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Megan [00:00:06] Before we get started with today's episode, I would like to quickly read you our podcast disclaimer.

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[00:01:13] All right. And now we'll get started with today's episode.

Terri [00:01:19] Welcome, everybody. This is Dr. Terri Lance with another episode of The Fasting Method podcast. And this week is a special event for me because, once again, I'm getting to interview one of my clients and our Community members, and I was very excited this time to get to invite in LeeAnn Janissen. I think you'll just pick up real quickly, there's lots of great things in her story and lots of great insights and things that I totally geek out on listening to and talking about, so I'm really looking forward to this. LeeAnn, how are you doing?

LeeAnn [00:01:57] Hi, I'm great. Thank you so much for having me on.

Terri [00:02:00] Yeah, my pleasure. My honor, geez. So, LeeAnn, I wanted to get started just by talking-- having you share some about your story. Just give a little background about kind of what's your journey been, health or weight wise, why you came to TFM and what that's been like for you.

LeeAnn [00:02:18] Okay. So, I sort of think of my story as being in three distinct phases. So there's the first phase, which is like the before times. Then there's a phase that I would call sort of DIY fasting, where I was fasting on my own. And then there was the phase that started in about January 2022 when I joined the Fasting Method and started working with you.

[00:02:49] So the first phase, you know, the before times, like many people, I struggled with my weight. I didn't really struggle so much as a child. I was a bit of a chubby child, but I didn't have many health problems and I wasn't really obese. But as I, you know, grew and I went out on my own, the weight started to come on and I was always struggling. And I went on some big calorie-reduced diets and I would lose, you know, 20 pounds, put on 30, lose more weight, and so on. And this kind of went on until probably about 2015, 2016, and that's when the health consequences really started to come in.

[00:03:37] A few things happened at the same time and during the process of getting scans for these medical issues, I was diagnosed with nonalcoholic fatty liver disease. So I was referred to a liver doctor and he said, "You know, this is moderate to severe. We really have to treat this." I mean, just to give you an idea, the numbers that should have been

below 20 were at 160. So it was not a small case. He said, "You know, we have to treat this." And I said, "Okay, how do we treat it?" And he said, "Well, losing weight is the treatment." And I said, "Oh, well, thank you. You know, if I'd thought of that, you know, I would have done it earlier." [laughter] And he said, "Yeah, you've got to do that. You've just got to do it." I'm like, "Okay, any ideas?" "No. You know, I can send you to a dietician." I said, "Oh, I'm sick of that. I've been there, done that." So I left.

[00:04:34] And then during all of this, I discovered I had also (at the same time) a hernia and I had to have it repaired. So I went to a specialty hernia clinic thinking they would do a really good job and I was refused medical care. They said, "We won't operate on you because you're overweight and you have to lose 50 pounds before we'll do a surgery on you." They said, "You can speak to our dietician in the area there and she will help you."

[00:05:04] So I had later got my surgery right away and he was scandalized that they would turn me away, but they did turn me away. So I went to this dietician just to hear what she would have to say. And she said, "Well, we recommend a low-carb diet." And I said, "Great, I've tried low carb before," and I had tried low carb before. You know, a decade earlier, my colleagues were all doing the Atkins Diet. So I tried the Atkins Diet and I had some success, but I realize now that I wasn't really successful because I was focusing on carbs and not reducing the insulin. So I'm like, "Oh, yeah, low carb, I know it. Let's talk about this." So I said, "Okay, well, I know how that works." Then she said, "We also recommend possibly some intermittent fasting." And I thought, "Intermittent fasting. What kind of crazy woman is this? What kind of crazy talk? There's this crazy woman with this crazy idea at this terrible clinic that's refusing me treatment." So I just left. I said, "I've had it with these people."

Terri [00:06:08] Oh, if you only knew what was in store in your future. [laughs]

LeeAnn [00:06:13] I know! This crazy woman was telling me to fast. So I was very depressed because I had a fatty liver that I had to treat and I wasn't getting treatment for my hernia. So I was at a bookstore and I happened to see out of the corner of my eye this book, *The Complete Guide to Fasting*, which was an early book that Dr. Fung wrote. So I thought, "That's what this crazy woman recommended. Let me buy it." And I read it and the light bulb went off, that it's all about the insulin. So I quickly read *The Obesity Code* as well. And I had, like many people have, my eureka moment, that, "Oh, my God!" This is the model of physiology that I have to use, that it's about controlling the insulin.

[00:06:58] So that started my DIY fasting period in 2016. And in 2016, not only did I have the fatty liver, but my overall health and wellbeing was really not very good. I had tremendous joint pain. I almost couldn't walk. I remember really, really struggling to go up and down stairs. I couldn't carry anything. I had to grab the railing. I had a very difficult time finding shoes that I could wear. I mean, I wasn't disabled, but I certainly couldn't go on. You know, I was in my early fifties and I thought, "Oh, my goodness."

[00:07:34] So I started fasting. I just said, "Okay, gotta fast. Let me do it." And I just white-knuckled through a 24-hour fast. And then I celebrated by getting a hamburger and French fries and a milkshake because I did so well.

Terri [00:07:47] Of course. [laughs]

LeeAnn [00:07:49] You can see the pattern, but I was also having blood drawn every week because of my liver, and my liver enzymes started to come down right away, so much so

that my doctors phoned me and said, "Whatever it is you're doing, keep doing that." So my liver enzymes started to come down and I started to heal my liver. I did start to lose weight as well and I lost about 30 pounds, I would say, just doing my fasts and then eating whatever on my food days. I think I was doing probably-- I was trying to do one 66-hour fast a week, but that was really hard. So I was doing a few 24-hour fasts and my liver enzyme numbers were coming down and they were into the normal range. I was discharged from my liver doctor, so that was a big success. I had lost 30 pounds. I was walking better. It was great. And, you know, he discharged me and I said, "I am cured. I know how this works. I'm cured." And I know you know how the story went after that. [laughter]

[00:09:00] So this is the DIY fasting period. And that was that took me about from 2016 probably until about 2018. And then lots of changes happened in my life, and so on, and I moved countries. Around about 2021, end of 2021, I had lost 30 pounds and gained 40, and my liver numbers were just starting to come back up again. I said, "I've got to start fasting again," and it was really hard, but I said, "I gotta start fasting again, but there's more to this than just keeping the insulin low and just fasting. There's something else. There's more skills that I need to do. There's other stuff that I need to learn because I can't keep going through this cycle all the time. Like, I believe that I've got the model right. I believe that focusing on insulin is the right thing to do but, clearly, I'm missing some things, I'm missing some skills." I had known about the Fasting Method and what it was previously called and I said, "You know what? I'm going to lean into what I believe is the right thing and join the Fasting Method." And that's when I started working with you and that's when I started to learn-- well, there were two things that happened right away.

[00:10:16] First of all, I started learning about all the other-- basket of skills that I need. And secondly, I learned a really critical concept - this concept of fasting with enough intensity to have it be therapeutic. Because I was trying to do a 66 here or maybe a 24 now and again, and it was hard so I thought it was enough. And then I learned, no, to really get results, I have to fast with enough intensity every week to really get results. So I said, "Okay, I'm going to do that. I'm going to do alternate-day fasting - Monday, Wednesday, Friday - 36 or 42 hours." So I jumped into doing that and I started to get results. And so that was really successful.

[00:11:04] And then at the same time, I started to work on all the other parts of it that make it work. I remember when we started working together, you know, one of the first things that you suggested, that you taught me is TRE (that, you know, you eat only meals), and you encouraged me to say it, "Okay. I eat only meals. I eat only meals." So I started saying that to myself - "I eat only meals." I wasn't doing it yet, but I was saying it to myself. And so that was really critical.

[00:11:40] So now, I've not finished my journey. I'm a little over halfway. I've lost 45 pounds, I'm feeling so much better, all my biomarkers are great. My liver enzymes, my triglycerides, my cholesterol - they're all great, great, great. I feel so much healthier. I believe, and I can see the light at the end of the tunnel. It's still a fair distance away. My goal-- I still want to lose another 25 pounds, but I know that I can get there with the skills that I've been working on.

Terri [00:12:16] That's fantastic. I think I've lived through part of this story with you and I've gotten to hear you talk about it again one time when you were one of the panelists in our town hall meeting, but every time it's still exciting to me. I wanted to interrupt, but then I didn't want to tell things ahead of time. But when you were talking about 2016 - the pain,

difficulty with movement and things, just, you know, how you weren't doing very well - and I thought, "Oh my gosh, I remember you talking about, you know, 'Terri, I have to finish this meeting so that I can go play pickleball.'"

LeeAnn [00:12:53] Yeah.

Terri [00:12:54] And that wasn't even something-- that was seven years ago. It's like you're reverse aging.

LeeAnn [00:13:01] I feel like I'm reverse aging. I genuinely do. Like, my cognitive ability is dramatically increased. I feel cognitively, I feel mentally, in my job, like, 20 years ago. In 2016, I changed jobs to a pretty technical job, the one that I have now, and I remember thinking, "Oh my God, a decade ago I was so much smarter. I can't do this. I can feel my brain is struggling," and I feel really that my brain has reverse aged. And yes, I've taken up pickleball. I have a sport. I have a sport now. I've never had a sport in my whole life. I've never had a sport, and I found one. I play three times a week with my husband, so that's something we can do together. I even went to Florida for a pickleball camp, a three-day pickleball camp. That is how far down the pickleball road I'm going. And I've played in competitions, so who would have thought that I could do that? I'm pretty proud of myself for that. Another thing that you told me is to celebrate my wins. You've taught me that. And I'm just saying how proud of myself I am for doing that. Like, I really-- I genuinely am. Who would have thought that I could do that?

Terri [00:14:23] Yeah. I even remember you talking about getting an outfit for pickleball and how exciting that was because you felt better in your body and you felt-- you know, there have been many times where I wanted to hide in the corner because I was not comfortable with my body, and so for you to be saying, "Yeah, I'm going to get this and I'm going to wear this and I'm going to go to this camp," that's so exciting.

LeeAnn [00:14:45] I have many pickleball outfits now and some of them are getting a little bit loose now, so that's a good thing too. So I'm going to have to, when I get closer to my goal, I'm going to have to get new pickleball outfits, which is fun.

Terri [00:14:58] Yeah, very good. So LeeAnn, you know, through working together in coaching, but also through the Community membership, coming to meetings where, you know, you're involved in those, you know that a big thing that I talk about is the transformation that happens. And you've highlighted already today, there was a whole toolkit of things that you were realizing you needed. Maybe you didn't know yet what they were, but you knew there were things missing. Just having the knowledge that you had wasn't getting you the transformation that you were seeking. And so I wonder if you could talk about some of the transformational things that the tools that you added to your kit, that you learned over this past little over a year now since you joined TFM, and how that's affected your journey?

LeeAnn [00:15:50] Yeah, there are some really, really big ones that I directly use, and then there's some little subtler ones that are starting to come up now as I kind of consolidate this new identity that I'm building. So, you know, the big ones first are working on the big things - working on the self-sabotage, working on the cravings and the emotional eating. That's why I came to you to work on those, and we did work on those. And just the idea-- this idea of, you know, the inner addictive voice, or the inner toddler, we talk about that a lot, that there is a lower part or a more primitive part or a little toddler part of the brain that says, "You deserve something special. You know, you were so good, you're so smart, you

did so well. Oh, you can just have this one little dessert or you can just have this one little thing." So learning to recognize that voice, that that's also part of me, but there is this other voice that will come to the fore, and learning to work with that inner-toddler voice. You know, this is in the Never Binge Again book. They talk about it as the 'pig' and the 'pig squeal', or you could talk about it as the 'inner toddler'. Different people have different ways of talking about it, but that has been one of the main mindset conceptual tools that I've used to help me.

[00:17:31] And then, you know, the big tool I've already talked about is reframing and renewing my identity. You know, "I am someone who only eats meals." I learned in one of the Community meetings-- people talked about having their affirmations. You know, I didn't really hear about affirmations before, but so I thought, "Hmm, affirmations. Ugh! It's all hocus," you know, "That's all, you know, touchy-feely." But I did it. I made a card of affirmations and I read them to myself. And it's important. And that's another one of the things-- the reason why these affirmations work and the reason I think they work is because I've learned that it's really important how I talk to myself. It's really important what I say to myself, the words that I use to myself because my unconscious mind is listening and my unconscious mind will manifest the things that I say to it. And so I think that's the mechanism for how these affirmations work. You're nodding, so I'm thinking it is. [laughter]

[00:18:42] So anyway, I have my affirmations, so let me read them to you. And I read these-- when I first wrote them, I would-- and this I also learned from the Community - to look in the mirror and read them. And then I also did something else - I recorded them on my phone. So I would look in the mirror and listen to the recording of my voice with my affirmations. It sounds very hokey, but I did it, and it's really powerful, actually.

[00:19:08] Okay, so here are my affirmations.

[00:19:11] "I am someone who enjoys learning."

[00:19:14] "I fast and eat for health and healing."

[00:19:19] That one's important because it was a lot of work for me to not have food be entertainment. So I fast and eat for health and healing, not for entertainment.

[00:19:31] "I eat only meals."

[00:19:32] That's the baseline one. That's the bedrock upon which everything else is built.

[00:19:36] "I eat animal-based and low-carb foods."

[00:19:39] Because that's also been a big journey for me. I've had some health challenges along the way of finding out exactly what foods work for my body, and they're different than other people. So I eat animal-based and low-carb foods.

[00:19:54] "I can do difficult things."

[00:19:58] And then here's my last affirmation.

[00:20:01] "I am a pickleball athlete."

Terri [00:20:03] Woohoo!

LeeAnn [00:20:04] And I look at myself in the mirror and I say, "I am a pickleball athlete." And when I first started doing it, I would have to laugh each time I did it, but I keep saying it because that's what I am.

Terri [00:20:20] Yeah, there's s-- I mean, obviously you can see I'm so excited here on the other side of the screen, but that is so exciting to me because you know I talk a lot about creating the identity that we want, picturing what it's like being in that identity. And when you say, "I am a pickleball athlete," something that you never would have imagined yourself identifying with as an athlete, you have certain images. That's someone who's active, that's someone who's mobile.

LeeAnn [00:20:51] Yeah. Like, I'm just getting chills now when we talk about it. Like, how is that even possible? That I could even say that, just something simple like that. But yeah, so these are-- and this is the difference for me between my DIY fasting phase and this new identity, this new set of skills, this new mindset, this new way of being that I'm constructing. I'm not finished. I'm a work in progress. I'm still doing it, but time-restricted eating is-- really is part of my identity now. I don't have to recite that as one of my affirmations. That's just a default. That's true when I'm on holiday, that's true even when I'm ill. Even when I'm feeling ill, I don't snack all the time. I have meals. So that is one that's pretty solid. The other ones I'm still building, but I can see that this is going to be an identity that's going to get me healthy and I believe that it's going to keep me healthy. So those are the big sort of first-order skills that are going to get me to my destination. I believe that's true.

[00:22:07] The second-order skills I talked about when I was referring to transferable skills is subtler, kind of more quiet, and it's just sort of having a quiet confidence in my own agency, meaning I can choose what to eat and when to eat and I don't have to justify it. I don't have to feel compelled by peer pressure if I'm in a social situation, I can just do what's right for me. I can choose to have alcohol or not. I can say, "Thank you so much for that, I really appreciate the effort. Thank you so much for that," and I can not eat it. So just having this confidence in my own agency, that's one of the subtler things that has changed.

[00:23:08] Last week I had a real test drive of this. I went for a health checkup to a doctor. And as is very common with people eating low carb, my triglyceride numbers (compared to a year ago) are half what they were. My HDL has gone up by about 30 or 40%, but my LDL has also gone up by about 30 or 40% and, apparently, from what I understand, that's very common in the low-carb space and it's actually not a concern. I've done a lot of research-- I haven't done research, I've watched a lot of scientists and doctors who have done the research, and I've read a lot of things, and I am not concerned by my numbers. In fact, looking at it in the way that they do, I think I am healthier with less cardiovascular risk now. This is what I believe based on what I've read and what I've seen. But the doctor said, "We've got to treat this. We've got to treat this LDL cholesterol number." And I said, "Well, hmm. However, this ratio is much healthier." "No, no, no. That's not the important one. This one is really important. We have to treat it." And I just said, "Hmm, yeah. No, I'm not that concerned about it." I said, "If you'd like, we can do another test in six months." He says, "Okay, we'll try in six months, and otherwise we'll have to treat it." And I said, "Okay, well, I'll set an appointment for six months," and I just don't have-- I can just decline.

[00:24:41] I just have confidence in my own agency. I don't have to eat things that I don't want and I don't have to accept treatments that I don't want and that I don't feel that I need. And so I did set the follow-up appointment for six months, and I was feeling a little bit of

stress about it. And I'm like, "You know, I don't want to have to have the argument. What do I do? Do I bring journal articles? I don't want to have to convince them." And my husband is so supportive and he said, "No." He said, "Listen, you are a customer. You don't have to do anything you don't want. You just wait until a week or two before the appointment and then you just cancel it. You just say, 'Yeah, you know, I'll reschedule when it's convenient.'" He says, "You don't have to go." I said, "You're right. I don't have to go. I don't have to do it. I have agency over my own body."

[00:25:38] So that feels so good. That really feels amazing - to have confidence in my own agency and to really know that what I'm doing is healthy, what I'm doing is good, what I'm doing works for me, and that's enough. I don't have to convince anybody. You can disagree with me if you want, but I'm going to keep doing what I want to do. And that really was a big experience for me this past week.

Terri [00:26:10] Two thoughts I have as you're describing that. One, is I remember earlier on in our work together, the socializing was a big thing to have to learn how to navigate.

LeeAnn [00:26:21] Yeah.

Terri [00:26:22] How do I get to connect with people? Because where you live, in the community where you live, you connect at restaurants, you connect at happy hour, social hours, you know, gatherings and things, and really having to learn to be okay, to not join in with some of those aspects, to say, "No thank you," to things that people have generously offered, that you really had to practice those skills and make them fit.

LeeAnn [00:26:46] It was really hard, yes. And I thought, "What are people going to think? What are they going to say?" Nobody cares. They just say, "Oh. Oh, are you fasting today? Okay, that's fine." You know.

Terri [00:26:59] And then the flip side of that is, not only in your journey and, like, advocating for yourself in your medical appointment, but I was thinking you know, because we're in the same meetings, this comes up often in our Community.

LeeAnn [00:27:12] A lot.

Terri [00:27:13] Everyone in their journey faces these type of decisions. "What do I say to people? What do I not say?" "Do I eat, even though I was fasting, because everyone else is eating?" "Do I take a gift of food when it's offered because it was so generous?"

[00:27:28] And and so I love hearing you talk about the evolution of this journey for you. You didn't start with all of these things on day one. You had to develop these skills and these mindsets.

LeeAnn [00:27:39] Yes, exactly. And these are the skills that were lacking in my DIY fasting phase. These are the skills, you know, that were lacking. Another big thing that I remember, you know, when we're talking about this, is just dealing with-- okay, I'm going to say it, it's going to sound a bit funny-- just dealing with the trauma of the before times. And what I mean by that is if you're overweight, it's clearly your fault because you just need to eat less and move more. So what's wrong with you that you can't do that? It's very simple advice. And you just absorb that, just in society.

[00:28:22] But even worse, you get that from medical professionals. You just get this judgment, this blame. And I remember I had a-- probably about four months into my time with The Fasting Method working with you, I had-- I later learned that I was eating foods-- even though I was eating healthy and I was fasting things, I was eating particular foods that do not work for my body. And I've eliminated those foods now, but I didn't know it at the time. And so then I had a case of diverticulitis and it was quite serious and I was hospitalized for five days. And mostly what I felt during that time was not fear for my, you know, my well-being, that I'm hospitalized. Mostly, I felt guilt that people were going to blame me, that it was my fault that I have this illness now and it's my fault. And I thought, "Well, why am I saying, 'It's my fault?' I don't think that's how health things work, you know?" But just this instant gut reaction that, "It's my fault. I don't want to be blamed." Okay, I'm hospitalized, but just don't say that it's my fault. As long as I'm not at fault, phew! Okay, I can deal with all the rest of the health consequences. I just don't want to be blamed again.

[00:29:49] And I saw that play out in all my reactions to when I was hospitalized. And, you know, I've tried to work through that. And I mean, I had one person who's very close to me say, "You see, I told you fasting was dangerous." And I said, "Actually, fasting was the treatment [laughter] because I went into the hospital and they put me on a five-day fast with nil by mouth, just IVs. So, hmm, I don't think fasting caused it. Fasting was the treatment but, anyway, thanks for your opinion!"

[00:30:22] But yeah, so having to deal and process all of this internalized pain and this internalized judgment for being not able to do a very simple instruction - eat less, move more. Why can't you do that? And a lot of people in the Community, from what I hear at the Community meetings, struggle with that, too. And I just love going to the Community meetings all the time because I see all of these people who are so smart and accomplished and capable. And I'm those things, too - I'm smart and accomplished and capable - and we all are. And why are we feeling guilty? Somebody gave us the wrong information and then blamed us for it not working. That's not on. That's not fair.

Terri [00:31:17] That's right. Even-- I was going to say, even in your hospitalization, what maybe exacerbated the condition, most likely, knowing-- I already know things that you were eating and things. You weren't eating any outlandish things or doing outlandish things. You were eating things that we're all taught to eat, but they didn't work for your body.

LeeAnn [00:31:37] They didn't work for my body. And then after I got out of the hospital, I actually went further down the carnivore, the animal-only spectrum. And that really works for my body. Like, that's my safe diet. Like, if I am not feeling well, I go right back to that part of my diet. And then if I'm feeling great, you know, I'll have a little bit of plants now and again. Everybody's different, but I had to learn that. And again, having the confidence to have agency to say, "No, I don't eat vegetables. They don't work for me. I don't eat beans. You can eat them. You have a different genetic evolution, you have a different body. They may be the best thing for you, but they don't work for me." And then just not eating them.

Terri [00:32:25] That's right.

LeeAnn [00:32:26] Yeah. So that confidence in my own agency.

Terri [00:32:30] Absolutely. Well, I'm glad that you mentioned again the groups. A lot of people listening to this will be people who are already members, so you'll get a lot of

feedback from people in the Community, but there also are a lot of listeners who aren't in the Community, haven't found us yet, haven't made a decision about the Community yet. One of the things that you and I keep talking about is the power of these groups, of getting to have these large group discussions, to identify with other people who have been given some of the same problematic messages and are figuring out a different way to manage their health and their weight, and just the powerful things that come through the Community connections.

[00:33:13] And even though our coaching relationship is done, I still get to benefit from having you often come to my meetings and I always love your insights, but there's one that I'm hoping you'll share before we go. I've shared it with other clients saying, "Oh, one day a woman said this is my group and it was so powerful." So if you could share with us-- I think you were visiting somewhere and you walked down the street and you made a really, I think, astute observation that helps all of us in this journey.

LeeAnn [00:33:43] Yeah. So I was visiting my hometown again in Canada, and I was standing at the top of a shopping street, and it was a long, straight street. It's a street that I know very well because I used to live in this neighborhood and there's lots of cute shops all the way up and down the street. And I just looked and I said, "Okay, here is a liquor store, here is a cafe selling coffee, here is a bakery, a gelateria, a chocolate shop, a gelato shop." It's Canada, so, "Here's a cannabis shop and another cafe and another cannabis shop. Oh, and one shoe store and then one butcher and then one greengrocer and then another cafe and another ice cream shop and another bakery." And I realized that about 70 or 80% of the shops on this street were selling these recreational compounds - so caffeine, sugar, alcohol, tobacco (because there were convenience stores that primarily sell tobacco), and cannabis. And I put the bakery and the chocolate shop and the ice cream shop in the same category as the liquor store and the bar and the cannabis shop. And I realized that these are recreational substances. I don't need them. They are recreational substances.

[00:35:17] And this was super helpful for me because I have a whole bunch of containers or skills or rules around dealing with recreational substances. Cannabis is not my thing. I don't use that. I use alcohol occasionally. Sometimes, in the past, I've used it where I didn't feel so good afterwards, but I know to avoid it and I can contain it. I use coffee every day. I've never used tobacco, but the point is these are non-necessary, recreational substances. And for me, sugar and grains are in that category, so the bakery and the ice cream shop and the chocolate shop are the same as the liquor store and the cannabis shop, for me.

[00:36:08] That really helped me because, again, in the theme of transferable skills, I have a lot of skills to deal with these recreational compounds. So I use those same skills in dealing with the sugar and the breads and the bakery goods. And so that really helped me put them in that same category.

Terri [00:36:29] I love it because often when I'm working with clients or in Community meetings, someone will inevitably say, "The difference between my problematic relationship with food or my food addiction is that I have to have food, but you never have to have tobacco or you never have to have cocaine. So, Terri, this is very different." And this is why I love having these examples. What you're saying is, yes, you do have to have food, but you don't have to have recreational compounds that are packaged as food.

LeeAnn [00:37:02] Exactly. They're not really food, yeah. They are recreational. And I'm not saying, "Never eat them. They're bad." I mean, it depends on your relationship with them.

Terri [00:37:13] Yeah.

LeeAnn [00:37:13] You know, it depends on your relationship with these recreational compounds. And *everybody* has some kind of relationship with recreational compounds. They have to manage them somehow because we live in this society where alcohol is available, tobacco is available, and you make choices and you have containers, and-- you know, for me, I know if I'm at home in an evening all by myself drinking martinis, that I'm in a bad place. So that's not a good-- you know, that's a signal to me - you're not using this compound very effectively. So everybody has some skills to deal with those. And there are things that are called 'food' that are not in the food bucket, they're in the recreation bucket. That helped me to deal with them.

Terri [00:38:00] Yeah. Thank you so much for sharing that. I knew when you said, "Yes," that you would do this interview. I said, "Oh, I can't wait to ask her about that," because that was one of the insights that you've shared in a group that just really stood out to me. So thank you for that.

[00:38:15] Well, LeeAnn, we have come to the end of our episode, and I just wanted to thank you so much, one, for your willingness to help me. We had a little bit of a scheduling issue with recording and I had to move this ahead of-- you're always kind of on my vision board of someone I'd want to bring in and I know it was kind of last minute, so just to thank you for that, but to thank you for all of the personal insights and openness that you've shared here. I think it's really going to be valuable to our listeners. So thank you so much for doing this.

LeeAnn [00:38:46] Well, thank you so much for giving me the opportunity. You know, this is really-- this experience working with you and with The Fasting Method, it really-- I mean, quite literally saved my life and has been very transformational. It really has. And it's just been amazing for me. It's been an amazing experience.

Terri [00:39:04] Fantastic. And thank you for letting me be a part of it. Well, we're going to close here, everybody, so we will look forward to seeing you, or I guess talking to you again in a future episode. Hope everyone does well. Happy fasting.