

Menopause does not show up the same way for everyone. Some women glide through with a few warm nights and scattered irritability. Others feel as if their bodies have changed the rules without warning. The mix of hot flashes, sleep disruption, brain fog, mood swings, and shifting weight can be unnerving. In London, Ontario, where winters are long and summers can turn humid, seasonal rhythms also play into symptoms. A naturopathic approach helps tie those threads together, translating daily choices into relief and building a plan that works in real life.

I have seen clients do best when they tackle symptoms from several angles, then check what actually moves the needle. That means looking at nutrition, movement, sleep, stress, and targeted therapies side by side. It means learning what to change now, what to watch, and when to bring in prescription options like bioidentical hormone replacement therapy. If you are searching for menopause treatment in London Ontario or navigating perimenopause treatment in London Ontario, the most effective care usually blends sensible lifestyle shifts with medically informed monitoring, and it leaves room for adjustments as your body adapts.

What changes first in perimenopause and why it matters

Perimenopause often begins in the forties, sometimes earlier. The first changes are usually erratic ovulation and fluctuating progesterone. Estrogen can swing high one month and low the next. This volatility explains why a woman can feel energetic and social for a week, then foggy and overwhelmed shortly after. The symptoms that follow tend to track those hormone swings: heavier or longer periods, breast tenderness, headaches, restless sleep, palpitations, and irritability. When estrogen trends lower and periods space out, hot flashes and vaginal dryness step forward.

Understanding that pattern is useful because it shapes the timing of interventions. For example, magnesium glycinate at night can help smooth sleep and reduce headaches in earlier perimenopause. Later on, when vasomotor symptoms dominate, layering cooling strategies, nutrition tweaks, and paced breathing can cut hot flash frequency, while a discussion about prescription options becomes more relevant. The goal is to match the tool to the phase rather than throwing everything at the wall.

Eating to steady energy, mood, and temperature

A standard “healthy diet” sometimes misses the mark in menopause. I advise a pragmatic plan that respects shifting insulin sensitivity, bone health, and sleep needs.

Protein first. Aim for roughly 1.2 to 1.6 grams per kilogram of body weight daily, spread across meals. That range supports lean mass and satiety. For a 70 kilogram woman, that means 85 to 110 grams per day. In practice, think 25 to 35 grams per meal. Eggs with cottage cheese and berries at breakfast, lentil soup with chicken at lunch, salmon with quinoa and greens at dinner. If appetite is light, a whey or plant protein smoothie fills gaps without heavy volume.

Fiber and slow carbs. As estrogen falls, insulin function can drift, and blood sugar swings become more noticeable. Choose intact grains, legumes, and plenty of vegetables to keep glucose steadier. Oats, barley, chickpeas, black beans, and root vegetables help mood and energy stay even. London’s markets stock local beets, squash, and kale well into the colder months. In summer, fill up on berries and cucumbers. A target of 25 to 35 grams of fiber per day is realistic for most women who approach it gradually with water intake to match.

Fats that do more. Omega 3 fats support mood and cardiovascular health. If fish sits well with you, include salmon, trout, or sardines two to three times weekly. Alternatively, a quality fish oil capsule that provides 1 to 2 grams of combined EPA and DHA can be considered, ideally after checking with your provider if you are on anticoagulants. Olive oil, avocado, walnuts, and flaxseed round out the picture.

Trigger management without food fear. Alcohol and spicy foods are frequent hot flash triggers. So is late night eating. Instead of dropping favorites wholesale, run short experiments. Two weeks with alcohol only on weekends, or none at all if hot flashes are intense, then reintroduce and observe. Stop caffeine by early afternoon, especially if insomnia is new. You can keep pleasure on the plate and still lighten symptoms.

Micronutrients that matter. Vitamin D status affects bone health and immune function. In London Ontario, with latitude and winter cloud cover, most women need supplementation outside of summer. A blood test helps personalize the dose. Magnesium glycinate, often in the 200 to 400 milligram range at night, supports sleep, muscle relaxation, and constipation relief. If you lean vegetarian, check B12 and iron periodically. Mild anemia worsens fatigue and brain fog and is often missed when periods are still irregular.

Movement as a symptom shifter, not punishment

The right exercise routine makes menopause symptoms more manageable. It also guards against the twin risks that rise in this decade: bone loss and cardiometabolic disease.

Strength training anchors the plan. Two or three sessions per week that include squats, hip hinges, rows, presses, and carries are enough to stimulate bone and maintain muscle. If gyms are not your scene, resistance bands and dumbbells at home work well. Start with one or two sets at a weight that feels challenging by the last two reps. Over a month, add a third set or a bit more weight. Good form beats heavy numbers.

Walks you will actually take. London's Thames Valley Parkway offers forgiving, scenic routes that invite <https://martintbdc537.wpsuo.com/how-to-treat-hormonal-acne-without-antibiotics-modern-alternatives> consistency. A brisk 30 to 45 minute walk most days softens anxiety, helps with hot flashes, and improves sleep quality. On stormy days, indoor mall laps or stair intervals at home keep the chain unbroken.

Short bursts for a bigger effect. High intensity intervals are not for everyone, but one or two weekly sessions of short efforts - say, 30 seconds of faster cycling or uphill walking followed by 90 seconds easy - can improve insulin sensitivity and mood. If you tend toward palpitations during perimenopause, keep intervals submaximal and build gradually.

Mobility and pelvic floor care. Stiff hips and a tender low back respond well to daily 10 minute mobility sessions. Gentle hip openers, spinal rotations, and shoulder work go far. If you notice urinary urgency, heaviness, or discomfort with intercourse, a pelvic floor physiotherapist in London can assess whether you need strengthening, relaxation, or a mix. Many women do better with down-training initially, not endless Kegels.

Sleeping again when hormones are not helping

Sleep is where many women feel most defeated. The mix of night sweats, rumination at 3 a.m., and early waking can linger. I find progress when two tracks are combined: environmental control and nervous system training.

Bedroom microclimate. Keep the room cool and dark. Breathable cotton or linen bedding outperforms synthetics when night sweats are frequent. Cooling mattress toppers can reduce awakenings by taking the edge off heat spikes. If your partner runs warm, consider a dual-zone blanket so you can stay cooler.

Sleep timing and anchors. Menopause disrupts circadian rhythm predictability. Fixed wake time and morning light exposure act as anchors. Step outside within an hour of waking for 5 to 10 minutes, even on overcast London mornings. Caffeine after lunch quietly compromises sleep depth. If you wake at night and cannot fall back asleep within 20 minutes, get out of bed, read something light in dim light, then return to bed when sleepy. This preserves the bed as a sleep cue.

Paced respiration for vasomotor calm. Slow breathing techniques, about 6 breaths per minute for 10 to 15 minutes in the evening, train a more balanced autonomic tone. Clients report fewer, less intense hot flashes after consistent practice. Guided audio helps in the first weeks.

Cognitive behavioral strategies. Brief cognitive behavioral therapy for insomnia can recalibrate the sleep system in four to six weeks. It addresses the unhelpful cycle of worrying about sleep that then prevents it. A naturopath familiar with CBT-I principles can integrate these into care or refer to a local therapist.

Magnesium, glycine, and cautious botanicals. As a first line, magnesium glycinate and glycine powder before bed are gentle and often effective. Some herbs get airtime - black cohosh and valerian, for instance - but responses vary and interactions exist. If you take SSRIs, antihypertensives, or anticoagulants, discuss any botanical trial with your provider before you start.

Mood, focus, and the midlife brain

Estrogen modulates neurotransmitters such as serotonin and dopamine. When levels fluctuate, mood and attention can follow suit. Women who never struggled with anxiety sometimes notice a steady hum of unease. Those with prior PMS or postpartum mood changes may see echoes.

Daily structure helps more than it sounds. A short morning routine that locks in hydration, protein, and 10 minutes of movement steadies the first half of the day. Planning focused work in 60 to 90 minute blocks with real breaks maintains cognitive stamina better than pushing through. If brain fog is stubborn, rule out low ferritin, B12 deficiency, thyroid issues, and sleep apnea.

Omega 3s and regular sunlight time improve mental resilience. So does strength training. If depression or anxiety escalate, timely referral for counseling or medication is a sign of wise self care, not failure. Menopause symptoms are not purely lifestyle problems; chemistry matters.

Hot flashes without white knuckling

Hot flashes have triggers and thresholds. Lowering the threshold with prescription therapy is one option. Increasing your trigger tolerance is another. Most women benefit from both approaches over time.

Hydration and meal timing play a larger role than expected. Dehydration makes flashes sharper, as does high glycemic snacking. Replace the late afternoon sugar hit with a protein rich snack and water. Keep a cooling cloth or small fan nearby at night. Alcohol is a frequent culprit. If you still enjoy a glass of wine, have it earlier and pair it with a meal, noting whether red wine performs worse than clear spirits for you.

Acupuncture has modest but real support for hot flash frequency reduction. In London Ontario, several acupuncture practitioners integrate this into perimenopause treatment. Expect a series of weekly sessions at first, then tapering as symptoms ease.

Weight changes and what is actually doable

Many women gain 2 to 5 kilograms in the perimenopausal window even without major changes in diet. The reasons include reduced energy expenditure, lower estrogen, and shifts in sleep. Aggressive dieting often backfires. A better starting point: hit protein targets, slightly trim refined carbohydrates, and keep strength training non negotiable. Aim for a modest weekly caloric deficit if weight loss is a goal, but avoid dropping below a level that leaves you wired and sleepless. Progress may be steadier than dramatic.

Pattern changes predict success. Preparing protein forward snacks on Sundays, booking strength sessions in your calendar, and setting boundaries around late night screen time move the dial more than elaborate biohacks.

Sexual health, comfort, and connection

Genitourinary syndrome of menopause includes vaginal dryness, pain with intercourse, urinary urgency, and recurrent infections. These symptoms respond well to local treatments and practical adjustments.

Regular use of non irritating moisturizers and lubricants makes a large difference. Choose products without strong fragrances or warming agents. Vaginal moisturizers used several times a week maintain tissue comfort even without sexual activity. Pelvic floor physiotherapy helps with both pain and urgency. If symptoms persist, local vaginal estrogen delivers targeted relief with minimal systemic absorption. A naturopath can coordinate with your primary care clinician for a prescription and help monitor response.

Bone and heart, the quiet priorities

Bone density declines accelerate after the final menstrual period. Calcium from food should lead, not pills. Three servings of dairy or fortified alternatives, plus leafy greens and canned salmon with bones, often cover needs. Vitamin D sufficiency and resistance training complete the foundation. A bone density scan around the early postmenopausal years sets a baseline for future comparison.

Cardiovascular risk edges up after menopause, especially with family history, high blood pressure, or elevated lipids. Blood work that includes fasting lipids, A1C or fasting glucose, and inflammatory markers where appropriate guides attention. Walking, strength work, fiber, and omega 3s pull together on this front. If your blood pressure consistently reads above 130 over 80 at home, bring those numbers to your provider. Lifestyle is powerful, but medication is sometimes the safest move.

How naturopathy fits in London Ontario

Naturopathic Doctors in Ontario are regulated by the College of Naturopaths of Ontario. Appointments are privately paid and not covered by OHIP, though many extended health plans reimburse a portion. Laboratory testing ordered by your family physician or nurse practitioner is generally OHIP covered. In practice, effective menopause care in London blends naturopathic strategies with family medicine follow up.

A first visit with a naturopath usually runs longer than a standard medical appointment and often includes a thorough history, review of cycle changes, sleep patterns, nutrition, and stressors. Expect concrete starting points rather than a laundry list of supplements. Targeted testing may be suggested, but blanket hormone panels are rarely necessary to begin lifestyle shifts. If prescription options become appropriate, your naturopath can coordinate with your physician or nurse practitioner. Bioidentical hormone replacement therapy requires a prescription by a licensed prescriber in Ontario.



Here is a simple way to prepare so you get value from the first session:

- A 7 day snapshot of meals, sleep times, caffeine, alcohol, and exercise.
- A list of top three symptoms you most want to change, ranked.
- Current medications and supplements with doses.
- Recent lab results, especially thyroid, iron, B12, A1C, and lipids.
- A rough menstrual timeline from the past year, including any skipped cycles.

BHRT therapy and when to consider it

The phrase bioidentical hormone replacement therapy refers to hormones that are chemically identical to those produced by the human body, typically estradiol and progesterone. In appropriate candidates, BHRT can sharply reduce hot flashes, improve sleep, and help with vaginal dryness. It may also have favorable effects on bone density. In London Ontario, BHRT therapy is accessed through physicians or nurse practitioners. Some clinics coordinate care with naturopaths who support lifestyle and symptom tracking while the prescriber manages dosing and safety.

Who benefits most. Women within 10 years of their final period and under about 60 tend to see the best risk benefit profile. Severe hot flashes, night sweats, sleep disruption, and mood instability that have not responded to lifestyle

changes are strong indications for a BHRT discussion. A family or personal history of hormone sensitive cancers, clotting disorders, or uncontrolled hypertension changes the calculus and requires careful evaluation by your prescriber.

Delivery matters. Transdermal estradiol, delivered through a patch or gel, maintains steadier blood levels and carries a lower clotting risk than oral forms. If you have a uterus, progesterone is added to protect the endometrium. Micronized progesterone taken at night often improves sleep quality for many women. Doses are individualized and adjusted based on symptoms and, when indicated, endometrial safety checks.

Compounding versus standardized products. Many women hear about custom compounded creams. While compounding has a role for specific situations, standardized, regulated products offer consistent dosing and quality control. Discuss options with your prescriber and ask what monitoring is planned. Naturopaths can help you track response and side effects in a structured way so adjustments are easier for your prescribing clinician.

Duration and review. A common practice is to reassess annually. Some women use BHRT for several years to traverse the most symptomatic period, then taper. Others prefer a longer course for bone or symptom reasons. There is no single right timeline, only a thoughtful, ongoing conversation balancing relief with risk.

If you are searching specifically for BHRT therapy London Ontario, ask clinics about their coordination practices, how they monitor blood pressure and mammography schedules, and whether they offer shared care models that include lifestyle coaching. That level of integration leads to better outcomes.

Herbs, supplements, and a clear eyed view

Supplements can help, but they are not neutral. I approach them with the same rigor as prescriptions.

Phytoestrogens. Foods like soy, flax, and legumes contain plant compounds that gently interact with estrogen receptors. For many women, including soy milk, tofu, tempeh, and flaxseed in the diet is safe and can modestly help hot flashes. Whole foods are preferred over high dose extracts unless advised by your provider.

Black cohosh. Some women report fewer hot flashes with black cohosh, though evidence is mixed and quality varies. There have been rare reports of liver issues. If used, choose a standardized product, keep the dose within common ranges, and avoid if you have liver disease or are on hepatotoxic medications. Reassess after 8 to 12 weeks and discontinue if there is no benefit.

St. John's wort. Sometimes discussed for mood, but it interacts with many medications, including SSRIs and oral contraceptives. Do not start without a medication review.

Magnesium, vitamin D, omega 3s. These three sit in the “often helpful, usually safe when dosed appropriately” category, with caveats for kidney disease, anticoagulants, and high baseline vitamin D levels. Testing informs dosing and avoids overdoing it.

A naturopath familiar with both the evidence and your medication list can help you avoid stacking supplements that do the same job or, worse, work against each other.

Testing that earns its keep

I favor tests that change management. Thyroid screening is sensible with fatigue, weight changes, and hair loss. Ferritin helps explain brain fog and restless legs. A1C and fasting insulin or glucose outline metabolic risk. Lipids guide cardiovascular strategy. Vitamin D supports bone planning. If periods are still irregular and heavy, a CBC rules out anemia. Salivary or urinary multi point hormone testing sounds appealing, but for most women, symptom driven therapy and standard blood work are more actionable and cost effective.

When to escalate care quickly

Lifestyle levers are powerful, but certain situations need medical evaluation without delay:

- New onset chest pain, severe shortness of breath, or sudden weakness.
- Vaginal bleeding more than 12 months after your last period.
- Severe depression, thoughts of self harm, or panic attacks that escalate.
- Frequent palpitations, fainting, or blood pressure consistently above 160 over 100.
- Unintentional weight loss, night sweats unrelated to hot flashes, or persistent pelvic pain.

Making it workable in the London context

Life in London has its quirks. Winter's early darkness complicates outdoor exercise and mood. Use indoor options at community centers, pick a strength routine you can do in 25 minutes, and get light exposure early in the day. Summer humidity can amplify hot flashes. Cooling towels and earlier walks sidestep the worst heat. Local produce cycles through the markets from May to October. Build menus around what is abundant, because flavor drives adherence.

Healthcare access can be patchy. If your family doctor's schedule is tight, keep a log of symptoms and experiments so short appointments are productive. Naturopathic visits can bridge the gap with longer check ins and structured plans, while still leaning on your primary care provider for screening and prescriptions. If you are comparing clinics for menopause treatment London Ontario, ask how they handle communication with your physician and whether they offer virtual follow ups for weather heavy weeks.

A sample month that balances change with grace

Week 1. Shift breakfast to include 25 to 30 grams of protein. Set a fixed wake time and five minute morning light ritual. Start magnesium glycinate at night. Two 30 minute walks plus one short strength session.

Week 2. Add a second strength day. Trim alcohol to weekends only and note any changes in night sweats. Begin paced breathing practice in the evening.

Week 3. Check on sleep anchors. Move caffeine to before noon. Swap one refined carb portion for legumes or intact grains daily. Book a bone density test if you are within a few years of your final period and have not had a baseline.

Week 4. Review logs. If hot flashes remain frequent and severe, schedule a conversation with your primary care clinician about prescription options. Consider a pelvic floor physiotherapy assessment if urinary urgency or discomfort persists. Decide what to keep, what to adjust, and what to test next month.

This kind of pacing respects real life. It also makes it easier to see cause and effect.

The payoff of a layered approach

Relief rarely comes from a single tactic. Instead, a handful of well chosen actions, stacked together and kept consistent, change the day to day experience. Hot flashes lose their edge. Sleep stretches longer between awakenings. Mood steadies. Strength sessions restore a sense of physical confidence. For women in perimenopause treatment London Ontario, a naturopath can be the steadying hand that ensures your plan remains clear, evidence informed, and personal, with room for progress and for grace.

If your next step includes talking about bioidentical hormone replacement therapy, come prepared with your symptom priorities, your willingness to experiment, and your questions about safety. If you prefer a lifestyle led path, give it the structure and time it needs, then reassess. Menopause is not [bhrt therapy london ontario](#) a test of willpower. It is a transition. With the right mix of daily habits, collaborative medical care, and a little patience, it becomes more navigable and far less loud.

Business Information (NAP)

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Hours

Monday: 11:30 a.m. - 5:30 p.m.
Tuesday: 8:30 a.m. - 3:00 p.m.
Wednesday: 9:30 a.m. - 3:00 p.m.
Thursday: 11:30 a.m. - 5:30 p.m.
Friday: 8:30 a.m. - 3:00 p.m.
Saturday: Closed
Sunday: Closed

Plus Code: XPWW+HM London, Ontario

Google Maps URL: <https://maps.app.goo.gl/pzSdRYMMcAeRU32PA>

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Social Profiles

Facebook: <https://www.facebook.com/totalhealthnd>

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Serving the local community, Total Health Naturopathy & Acupuncture provides trusted holistic care.

Patients visit Total Health Naturopathy & Acupuncture for natural support with weight loss and more.

To book or ask a question, call Total Health Naturopathy & Acupuncture at (226) 213-7115.

Email Total Health Naturopathy & Acupuncture at info@totalhealthnd.com for inquiries.

Learn more online at <https://totalhealthnd.com/>.

Find directions on Google Maps: <https://maps.app.goo.gl/pzSdRYMMcAeRU32PA>.

Popular Questions About Total Health Naturopathy & Acupuncture

What does Total Health Naturopathy & Acupuncture help with?

The clinic provides natural, holistic solutions for Weight Loss, Pre- & Post-Natal Care, Insomnia, Chronic Illnesses and more. Learn more at <https://totalhealthnd.com/>.

Where is Total Health Naturopathy & Acupuncture located?

784 Richmond Street, London, ON N6A 3H5, Canada.

What phone number can I call to book or ask questions?

Call [\(226\) 213-7115](tel:(226)213-7115).

What email can I use to contact the clinic?

Email info@totalhealthnd.com.

Do you offer acupuncture as well as naturopathic care?

Yes—acupuncture is offered alongside naturopathic services. For details on available options, visit <https://totalhealthnd.com/> or inquire by phone at (226) 213-7115.

Do you support pre-conception, pregnancy, and post-natal care?

Yes—pre- & post-natal care is one of the clinic's listed focus areas. Visit <https://totalhealthnd.com/> for related resources or call (226) 213-7115.

Can you help with insomnia or sleep concerns?

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How do I get started?

Call [\(226\) 213-7115](tel:2262137115), email info@totalhealthnd.com, or visit <https://totalhealthnd.com/>.

Landmarks Near London, Ontario

- 1) [Victoria Park](#) — Visiting downtown? Keep Total Health Naturopathy & Acupuncture in mind for reliable holistic support.
- 2) [Covent Garden Market](#) — Explore the market, then reach out to Total Health Naturopathy & Acupuncture at (226) 213-7115 if you need care.
- 3) [Budweiser Gardens](#) — In the core for an event? Contact Total Health Naturopathy & Acupuncture: <https://totalhealthnd.com/>.
- 4) [Museum London](#) — Proud to serve London-area clients with natural care options.
- 5) [Harris Park](#) — If you're nearby and want to support your wellness goals, call (226) 213-7115.
- 6) [Canada Life Place](#) — Local care in London, Ontario: <https://totalhealthnd.com/>.
- 7) [Springbank Park](#) — For weight loss goals, contact the clinic at info@totalhealthnd.com.
- 8) [Grand Theatre](#) — Need a local clinic? Call Total Health Naturopathy & Acupuncture at (226) 213-7115.
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- 10) [Fanshawe Pioneer Village](#) — If you're visiting the area, learn more about services at <https://totalhealthnd.com/>.