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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.

Nadia [00:01:19] Hi everyone, it's Nadia Pateguana and welcome to another The Fasting Method episode. So today I am here solo without my two wonderful co-hosts, which is not as much fun, but I must admit that I truly do love the opportunity to have a little bit more time to answer more of your questions. So I'm going to try to answer six of your questions today. And without further ado, let us get started with question number one.

[00:01:48] So your question says, "How do you manage fasting when training? I train Friday nights and Saturday mornings for about two hours each day, and I need something to support either before or after my workout. They are ideal days for 42 or 48-hour fasts because I'm busy all day and exhausted when I get home."

[00:02:10] Okay, great question. I definitely don't claim to be an exercise expert, but I have started-- and I've exercised on and off throughout my fasting journey-- and I have started exercising again pretty consistently. I'm actually doing cross-training, which for me is pretty intense considering I've never done it before. It's only about an hour or so probably about three times a week. However, I was wearing a CGM for a little while and so I was able to actually not only monitor how I felt, but also I was able to look at my continuous glucose monitor app on my phone and really just see what my blood sugars do during exercise when I'm fasting and when I'm eating. What I noticed is that, because I am used to-- my body is used to fasting and exercising, rather exercising in a fasted state, I actually noticed that my CGM was telling me that my blood sugars stay a lot more stable throughout my exercise when I haven't eaten, when I'm fasting. And what I noticed was that, even though it's not common for me to eat before exercise, it's not common for me to eat first thing in the morning-- I did try a few times to eat in the morning and then exercise. And what I noticed was that, of course, I would have that natural rise from eating and, particularly, I was eating, you know, more of the breakfast type foods that people are used to eating because I really just wanted to test out this theory if eating a higher-carb, more sugary type things would be beneficial in any way for me personally during exercise. And what I noticed this, not only did I have a big blood sugar spike from the higher-carb breakfast foods that I ate, but I also noticed that I had a significant drop. So while exercising (during those 45 minutes to an hour), my body used up that blood sugar very, very quickly and I actually had rebound hypoglycemia, which is very common for some of you, especially if you're pre-diabetic or diabetic, you may notice this rebound hypoglycemic effect.

[00:04:13] So even though people with diabetes are often concerned that they wake up with a high dawn effect and then if they exercise in a fasted state, that blood sugar number actually rises even higher and that concerns them. It isn't necessarily a bad thing if you really think about it because what your body is telling you is that it has the ability to produce fuel from your stores, your glycogen stores or otherwise, to produce sugar and fuel for you to fast. That's called gluconeogenesis-- for you to exercise, rather, and that's called gluconeogenesis. So we can see, both from my CGM experiments and from people with diabetes, that our body does have this ability. It does have this ability to provide us with fuel for exercise.

[00:04:54] Now, having said that, there's going to be a significant difference between people who are used to exercising in a fasted state and people that are not used to. In other words, if you're somebody who historically has always eaten something before you exercise and your body is of course used to burning that sugar for fuel, then when you transition, you're going to feel the difference, okay? The other thing is it does take some time for your body to become fat-adapted. As I mentioned at the very beginning, I'm definitely not an expert in this topic of exercise, but I would like to give you some resources of some people that you can look into. One of the people that comes to mind (I just saw him speak at a conference - Low Carb Denver - at the beginning of this year) is Thomas DeLauer. He talked quite a bit about this. And he basically said that you can train your body to exercise in a fasted state or in a fat-adapted state, or you can train your body to be a sugar burner. There's an obvious advantage, I guess, to both. The people that are used to exercising after having eaten (or sugar burners, as they are called) obviously find that that's an easy, quick way for them to get their fuel. So there is, as you can see, an obvious advantage to some people, or people would see that as an advantage. And of course people who have exercised in a fasted state or who are fat burners, they also see benefits. I certainly just described the benefits that I saw. I felt much better exercising in a fasted state, so having my body do its thing is much better for me than to have that super high and that super low. I don't feel well if I exercise after having eaten, particularly after having eaten a higher-carb, higher-sugar meal.

[00:06:43] I think what you were describing to us, though, is something a little bit different. What I'm thinking that might be happening here is, because you're doing such intensive two workouts in a row (so two hours on Friday night and two hours on Saturday morning) and I'm thinking that this has a lot more to do with dehydration than it has to do with fuel per se, okay? So what I'm thinking here and I've seen this happen with a lot of my clients, particularly people who exercised with a lot of intensity. For example, I worked with somebody for a very long time who was a golfer. She golfed for full days in the summer months. And what we found, working together, was that, no matter what we did, no matter how many electrolytes she may have taken, and even with some fasting aids, which is something else that I could recommend for you to try is try a fasting aid to give you that little bit of extra electrolytes and extra fuel, both Friday night and Saturday morning if you don't want to consider a meal on one of those days.

[00:07:45] But the reality is that the potential for dehydration during fasting with very intense exercise, the potential is high, right? The incidence, the reality is that you may dehydrate and that might be what you're feeling. The fatigue may be from that and you may actually feel unwell. And that probably has a lot more to do with dehydration than anything else. So you can definitely have a look at that, how you're taking your salt and magnesium, how much you're taking. You should always up your salt and magnesium if you're fasting and exercising. So let's say, on a regular day, you need about a teaspoon of

salt during your fasting days. If it's a fasting day and an exercise day, you may need two or three teaspoons of salt. So look into how to get that much salt. Look at the different resources on this. Same thing with magnesium. You know, if it's a regular fasting day and you're taking 400 milligrams of magnesium, you may need 800 or even higher for your fasting day that you're exercising.

[00:08:47] But what you're telling us is that you're doing two hours in the evening and then two hours the next morning. What might be happening to your body there is that you're just not having the ability overnight to rehydrate, which is, you know, how would you rehydrate overnight? Correct? Because you haven't had the ability to eat and even drink or even get electrolytes into you. So when it comes to dehydration, it really is all about prevention. You want to prevent it from happening because once it's happened, it's sort of like the point of no return. The best way to rehydrate is through food and diet.

[00:09:18] So what I ended up figuring out with my client a couple of years ago, the client that I was talking about, the golfing client, what we ended up figuring out together was that her golfing days really had to be eating days for her. Regardless of whether or not this fits into your schedule, you really just have to do what works for you. So although many, many people can exercise and some even pretty intensely in a fasted state, if you're finding that, especially when you're exercising two days in a row and in this particular case in the evening and then in the morning, absolutely no opportunity for proper rehydration in between, that this might just not work out for you. So very, very likely you would need a meal in there somewhere, okay? Because again, it's not that fasting is bad for you, it's not even that you don't get enough fuel. It's probably because you're just not having the ability to rehydrate properly. All right? I hope that helps. Look up those resources if you get a chance.

[00:10:14] Okay, second question: "When you track your weight on the scales weekly, why is it that if you weigh yourself the day before your official seventh day, you will still weigh the same as the week previously, but on the seventh day, your actual weight loss (or not) will show. How and what happens in the body for this to be a true reading?"

[00:10:35] Well, I'm going to try to infer from this question that what you're saying is that, regardless of what fasting schedule you're following (let's say you're following alternate-day fasting or you're doing some extended fasting.), what you're saying is that you weigh yourself, for example, on Friday morning every single week, regardless of your fasting protocol. And what you've noticed is that when you weigh yourself on that seventh day (so let's say it's every Friday morning), that if you weigh yourself on Thursday, you weigh the exact same as you weighed last Friday, but if you weigh yourself on Friday, you notice that you've either lost weight or sometimes have not lost weight.

[00:11:13] And I will tell you that this isn't true for everyone. This may be true for you. Of course, you've been noticing that, and maybe there's a good reason for that. You know, you may have a very cyclical type of life in that maybe there's something that you do from Friday to Thursday that always causes you to regain your weight. And then maybe the day that you weigh yourself is the day after a fasting day so, obviously, you are always lower than you were the week before or most often have lost some weight. Whereas if you weigh yourself the day before and that just happened to be after an eating day, you're just seeing that natural ebb and flow of weight loss.

[00:11:54] What I want to share with you is that nobody's weight-loss journey is linear. It is not as linear as we would like it to be. It's not like you lose half a pound every single day or

you lose whatever amount every single day, or that you don't lose at all for three days and then you lose weight. It doesn't-- it's not that linear. There isn't that much of a pattern except that you maybe-- what you may be sharing with us is that you're noticing a pattern only because you're probably doing the same fasting protocol week after week. And like I said, if you're doing an alternate-day fasting protocol (which is what most people I think are trying to do), if you weigh yourself on the seventh day and that just happens to be the day after a fast, then of course you're a little bit lower than you were last week if you've been fasting consistently all week. Whereas if you weigh yourself the day before and that just happens to be the day after an eating day, it's slightly higher. It may even coincide with the exact same weight that you had the week before. But if you were to plot this-- and I don't recommend that people do this. I don't think we should become so obsessed with the scale that we weigh ourselves every single day, but there are some people who are very data-driven and have done this, and I myself have even done it, only because I have zero emotional connection with the scale and so I've done it more for my own research purposes.

[00:13:11] But if you were to track your weight every single day for a period of time, you would see that there is this natural ebb and flow. And the ebb and flow can go in this direction that you're describing, that you're constantly losing a little bit of weight, but it isn't linear. Most often, I think most of us will notice that if you weigh yourself the day after a fast, your weight's a little bit lower, but if you weigh yourself the day after you eat, it may be naturally higher. And that's that natural refeed or regain after we eat, or, you know, if you call that insulin stacking or whatever it is that you call it.

[00:13:46] My personal opinion when it comes to weighing yourself, I do think that if you're going to weigh yourself, to do it once a week, consistently the same day of the week. Yes, if you do weigh yourself other days of the week, just be aware that it isn't going to tell you anything very consistently, so remember that. I do think that Friday morning, as I mentioned, is my favorite day to weigh of the week because, usually, people have been, you know, trying to be consistent with their therapeutic journey, if they're showing up to their fast three days a week. And so Friday morning is going to give you a pretty consistent number and, hopefully, it's going down, you know, in its own speed from week to week. But I don't think that it is as linear or there is much of a pattern there, except for the one that I just mentioned about weighing yourself the day after a fast or the day after an eating day, you may notice a pattern there, okay?

[00:14:38] I'm going to throw in another bit of advice there. If you do weigh yourself, make sure that you check other measures as well. My favorite measure is definitely to check your waist-to-hip ratio or waist-to-height ratio. I think that is definitely something that we want to be looking at and understanding the importance of what that means to both men and women. And also, if you want to look a little deeper, then maybe consider getting a scale that also measures your body composition, so your body fat percentage, your muscle mass, your visceral fat. I mean, these have been shown to be pretty accurate if you compare them to DEXA scans, or at least they're pretty good. They're like CGM (continuous glucose monitors). They're pretty good at showing you patterns. So I really like my body composition scale. I look at those numbers much more than I look at the weight per se. I'm much more interested in knowing, you know, what my body fat is doing and what my, you know, where my muscle mass is at and numbers like that. There's other fun numbers in there that you may be interested in looking at.

[00:15:43] All right. Let me get to your third question. And this person says, "I'd say I'm an advanced faster and have been eating low carb and intermittent fasting/extended fasting

now for five to six years. I've fallen off the wagon of eating low carb for months. Recently, I did a reset of a three-day fast and I wanted to continue but I felt horrible. My blood glucose was 63 and ketones were 9 in the evening, and blood sugar was 56 and ketones 7 that morning from my Keto Mojo monitor. I broke my fast that evening at 7 pm. It took me two days of eating to start feeling better. Can you explain a little of what those numbers could mean? Is it that my body is acidic? Would it have been dangerous if I continued? And did it just mean I didn't transition back to being a fat-fuelled burner?"

[00:16:36] Okay, these are three great hypotheses. So let me look into this with you a little bit. So what you're telling us is that for a period of time, even though you've fasted and you have that fasting muscle and were even consistent in the past, for a period of time, you were eating higher carb. What that means is that, physiologically, hormonally, if you're eating higher carbs for a period of time, then your insulin is going up, right? You're insulin stacking, as we say. And so your insulin, your hyperinsulinemia is at a higher point, right? Your levels of insulin are higher than they were back in the day when you were doing some more fasting. What you decided to do-- and a lot of people do this. I often mention that my husband does this all the time after a higher-carb period of binge or a period of life, after a work trip or whatnot, he decides to do an extended fast, a three-day, sometimes even a five-day fast. And I've often shared with you guys that I do not recommend this, and I personally do not do this because of my previous experience. So what could possibly be happening?

[00:17:39] I think you have some good hypotheses here of why this could be happening and you ask, you know, some good questions there. But very likely what is happening here is that, you know, you started this fast in a hyperinsulinemic state. You started this fast in a higher insulin state because of how you've been eating for the past few months. And then you used your willpower and, of course, your fasting muscle, your mindset. You used all of this together to be able to successfully do a three-day fast. It probably wasn't easy, but you were able to do it up to three days. At some point, you no longer felt well. It is possible that one of the things that could be happening here is that you're not yet fat fueling, so, you know, your body runs out of glycogen stores and it isn't yet burning fat for fuel. Your insulin hasn't dropped, possibly, past that point enough where you're actually burning fat for fuel and not fat-adapted yet. And so then you go through a lag period there where you're not burning sugar for fuel anymore, and yet your body doesn't have the opportunity to go into this fat-burning state and give you that fuel. I think that is possible given your blood sugar numbers and these high ketones.

[00:18:48] These high ketones, basically, they're telling us that your body is not utilizing them for fuel. It doesn't yet know or it hasn't yet switched to burning that for fuel. That's why they're so high because your body is not using them up for fuel. One thing that you could try when this happens, when you notice that you're fasting and your ketones are pretty high and your blood sugars are starting to get lower-- one thing you could try is some moderate activity and exercise. You know, even just walk up and down the stairs, a walk around your house if you're not feeling like going outside, or a walk outside, some type of moderate activity, moderate to high activity, if you can handle it, will force your body to utilize these ketones for fuel. And that might be enough. Sometimes it is. I've noticed myself it's enough to kind of switch and change things up and now all of a sudden you have fuel, you feel like you have a little bit of fuel.

[00:19:43] However, I think that one of the other things that's happening here that we have to be physiologically aware of is that when you go into a fast with very, very high insulin levels, right, especially after a trip or after eating higher carbs for a while, is that while

you're fasting, your insulin levels are dropping and as your insulin levels are dropping, it's signaling to your kidneys and to your body to release fuel, right, and so you start to dehydrate. This is one of the trickiest things and, really, the most common side effects of fasting is dehydrating and not being able to rehydrate appropriately.

[00:20:22] As I mentioned in the first question today, you know, the easiest way to rehydrate is actually through food. So when we are not eating, our only other option, of course, is to get salt and magnesium in the ways that we often recommend that people get. Some people will get that under their tongue or they'll take a capsule or they'll take an electrolyte powder or drink. So there are some ways to rehydrate and some that we recommend more than others while you're fasting. But if your insulin levels are dropping quite quickly-- and of course your ketones are going up because ketones and insulin, if you learn about this, if you study this, you'll see that they work in this seesaw, teeter-totter sort of fashion. As insulin drops, ketones go up rapidly. So as your insulin is dropping (and you can tell that it is because your ketones are going up high), your body might just be releasing way too much.

[00:21:18] So it's probably a combination of two things. One, you're just dehydrating very, very quickly, and this is called the keto flu. So people will notice this, not just when they're fasting, but they'll notice this when they transition from high carb to low carb very, very quickly, so when they go to a ketogenic diet after eating high carb and they're not aware of the fact that they actually need to rehydrate appropriately. This is the number one reason why when children are put on a ketogenic diet for epilepsy, they're actually admitted into hospital for the first few days or even a few weeks, is to monitor their electrolytes and other things as well.

[00:21:55] So I would say that, for sure, this is a combination of things. You're feeling horrible because you're probably dehydrated, right? Three days of fasting after higher-carb eating probably means that physiologically your insulin levels dropped, you released a lot of fluids and electrolytes, and you just weren't able to rehydrate enough. Sometimes you might be doing all the salt and all the magnesium and are still not able to rehydrate enough in that particular case. This is the same as I was describing before with people that are doing very intense training or exercise in a fasted state. Sometimes we just are not able to rehydrate enough and we often call that, you know, sort of like the point of no return. Once you're feeling lousy and you're dehydrated (whether you know you're dehydrated or not) it's a signal that you should eat something because really, once you're dehydrated, there's no better, safer way to rehydrate (quicker way to rehydrate) than through food. Eating signals your body to produce insulin. Insulin, in turn, causes retention. And so your body will retain the fluids and the electrolytes that you need through eating, through the process of eating. So it's safer and quicker and everything else.

[00:23:06] Your other question was, "Would it have been dangerous if you'd continued?" Well, you never want to push through. One thing is to push through if you know it's a mindset thing and you have the tools to work on your mindset and your, quote-unquote, willpower. Another thing is if your body is physiologically telling you that you are not well, you really should break a fast. And next time, you can do it slightly different.

[00:23:28] One of the things I often recommend for people to do when they've come off of a period of higher carb and they want to fast is I recommend a bridge, a transition, of fat fasting in between. So that will give your body the opportunity to transition easier and you will dehydrate less and you'll probably become fat-fuelled or fat-adapted quicker if you do it that way.

[00:23:52] All right. Let me get to your fourth question. This one is right up my alley. "I have an IUD and I don't have a period. How can I figure out when my cycle is? I like the concept of eating and fasting differently at different stages of my cycle."

[00:24:06] That's a great question. It's a very common question. I get this question quite a bit in our Women and Fasting webinars. I do a Women and Fasting webinar once a month for our Community on Mondays. And one of the subtopics there is fasting for your menstrual cycle. So understanding for women during their reproductive years that we are cyclical and, therefore, there are times of the month where it's easier to fast, times of the month that it's harder to fast, times of the month that you lose more weight, times of the month where you tend to retain more or gain more. There are times of the month where you have more cravings. And so understanding this is really, really important because, of course, knowledge is power. We can do a lot if we have this information.

[00:24:47] So your question is a very good question. If you have an IUD, or let's say you're post-menopausal, and you don't have a period, then how do you fast or how do you eat for your cycle? Well, I can tell you this. For post-menopausal women, I usually recommend that they create a calendar schedule as opposed to a schedule based on their cycle because they don't have a cycle. So that's easy enough. And your fasting schedule should be based on your goal. What are you trying to achieve? So usually when people say to us, for example, "I'm looking to lose weight." Many of you have heard this many, many times. I'm a big fan of repetition, but my favorite fasting protocol for weight loss is a 60/40 protocol and alternate-day fasting type protocol where you have the right balance between fasting and eating for continuous weight loss. So usually that looks like two meals a day on an eating day and then one or no meal for a fasting day, and doing that in an alternate-day pattern.

[00:25:43] For post-menopausal women, I usually recommend that you just create, on the calendar-- you know, you just put in when you have an eating day and a fasting day in the 60/40 percentile splits. So some weeks you might be doing three 42s, some weeks you might be doing two 48s or something a little bit different, but something that fits into this concept. In our resources, we have this concept of the 60/40 split between eating and fasting, sort of breaking up the week that way.

[00:26:08] However, what you're telling us is that you're not post-menopausal, you are pre-menopausal and you have an IUD, and that's the reason why you don't have a period. So how should you eat or fast accordingly? Well, there are two options here. If you have absolutely no symptoms of a menstrual cycle (meaning that every week you feel the exact same when it comes to food and when it comes to fasting), then my recommendation would be that you put your fasting schedule on a calendar, based on a few things - what your social calendar looks like (So this week you would do this schedule, next week you would do that, schedule. The week after that, you would do another schedule just based on what your work and social life looks like.) and also, as I mentioned, based on what your goal is. So if you're looking to lose weight, you would do an alternate-day type of protocol or something like that.

[00:27:01] The other thing that you've probably heard me recommend to people is that if you do have a cycle or, rather in this case, you don't have a cycle but you do have symptoms of a cycle, there is a part of the month where fasting is easier. Usually, if you have a cycle, that's between the first day of your period and the day that you ovulate. Those 14 or so days, those two weeks, is usually-- that's when you're more estrogen

dominant, your progesterone is lower. It's during those two weeks that people find it easier to fast and they find that they have better results with fasting. So I will often recommend to women that, during those two weeks, they take advantage of this because you will-- because you're in a lower insulin state, you're more insulin sensitive during those two weeks, you do have the potential to lose more weight and it's easier. I do recommend that if you're looking at throwing in some more therapeutic fasts, some more extended fasts, that that's the time of the month that it's easier and safer to fast.

[00:28:02] So for women with a cycle or women that have these symptoms, then you would take advantage of that based on your fasting muscle. Again, how much can you fast, whether it's alternate-day or a little bit longer? And you would do that during those first two weeks. Post ovulation, so once you ovulate, especially for younger women that are trying to conceive, then we do not recommend alternate-day fasting or therapeutic fasting. You then would switch to more of a whole-food type of eating, with whatever nutritional recommendations available for women trying to conceive, and you would stick to full meals as opposed to fasting.

[00:28:38] If you're not trying to conceive (in this case you because you have an IUD) then, if you have symptoms, for example, if you find that-- and you should track this. It's really important that you put this on a calendar. But if you find that there is a particular week every month where fasting is harder and you have more food cravings, that's most likely your luteal phase. That's the last week of your cycle just before your period, also known as premenstrual week or premenstrual syndrome, where you have more cravings, fasting is harder, maybe you have more retention. So if you map that out, if you put that in a calendar, you will be able to-- likely if you have symptoms, you will be able to identify which two weeks-- but there's one particular week, the last one that you will probably have more symptoms-- which week is your, you know, the last phase of your luteal cycle. And when it's harder to fast, it doesn't necessarily mean that you can't fast. If you're not actively trying to conceive, you could potentially fast, if you had the ability to. You could use some fasting aids. What many people share with us is that, once they've been doing fasting for a while, their PMS virtually disappears because their insulin resistance goes down, which is something very prominent that women with insulin resistance notice during their luteal phase. They become more insulin resistant and so they have more cravings and fasting is harder. But over the course of healing and over the course of a few months, you will notice that it becomes easier and easier. So even if you have an IUD and you don't have a period per se, you may be able to map out these symptoms.

[00:30:13] And so what do you do during the weeks that it's harder to fast and you have more carb cravings? My suggestion is that you fat fast instead. So fat fasting is a fast-mimicking type diet. So you're eating, which is easier because fasting is pretty challenging in the very high insulin-resistant luteal phase of your cycle, so high progesterone, high insulin resistance. If you're very insulin resistant, if you're diabetic or if you have PCOS, you may find that fasting, at least for the first few months during your luteal phase, is very, very hard. It will get easier the more insulin sensitive you become, so the less insulin resistant you become, the more you've healed. So month after month it will get easier. So what you can do during those months that it's harder to fast is you can fat fast instead and focus on TRE.

[00:31:04] So the idea here (and I wrote an article about this) is that you do not want to feed the insulin beast when insulin is at its highest, okay? And I did write an article about this on my website called Don't Feed the Insulin Beast. It's this idea that when you're most craving, when you're in this higher-insulin state, that what you want to do is actually you

want to tame the beast. If you could, you would starve the beast by fasting. That's what we do during the first and second week of your cycle, right, because it's easier to - we do some more therapeutic fasts, some more extended fast. But when it's really, really hard to do, when you can't starve the beast, then you try to tame the beast with fat-fast foods. You definitely don't want to feed the beast with the sweeter things and some of the things that you're craving.

[00:31:47] Now, I do realize that a lot of the information I'm sharing with you guys is very contradictory to what you might be hearing from other people that talk about fasting, particularly fasting for women. I do hear a lot of people talking about women eating more carbs and that fasting is bad for women during certain times of their cycle, whereas I am talking specifically to women that are very insulin resistant, women that have central obesity, diabetes, PCOS, women that are in dire need of reversing this insulin resistance for their health. So I am very confident that doing fat fasting and some therapeutic fasts is what is best for women during this particular time of their therapeutic and healing journey.

[00:32:30] Okay, so let's get to the fifth question today: "I haven't heard you recommend bacon fat and lard as one of the fats to cook in. Is there a reason?"

[00:32:38] Well, I'm not sure why you haven't heard this, but I thought this was a great question and a great opportunity for me to address this. We, actually, in my home use lard. Lard is pig fat, whether it's from bacon or from-- we just buy lard from local markets. In Portugal, there's a lot of pork. A lot of pork is consumed in Portugal where I currently live so it's very, very easy to find some good quality lard. We actually cook quite a bit with lard, so I am not sure-- I just thought I would address this. I'm not sure why it's never come up. Probably because we talk a lot more about fasting than we actually do about specific foods. We actually, unless it's asked of us, would probably avoid talking about specific foods. So we just mostly talk about fasting and more of how we eat rather than what we eat. So I decided to take the opportunity to share with you that I do cook with lard. I also love duck fat. A lot of people use tallow. Tallow is a lot more expensive, but it's beef fat. And you probably know, or have heard, that, you know, the French cook a lot with duck fat. It's supposed to be very, very fancy, but the reality is that it's just very, very tasty. And so, of course, with all respect to our more vegetable-based friends and members and listeners, there are plenty of good, more plant-based fats that you could also use, and I also use, to cook with like olive oil, avocado oil, and any of the other fats that you're comfortable with. But we are 100% in support of any real, whole food whole foods, including these wonderful fats, whether they're animal or plant-based.

[00:34:20] All right. Last question for today, and it's a big one: "How long does the rise of insulin last after a meal?"

[00:34:29] Now, I have to tell you that I think that we could do a whole masterclass on this topic. I think that this is what we are all trying to figure out together. It is very individual. As you may have heard Coach Larry say many, many times, "N = 1," meaning that how long the rise of insulin will last after a meal for you will be different than how long the rise will last for me, but it also differs based on so many different things. It depends on, for example, for women, cyclical women, it depends on what phase of your cycle you're in. So during (as I just mentioned) the follicular phase of your cycle, the rise is probably going to go down much quicker, and during the second part of your cycle, it's probably going to last a lot longer. And if you're more insulin resistant-- again, just like women during the more progesterone-dominant phase of their cycle-- the second half of your cycle after ovulation up to the first day of your period, during that half of your period, if you're still cyclical, then

you're more insulin resistant. That means that that insulin rise will take longer to drop. But again, it's very individual and depends on-- for somebody who's more insulin resistant, it will take longer to drop. For somebody who is more insulin sensitive, it will probably drop quicker.

[00:35:50] But it also depends on what you've eaten, right? What you've eaten, how you've eaten. If you're grazing all day, then your insulin basically stays up all day. If you're doing TRE (time-restricted eating) and let's say you're fat fasting (which are the foods much, much lower in the food pyramid, the base of my food pyramid, the fat-fast foods, the lower insulin-producing foods), you're going to have, not a spike of insulin, but you're going to have a slight rise, a more insignificant rise of insulin and that's also going to drop quicker, and you're going to notice less of that probability of that rebound hypoglycemia that I talk about. When we get a very, very sharp spike in insulin, there's a very high probability of getting rebound hypoglycemia, so getting that blood sugar drop that feels very uncomfortable an hour or two after meals.

[00:36:38] So this is going to depend on many factors. If you're a woman, it depends on what phase of your cycle you're in. If you're more or less insulin resistant, it depends on what you've eaten. So I think it's a great question. I think it's important to also understand that you may be asking me, "How long does the rise of glucose last after a meal?" because a lot of people confuse insulin with glucose. And so we have to understand the difference between blood glucose as opposed to the hormone insulin, which is a hormone that we internally produce in response to what we eat. So there's just a lot of layers to this and why I feel like it's really important. It's important that we understand what is insulin, what is the hormone insulin? How is that different than our blood sugars, our blood glucose? How is blood glucose different than insulin? But how can we infer one from the other? Because they are directly correlated - one impacts the other one directly.

[00:37:31] So I do think that this is a big topic but, like I said, we could have a whole masterclass on this. If you look up insulin for type one diabetics or for insulin-dependent diabetics, type two diabetics that are dependent on insulin-- if you look up the three different types of insulin that they inject, they will actually tell you that each different type of insulin will have-- one is rapid acting and one is a slower acting insulin. So one will actually stay in your system much less time and it will act much quicker, whereas the other one sort of prolongs in your bloodstream for longer and it drops your blood sugars very, very slowly. So you can see that even in that (if you know anyone with type one or any insulin-dependent diabetic), you will know that there are different types of insulin that diabetics can inject, to further complicate things and to further appreciate this hormone called insulin, which really is the one thing that we are trying to manage as best as we can through how we eat and what we eat and when we eat, and even through our sleep management and our stress management.

[00:38:37] All of these efforts are in an effort to manage this very powerful hormone, which we know (based on Dr. Fung's books, based on our Community, and the ten-plus years of work that our team has put into this) is a very powerful hormone that has an impact not just on your metabolism, not just on your fat storage, not just on your blood sugar control, but it has tremendous impact on your sexual health, on your reproductive health, your mood and the overall health of every single organ in your body.

[00:39:11] So that was a great question and I apologize for not being able to give you a more direct answer, but I just really wanted you guys to appreciate the depth of this topic and of this particular hormone, which is ultimately what we are trying to learn more about

and to learn how to manage. And so I really do want to remind you that Dr. Fung's very first book, The Obesity Code-- when you think of insulin, think of the word 'code'. So The Obesity Code is about insulin. The Diabetes Code is about insulin. So just think about that. And if you have a chance, go back and read that first book, particularly The Obesity Code. It really is a great, amazing, in-depth look at this amazing hormone that we call insulin.

[00:40:01] I also wanted to take this opportunity to remind you guys that Terri and I had the amazing opportunity to share some exciting news with you guys when we talked to Megan about her new book coming out. So her new book coming out is called The Essential Guide to Intermittent Fasting for Women. It is coming out so soon - June 6th - and you can actually preorder it now from your local store or online retailers like Amazon. We had a great conversation about this recently. I hope you guys had a chance to listen to that episode where Terri and I got to talk to Megan in depth about her new book. Again, it's called The Essential Guide to Intermittent Fasting for Women. We actually even got to talking a little bit about how our two books differ - how my book, The PCOS Plan, and her book are different - and what are some of the things that we both talk about in both books and why Megan said that both of these books together, she feels, are just a complete, everything women need to know throughout all the different phases of their lives. So I'm really excited to get that book. I've pre-ordered mine. I hope you guys pre-order yours.

[00:41:11] All right, everyone. And that's a wrap for me today. It was a pleasure to have this opportunity today to answer so many of your questions. Please keep sending those in. Next time I get to speak with all of you, I will be joined by either Megan or Terri for another fun either Q&A or Hot Topic session. Have a great week and happy fasting, everyone.