah, it's like I'll even have a lot of patients, so we'll think about things that are never gonna happen. There's not gonna be an earthquake. My tires don't-- aren't-- I'm not gonna get a flat tire. My kids are fine. They're probably asleep in their beds right now and they're fine. People will think about things that really you have no control over, that's not going to happen, but it seems so much more big or enormous in the middle of the night.

Dr. Maki: Yeah, sure. Yeah, definitely a hormonal component that kind of magnifies some of that repetitive thought process. This is happening, literally, this isn't just like a once a week kind of thing. This is for a lot of these people that we speak with and work with, this is happening on a nightly basis. I mean, that's a lot to-- that's a heavy burden to carry. It's almost like you kind of dread sleeping because you have to sleep, right? That's very important. We put a lot of time and attention towards helping people sleep better, because it's so foundational, which is why we're talking about. Because if you don't sleep well and you have some other issues, those other issues, whether it's weight, whether it's a chronic problem, whether it's how you feel, a lot of that is not going to improve unless your sleep improves.

And conventionally, some of the sleep medications and things like that, those really don't do any better to improving any of those things. They just kind of create a whole other series of problems. So the way that we help people through these issues is fairly individualized, which is a tough thing to do. You have to do it on a case by case basis, because even what worked for the ghost or the poltergeist, what works for one ghoul is not going to necessarily work for the poltergeist and vice versa. There might be a little bit of-- from a treatment perspective, there might be a little trial and error there, because even two ghouls, what works for one doesn't automatically work for the other.

Dr. Davidson: Yeah, so that's why we like to differentiate this. So, for example, when we talked about the vampire, our goal is to bring down that cortisol in the evening time, nine, ten o'clock, eleven o'clock at night, and bring up that cortisol in the morning, it's six, seven eight. Where with the ghost, both the ghoul and the poltergeists, it's completely different. You don't necessarily want to bring up their-- bring down their cortisol in the early evening or the evening time because it's already low. Our goal is to bring down that cortisol in the middle of the night and then try to keep the cortisol up in the afternoon. So, we actually do a lot of work with ghosts in the afternoon and trying to maintain that cortisol level so that we can get it back into that nice fluidity of cortisol high in the morning, but then it comes down nice at night all night long.

Dr. Maki: Yeah, right. So, either the ghoul or the poltergeist as we talked about in the last one, a vampire could easily be a candidate for hydrocortisone or even a glandulars. The ghost or the ghoul or the poltergeist isn't probably going to be a candidate for either one of those. They're going to be too strong. They're not gonna be able to tolerate them very well, so now automatically, they get tear down a little bit. Like you said, this is a fairly often a female problem very much. So between, let's say, that perimenopausal, menopausal window, so the female hormones really can have an impact on that as well, too.

Dr. Davidson: Exactly. So, depending, and like I said, I have seen a lot of men that wake up in the middle of the night staring at their phone as well. But it definitely I would say more so you see it with those females, and the 40s and then also menopausal in their 50s also. So working on it from that hormonal component, definitely, like we did with the vampire, nutritional and lifestyle, supplementation and maybe some prescriptions, but the ghost is gonna be completely different.

Dr. Maki: Yeah, right. That's why over the years, I don't even know how you really came up with the vampire, the ghost. I don't know where that inspiration came from, but it even for you and I really sticks. like we talk about people, we talk about particular cases and we're like, "Oh, are they a vampire or, you know." So, it becomes a very easy way to recall and way to remember, and way to categorize somebody very simply, as

opposed to calling it adrenal take A, B, or C or one, two, or three, or some other subtype that really doesn't explain it very well. I think these-- I think they do a very good job of understanding kind of what's going on, and how it manifests. Like I said on the last episode as well, when you're doing any kind of testing with Dutch test or a saliva test, or even blood test, now, those, each one of these categories, they're testing should look a fairly particular way.

Dr. Davidson: Yeah. So let's say you did a saliva test for cortisol, and usually with that vampire that morning, one is really low, it's really low. But what you'll see with the-- and what you'll see also with the vampire is the evening time isn't like the cortisol isn't super high, but it might be high normal, just a little over the edge normal and that's always your cue that their cortisol is too high in the evening and they're more of a vampire. Where with the ghost, what you'll see is their morning cortisol is really good because it's been bouncing around all night or it spiked in the middle of the night. It's actually pretty good but at night is when it's really like almost like it'll be in that low normal to under, and especially the afternoons. The ghosts have much, much lower cortisol levels in the afternoon than the vampires. Now the vampires are tired in the afternoon. They're better in the afternoon than they were in the morning, but definitely the ghosts are like the afternoon that that's, I've had people tell me, "I could pull over my car and fall asleep on the road." Like lay on the concrete and sleep, but in the middle of the night they can't.

Dr. Maki: Yeah, right. That cortisol pattern too, they are, like I said it's gonna be normal first thing in the morning, right? Then you'll start to see because you can't really take a cortisol sample in the middle of the night. Although some doctors will have people do it in the middle of the night, but you're awake, so it really kind of gives you a skewed result. So you do it up until the evening, maybe ten o'clock, maybe midnight, but you'll definitely see where it starts to spike. Right when there should be sleeping, you get this rise, there's cortisol response. So that last sample is where you might see-- you get at least an inkling that their cortisol is gonna be spiking. Then it's gonna be either spiking at that one particular time they're up for an hour or two or is gonna be bouncing around all night long, and they're awake four to six times at night.

Dr. Davidson: Now, I know we talked a lot about this and we're gonna go into the next episode and talk about the zombie. But there definitely are some, like I said, there are some options and that could probably-- that can definitely help the ghost. It's not gonna help all of a sudden. Like I said, if you're up in the middle of the night for two hours, you're not all of a sudden gonna sleep all night. We want to make that two hours an hour and a half, an hour, 30 minutes, 15 minutes, so you can minimize that and close that gap, but not with sleeping medications. So, Benadryl and those Advil PMs, those are terrible. They never put-- you never-- you might be sleeping, but you never get into

that deep stage of sleep. Of course, as we get older taking those types of medications, those over the counter sleeping medications, especially are really bad for your memory, long term and short, especially the short term memory, taking those chronically. So, that wouldn't be an option but definitely we have some options that could help you.

Dr. Maki: Yeah, so again, just like on the last one to get a little bit more information about the ghost, whether you're a ghoul or a poltergeist is go to progressyourhealth.com/ghost. There'll be some other information there that kind of help rein this in and give you some ideas on how you can start to improve. And really the goal that we're trying to get really every adult, every adult, whether they're the vampire, the ghost, the zombie is for them during the night is preferably for them to wake up just one time. They go to sleep easy at a reasonable time, like I said maybe 10:00, 10:30 at the latest, they're able to sleep for a good three, four hours. If they do wake up, preferably no restroom break, they're able to go back to sleep easy, and then sleep for another three, four hours, and now they're ready to start their day. That seems not perfect, maybe some time, in a lot of cases that's the best we can hope for. You'd be surprised, maybe you wouldn't be surprised, but you'd be surprised at how uncommon that actually is. Usually, anybody after the age of 40 does not sleep eight hours straight through, I mean, it just doesn't happen. But that is normal, but not very common. People need to be able to sleep that way and then which is why we're talking about this because this becomes a very-- it's almost like as more time goes on, the slower our sleep quality gets, and it becomes a real issue for people.

Dr. Davidson: So if you go to progressyourhealth.com/ghost, they'll have the show notes, kind of recapping what we talked about in this episode, and then we'll have some options on there that can make it a little bit easier for you to be able to kind of like I said, close that gap with that sleeping.

Dr. Maki: Yeah, I think this wraps it up. This hopefully gives you an idea. With the next episode, we're gonna talk about the zombie. Maybe you can understand with all the TV shows lately about zombies, maybe you can understand what that's our-- what we're already gonna be talking about. So, until next time, I'm Dr. Mackey.

Dr. Davidson: And I'm Dr. Davidson.

Dr. Maki: Take care, bye-bye.