GUIDE 03 · MAREN WHITLOCK

Feel It Again

Natural Drinks, Teas, and Foods That Restore Energy and Mood on GLP-1s

Think before you inject.

A NOTE BEFORE YOU START

GLP-1 medications quiet more than hunger. They can quiet motivation, pleasure, drive, energy, and the background hum of feeling well. This is not imagined and it is not weakness.

This guide is for the men and women who are losing weight and wondering why they do not feel better. The answers are practical, natural, and grounded in evidence.

This guide is educational. Talk to your clinician before adding supplements or making significant changes to your daily routine.

01 — WHAT IS HAPPENING

Why You Feel Flat on a Medication That's Working

GLP-1 receptors are not only in the gut and pancreas. They are distributed throughout the brain — including the mesolimbic dopamine system, the brain's primary reward and motivation circuit.

When semaglutide or tirzepatide activates these receptors to suppress appetite, it also modulates dopamine signaling in ways that can reduce the pleasure response to food, social connection, creative work, and daily activities that previously felt rewarding.

This phenomenon — anhedonia, or reduced capacity for pleasure — is reported by a meaningful percentage of GLP-1 users and is rarely discussed in standard prescribing conversations.

HOW IT PRESENTS IN MEN

Men frequently report reduced drive, motivation, and competitive energy alongside reduced libido. The feeling is often described as flat, disconnected, or simply less.

HOW IT PRESENTS IN WOMEN

Women frequently report emotional flatness, reduced enjoyment of social connection, and a sense of going through the motions without the small pleasures that made daily life feel worth it.

> ***Maren's note:*** *Flat mood on a GLP-1 medication is a pharmacological effect worth discussing with your clinician. It is not permanent — but it is not something to simply wait out.*

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02 — GINGER

The Most Underestimated Root in Your Kitchen

Ginger has more peer-reviewed clinical research behind it than almost any other culinary botanical. Its active compounds — gingerols and shogaols — have demonstrated anti-nausea, anti-inflammatory, circulation-enhancing, and mood-supporting effects in multiple clinical trials.

For GLP-1 users specifically, ginger addresses two of the most common complaints simultaneously: it improves gastric motility — counteracting the slowed digestion that GLP-1s cause — and supports serotonin signaling pathways involved in both mood regulation and gut comfort.

- Fresh ginger tea: steep one inch of sliced fresh ginger in hot water for 10 minutes. Add lemon and honey
- Morning energy shot: fresh ginger, lemon juice, pinch of cayenne, and water
- Add one teaspoon of fresh grated ginger to smoothies

- Ginger and honey in warm water: simple and palatable even without appetite
- Crystallized ginger: portable, useful for nausea management throughout the day

> ***Maren's note:*** *Fresh ginger root is significantly more bioactive than dried or powdered. Keep fresh root in the refrigerator — it lasts two to three weeks.*

03 — SAFFRON

The Most Researched Spice for Mood Support

Several clinical trials — including work by Akhondzadeh and colleagues and later by Lopresti — have found saffron comparable to low-dose SSRIs for mild to moderate depressive symptoms in small studies, with a particularly notable effect on anhedonia. Most of these trials are small and short in duration, and replication in larger independent studies is still emerging. The evidence is promising and worth discussing with your clinician.

The active compounds in saffron — safranal and crocin — appear to modulate serotonin reuptake and support dopamine signaling. Benefits have been documented in both men and women in clinical trials.

- Saffron golden tea: steep 8 to 10 threads in hot water for 15 minutes
- Add to warm milk with honey for a calming evening drink
- Combine with ginger tea for a dual-action mood and digestion drink
- Add a pinch to rice, soups, or scrambled eggs — culinary use counts
- Saffron capsules: 30mg daily is the dose used in most clinical studies
- Look for Iranian or Spanish saffron from reputable sources — quality matters

> ***Maren's note:*** *Saffron takes four to six weeks of consistent daily use to produce the mood effects documented in research. It is a daily practice, not a same-day intervention.*

04 — ADAPTOGENS

Plants That Help Your Body Find Its Baseline

Adaptogens are a class of botanicals with clinical evidence for supporting the body's stress response, energy regulation, hormonal balance, and cognitive function. They modulate rather than stimulate — helping the body return to baseline when stress, medication, or reduced nutrition has pulled it off center.

ASHWAGANDHA — FOR EVERYONE

Ashwagandha is the most studied adaptogen with the broadest evidence base. Clinical trials using KSM-66 and Sensoril extracts show consistent benefits for cortisol reduction, stress resilience, and sleep quality. For men specifically, multiple trials have shown meaningful increases in testosterone levels at 300 to 600mg daily — though individual responses vary.

RHODIOLA ROSEA — PARTICULARLY BENEFICIAL FOR MEN

Rhodiola has solid clinical evidence for fatigue reduction, cognitive performance, and physical endurance — making it highly relevant for men experiencing the drive and motivation reduction associated with GLP-1 medications.

LION'S MANE MUSHROOM — FOR EVERYONE

Lion's mane has shown nerve growth factor effects in animal studies and early human research. It is widely used for cognitive clarity and focus support, with promising but still emerging human evidence.

MACA ROOT — PARTICULARLY BENEFICIAL FOR WOMEN

Maca has clinical evidence for supporting energy, libido, and mood in women — particularly during perimenopause and postmenopause. The mechanism appears to support mood and libido through pathways that are still being studied. It does not directly affect estrogen levels.

- Start with one adaptogen at a time — layering multiple makes it impossible to know what works
- Give each adaptogen six weeks before evaluating — effects are cumulative
- Morning is best for most adaptogens — ashwagandha can also be taken at night for sleep
- Look for clinically studied extracts — quality and standardization matter significantly

> ***Maren's note:*** *Adaptogens reward consistency. The person who takes ashwagandha daily for three months will have a meaningfully different experience than the person who takes it occasionally.*

05 — ELECTROLYTES

The Energy Fix Nobody Considers First

Electrolyte depletion is one of the most common and most overlooked causes of fatigue, brain fog, and low mood on GLP-1 medications. Reduced food intake means reduced electrolyte intake. Sodium, potassium, and magnesium are the three most commonly depleted — all three directly affect energy, mood, and cognitive performance.

- Morning electrolyte drink: 500ml water, pinch of sea salt, squeeze of lemon, dash of honey
- Coconut water: natural potassium and magnesium source
- Electrolyte powders: look for sodium, potassium, and magnesium without excessive sugar
- Magnesium glycinate: 200 to 400mg before bed supports sleep and muscle recovery
- Avocado: potassium-rich, healthy fats, easy to eat without appetite
- Bone broth: sodium, minerals, and collagen in easily consumable form

> ***Maren's note:*** *If you wake up with a headache or fatigue before the day starts, drink 500ml of salted water before reaching for coffee or pain relief. Electrolyte deficit is frequently the cause and the fix is immediate.*

06 — TESTOSTERONE AND GLP-1 MEDICATIONS

The Conversation Men Are Not Having With Their Doctors

The relationship between GLP-1 medications and testosterone in men is an area of active research. Some studies suggest weight loss itself can improve testosterone in men with obesity-related hypogonadism. Other research and clinical observation suggests some men experience reduced libido and drive that is not fully explained by weight loss alone.

WHAT MEN SHOULD DISCUSS WITH THEIR CLINICIAN

- Baseline testosterone levels before starting — this is your reference point
- Follow-up testosterone testing at 3 and 6 months
- Free testosterone versus total testosterone — the distinction matters clinically
- SHBG levels — can increase during weight loss and affect free testosterone availability
- LH and FSH levels — reveal whether the issue is testicular or pituitary
- Whether changes preceded or followed medication initiation

NATURAL SUPPORT FOR MALE HORMONAL HEALTH

- Heavy resistance training — the strongest natural hormonal stimulus available
- Adequate dietary fat — testosterone synthesis requires cholesterol as a precursor
- Zinc supplementation — directly involved in testosterone synthesis

- Vitamin D — clinically associated with testosterone levels in multiple studies
- Ashwagandha KSM-66 — multiple RCTs showing testosterone support in men
- Sleep — most testosterone production occurs during deep sleep stages
- Stress reduction — chronic cortisol elevation directly suppresses testosterone

> ***Maren's note:*** *Reduced libido or drive is not something to simply accept without investigation. Ask your clinician for a complete hormonal panel.*

07 — LIBIDO AND PLEASURE

The Side Effect Nobody Warns You About

Reduced libido and pleasure response are among the most consistently reported but least discussed side effects of GLP-1 medications. They affect men and women, mediated by the same dopamine and reward circuitry discussed throughout this guide.

FOR MEN

Men most commonly report reduced initiation — the drive to pursue intimacy decreases even when physical response remains intact. This is distinct from erectile function and should be discussed separately with a clinician if it persists.

FOR WOMEN

Women most commonly report reduced desire and reduced pleasure response. For women in perimenopause, GLP-1 effects can amplify existing hormonal changes.

NATURAL INTERVENTIONS FOR BOTH

- Maca root — clinical evidence for libido support in both men and women
- Ashwagandha — reduces cortisol and anxiety that suppress desire
- Zinc — testosterone precursor in men, supports hormonal balance in women
- Exercise — dopamine and endorphin release directly supports desire
- Sleep — libido is strongly correlated with sleep quality and duration
- Discuss with your clinician — dose adjustment is sometimes sufficient

> ***Maren's note:*** *Bring specific language to your clinician: reduced desire, reduced pleasure response, or reduced initiation. Be precise.*

08 — THE MORNING RITUAL

Putting It Together Into a Practice That Works

The most effective approach is a sequenced morning practice that addresses energy, mood, hydration, and hormonal support in the first 90 minutes of the day — before the medication's suppression has fully activated.

- 1. Wake — drink 500ml water with sea salt and lemon immediately
- 2. Light — get outside or open a window within 30 minutes of waking
- 3. Move — 10 minutes of gentle movement. Walk, stretch, or light bodyweight work

- 4. Saffron or ginger tea — steep while moving, drink before or with breakfast
- 5. Protein breakfast — eggs, yogurt, or a protein shake
- 6. Adaptogen — ashwagandha or rhodiola with breakfast if using
- 7. Electrolytes — magnesium powder in water or magnesium glycinate capsule

FOR MEN — ADDITIONAL MORNING SUPPORT

- Cold exposure — 60 seconds of cold water at the end of your shower has evidence for cortisol regulation and acute hormonal support
- Zinc supplement with breakfast if dietary zinc is low
- Resistance training session if schedule allows

FOR WOMEN — ADDITIONAL MORNING SUPPORT

- Maca powder in tea or smoothie — supports hormonal balance and energy
- Vitamin D with breakfast — important for bone health and mood
- Gentle yoga or stretching — supports body awareness and pelvic floor health

> ***Maren's note:*** *You do not have to do all of this perfectly every day. You have to do most of it most days. Start with two or three elements and build from there.*

The supplements, foods, and products referenced throughout this guide are ones Maren has researched carefully. For current recommendations and vetted links visit Maren's profiles on Instagram, TikTok, and Facebook — or go directly to marenwhitlock.com. These are updated regularly as the evidence evolves.

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